



## **THE EMPLOYEES' ATTITUDE TOWARDS ISO 9001:2015 QMS AT KENYATTA NATIONAL HOSPITAL, KENYA**

**Karume Benjamin Anyong<sup>1</sup>, Prof. Jamin Masinde<sup>2</sup>, Dr. Eric Masese<sup>3</sup>**

<sup>1</sup>PhD Candidate, Department of Sociology, Psychology and Anthropology, Moi University, Kenya

<sup>2</sup>Professor of Sociology, Department of Sociology, Psychology and Anthropology, Moi University, Kenya

<sup>3</sup>Senior Lecturer, Department of Sociology, Psychology and Anthropology, Moi University, Kenya

### **ABSTRACT**

*The purpose of the study was to investigate the employees' attitude towards ISO 9001:2015 QMS at Kenyatta National Hospital. Data was collected from 291 employees of the Hospital selected through a multistage sampling procedure, by use of self-administered questionnaires. Findings of the study revealed moderate attitude scores that were stronger on cognitive aspects and weaker on experiential aspects. The study established that there was a positive relationship between employees' attitude and compliance with ISO 9001:2015 QMS at Kenyatta National Hospital with a Pearson  $r$  of 0.57 and  $P \leq 0.05$ . Key factors that influenced employees' attitude were identified as lack of management support, inadequate tools and equipment as well as absence of a reward mechanism linked to compliance. To improve employees' attitudes and by extension compliance with QMS, Kenyatta National Hospital needs to improve on equipment and working tools, improve management support as well as develop and implement a system of rewards and sanctions that are linked to compliance.*

**KEY WORDS:** *Attitude; Behaviour; Compliance; ISO 9001:2015 Quality Management Systems*

### **1.0 INTRODUCTION**

The Kenyan Health System has been facing many challenges that include declining trends of health indicators, health systems failure, dissatisfied customers/clients and health providers resulting to high attrition rates. There also exist wide disparities in the quality of services delivered not only between public and private institutions of similar categorization but also across regions and towns and in between institutions of disparate ownership and or sponsorship. Investments, particularly in infrastructure and human resources, have not been appropriately coordinated, with the result that these inputs are not rationalized or equitably distributed across the country. (Obura, 2018).

The Government of Kenya has been pursuing reforms to improve service delivery while at the same time improve livelihoods. The reforms have taken various forms and various phases. It is also evident that the reforms have always taken a top bottom approach with guidelines and circulars generated at the top and given to departments and agencies to implement.

The reforms have been far reaching and have cut across all sectors of the economy. The analysis of the reforms agenda by the government revealed very little involvement of the employees in the design and implementation of the reforms. This is despite the fact that the employees are the implementers of the reforms.

One of the key reforms that have targeted all public sector organizations in improving service delivery is the implementation of ISO 9001 Quality Management Systems and subsequent certification. Implementation of ISO certification requires that employees comply with the requirements of the QMS. The success of such implementation, is influenced by attitudes, perceptions and behaviours exhibited by the employees involved in the business processes. There is also need for employee involvement in ensuring that they support the entire process. The lack of employee involvement leads to resistance to change and lack of internalization of the requirements of the QMS. As a result, public sector



organizations, such as Kenyatta National Hospital (KNH), are caught up with the dilemma of compliance versus commitment with anecdotal evidence suggesting that implementation is driven mostly by compliance with performance contract requirements as opposed to a commitment to improve service quality. In as much as the organizations are certified, the quality of services provided still remain below public expectations.

Adoption and successful implementation of the Quality Management Systems and reforms in general by the employees is dependent on a number of factors linked to their involvement. Firstly, the employees must have adequate knowledge of the expectations of the organization and their own expectations. Secondly, they must have a positive attitude towards the outcomes of the initiatives. Perceived positive outcomes lead to favourable positive attitudes towards the proposed changes. Thirdly, the organizational norms around the changes must be positive and favourable to allow for the changes to be internalized. Finally, the employees must demonstrate capability and ability to implement the changes. This is also referred to as behaviour control and refers to the ability of the employees to independently implement these changes. In this study, this is a process and is referred to as social construction. Where social construction is weak, the adoption and implementation of the reforms is weak as evidenced by poor service delivery. Where social construction is strong, the adoption and implementation of reforms is strong as evidenced by quality service delivery. Therefore the study intended to assess the employees' attitude towards compliance with ISO 9001:2015 QMS at Kenyatta national hospital.

## II: OBJECTIVES OF THE STUDY

The objective of the study was to investigate the Employees' Attitude towards ISO 9001:2015 QMS at Kenyatta National Hospital. The study hypothesised that there is a positive relationship between employees' attitude and compliance with ISO 9001:2015 QMS at Kenyatta National Hospital.

## III: RESEARCH METHODOLOGY

The study employed a cross sectional survey design. The primary data was quantitative and was collected through structured questionnaires. The questionnaire was used to collect information on demographics, attitude, and compliance. The questionnaire was constructed and designed following the guidelines for TPB as described by Ajzen (2013) and Ahmed (2018). It was then modified to collect additional information required in the study. In the questionnaire, a set of statements were given to the respondents. Respondents were required to list their responses on a 7 point Likert scale. Scoring was done based on the responses with 7 being the highest score and 1 being the lowest score. The use of the questionnaires was appropriate for the study since they collected information that is

not directly observable as they inquired about feelings, motivations, attitudes, accomplishments, as well as experiences of individuals. The questionnaires were self-administered. For the lower cadre staff, the questionnaires were administered by the researcher and trained research assistants. The reliability tests were administered using the Cronbach's Alpha on the questionnaires that were fully completed. The results yielded a Cronbach's Alpha Value of .757. A score of .7 and above indicates high reliability. The questionnaire was therefore considered reliable and consistent.

## IV: SAMPLING DESIGN

The unit of analysis for this study are the employees of Kenyatta National Hospital. On the other hand, the individual employees were the observation units. To determine the desired sample size from the population, the Slovin formula was used. The Slovin's formula was selected for this study because it allows a researcher to sample the population with a desired degree of accuracy. It gives the researcher an idea of how large his sample size needs to be to ensure a reasonable accuracy of results Stephanie, (2016). Stephanie (2016) further notes that Slovin's formula is used when nothing about the behaviour of a population is known at all. Therefore, using 4700 as the study population and 0.05 as the error tolerance levels, a Sample of 370 was selected for the study.

Multistage sampling procedure was used to arrive at the individual respondents. This is due to the complexity of the organization and the diversity among its staff. First, stratified sampling was employed to cater for the different categories of staff at KNH. Based on the population of each strata, the sample size was proportionately allocated to the two divisions. This allowed for proportionate representation of each division, which resulted in clinical services having a sample of 222 and corporate support 148.

The different staff were classified into the next strata based on job categories. There are 17 job groups at KNH. Sampling was also done proportionate to the population of each job category except for support staff who have minimum interactions with ISO Certification standards. For purposes of this study clusters of job groups were created and they included Management Staff (JG 1-5), Officer level Staff (JG 6-10), Clerical level Staff (JG 11-13) and Support Staff (JG 14-17). The final sample allocation included 8 management staff, 186 officer level staff, 116 clerical level staff and 60 support staff. To allow for significant representation, the sample size was adjusted to 377. The final allocation of the sample is summarised in the table 2:

Due to the expansive nature of the hospital, the departments from where the respondents were selected were sampled randomly through a simple random sampling procedure. From a list of staff provided by the human resource department, the final respondents were selected systematically



until the desired sample size was achieved. Systematic sampling is simpler and more straightforward and can also be more conducive to covering a wide study area. Additionally, results are representative of most normal populations, unless a random characteristic disproportionately exists with every "nth" data sample, which is less likely to occur.

## V: STATISTICAL DESIGN

After data collection, the filled-in and returned questionnaires were edited for completeness. Invalid questionnaires were removed based on an established criteria. This included questionnaires that were more than 40% incomplete; questionnaires that presented inconsistent responses (the tool had in built mechanisms for detecting inconsistencies) and questionnaires that had a large number of corrections. From 377 questionnaires that were administered, a total of 300 questionnaires were returned while after clean-up, a total of 291 questionnaires were found to be valid. This represented a response rate of 77% which is representative of the study population.

The quantitative data was coded and entries made into Excel worksheets. The data was later transferred to Statistical package for social sciences (SPSS version 20) for analysis. Coding ensured that the data is accurate, uniformly entered, complete and arranged to simplify tabulation. Analysed Data was presented using frequency tables. Tests for central tendency and dispersion including standard deviations and means were conducted. Cross tabulations for different variables were conducted against demographic characteristics of age, gender, job group, divisions and years of service. Relationships among variables was determined using chi-square and analysis of variance with attendant tests of significance including the p value and the Pearson's r. Factor analysis was also used to determine the significance of each of the constructs being measured under the variables. For this study the statistical levels of significance were set at  $p \leq 0.05$ .

## VI: STUDY LOCATION

The study was conducted at Kenyatta National Hospital in Nairobi, Kenya. Kenyatta National Hospital, one of the oldest public institutions in Kenya provided a perfect setting for this study. Within the KNH complex are College of Health Sciences (University of Nairobi); the Kenya Medical Training College; Kenya Medical Research Institute and National Laboratory Service (Ministry of Health). However, the study focused only on the Kenyatta National Hospital. KNH has 50 wards, 22 out-patient clinics, 24 theatres (16 specialized) and Accident & Emergency Department. The Hospital has total bed capacity of 1800 out of which 209 beds are for the Private Wing.

The study population comprised of 4700 employees working at KNH (Kenyatta National Hospital Report, 2015). Kenyatta National Hospital is composed of divisions,

directorates and departments. The structure comprises of two divisions namely clinical services and corporate services. The study population at KNH is summarised in table 1.

## IV: RESULTS AND DISCUSSIONS

Attitude was defined as an individual's overall perception of favourableness or un-favourableness towards a behaviour comprised of affective (experiential) and cognitive (Instrumental) dimensions. Experiential attitude (or affect) is the individual's emotional response to the idea of performing the behaviour while Instrumental attitude (or cognitive) is determined by beliefs about outcomes of behaviour.

To assess the strength of attitude, different aspects of instrumental and experiential attitude were posed to the respondents. The respondents scored on a 7 point Likert Scale where 1 represented very weak and 7 represented a very strong attitude. On the other hand, three parameters were used to assess compliance behaviour on ISO procedures (BI). These were expectation; intention and desire. The mean scores represent the strength of the intention with 1 being the weakest and 7 being the strongest. The overall mean score represents the strength of the Behaviour Intention which is compliance with ISO 9001:2015 QMS.

The strength of attitude was assessed using a set of psychometric questions. The overall mean score for attitude was 4.78. Considering 7 as the highest score, this represents a mean score of 68%. This implies a moderately positive attitude. A stronger attitude is more preferred. This is summarised in table 3.

Cognitive attitude towards compliance with ISO procedures was measured using three constructs that were based on outcome, importance, and motivation. The analysis revealed a high mean score of 5.71 or 82%. The outcome component (improves motivation of employees) recorded the highest factor loading of 7.27 compared to motivation (0.587) and importance (0.587). Experiential attitude is influenced largely by prior outcomes while undertaking similar behaviour and social norms. The overall mean score which reflects the strength was moderate with 3.84 or 54%. The constructs returned mixed strengths with motivation (5.5) returning the highest while norms returning the least (2.42). Lower experiential scores were responsible for returning a lower attitude score.

On the other hand compliance with ISO 9001:2015 QMS procedures was measured using the intention to comply as discussed by Ajzen (2013). The results indicated a strong intention to comply with ISO 9001:2015 QMS by employees at Kenyatta National Hospital. The mean score for compliance was 4.8 as shown in table 4.

The relationship between attitudes towards compliance with ISO 9001:2015 QMS procedures and compliance with ISO 9001:2015 QMS procedures are shown in table 5. The analysis revealed a positive relationship between attitudes and



compliance with ISO 9001:2015 QMS procedures ( $r = 0.522$  and  $p = 0.00$ ). Considering the value of  $r$  to be 0.522, we can conclude that there is moderate correlation between the two variables. The study's hypothesis that there is a positive relationship between employees' attitude and compliance with ISO 9001:2015 QMS at KNH was therefore confirmed as true.

Ajzen (1991) explains attitude toward behaviour as the degree to which a person has positive or negative feelings of the behaviour of interest. It entails a consideration of the outcomes of performing the behaviour. Studies have shown that all attitude related factors positively affect the employee performance. Motivation and job commitment has highly significant impact of performance of employees (Ray 2017). The attitudes of employees in the workplace can have a significant effect on the business as a whole. Attitude is one of the hidden, hard-to-measure factors that ends up being crucial to the success of a company. Whether for better or for worse, employee attitudes tend to have a drastic impact on the productivity of a business, both directly and through the effect on other job-related factors. (Ray 2017)

Attitude comprises of both experiential and instrumental aspects. Both instrumental and experiential attitudes contribute significantly to the overall attitude towards compliance with ISO procedures at KNH. Studies have found experiential measures of attitude to be more closely linked to intentions and behaviour. (Ajzen and Timko, 1986, Ajzen and Driver, 1992). This is based on previous experiences with the object in question. Staff at KNH have developed these attitude towards ISO 9001:2015 based on their experiences on how the management handles quality reforms at the institution.

Discussions with the staff revealed some of the reasons for the observed differences in experiential attitude. One of the reasons that was advanced by the respondents is the perception of the differences between clinical staff and corporate support staff. Kenyatta National Hospital is a health care institution and there were accusations that clinical staff have some sense of entitlement and look down upon the corporate support staff as inferior. Some of the corporate support staff feel discriminated upon especially in job grading and remuneration. As one staff from the corporate support put it "nurses are equivalent of diploma holders but some of them earn even more than master's degree holders who are in corporate support...this really demoralizes other staff..." Additionally, implementation of ISO is mainly driven on the clinical side and there are no elaborate rewards and sanctions that accompany compliance or non-compliance with the ISO procedures. However, there was general agreement that the outcomes of ISO certification especially as regards customer outcomes are beneficial. The lack of management support also affects the attitudes of staff towards compliance with ISO procedures. It was noted that the lack budgets to upgrade hospital equipment and provide some basic

working tools have led to some of the employees questioning the commitment of the management in ensuring that the quality management system is implemented successfully. This has also affected the attitude of the staff (Boiral, 2012) point out that affect has a direct effect on attitude, as well as an indirect effect that is mediated by the individual's belief. In addition, when individuals are concerned about a specific issue, the attitudes they hold about that issue are more likely to be strong. Cognition reflects a group of information processes that occur in our mind, which directly or indirectly influence attitude.

## V: CONCLUSION AND RECOMMENDATION

### CONCLUSIONS

The study sought to establish the relationship between employees' attitude and compliance with ISO 9001:2015 QMS at Kenyatta National Hospital. Findings from the study revealed that there is a favorable though moderately strong attitude towards compliance with ISO 9001:2015 QMS. There were stronger scores returned on cognitive factors as opposed to experiential attitude towards ISO 9001:2015 QMS. This is due to employees' negative experiences while implementing the Standard. The negative influences include lack of management support as well as lack of incentives and sanctions linked to compliance with the QMS. The study hypothesis that there is a positive relationship between employees' attitude and compliance with ISO 9001:2015 QMS was also confirmed as true. Implementation of ISO 9001:2015 QMS aims at modernizing public service and increase efficiency. However, efficiency and modernization cannot take place while the implementers are using outdated technology, poor equipment and dilapidated infrastructure. While the ISO 9001:2015 standards are good for enhanced customer experience, the lack of modern equipment and infrastructure makes implementation difficult. There is inadequate budget allocation even for the maintenance of the current equipment. The theory of planned behavior posits that as a rule, the more favorable the attitude and subjective norm and the greater the perceived control, the stronger should be the Compliance with ISO 9001:2015 QMS procedures.

### RECOMMENDATION

Kenyatta National Hospital should therefore ensure that reforms are implemented with corresponding upgrade in technology, equipment as well as adequate infrastructure. Secondly, there is need to introduce a system of rewards and sanctions that is linked to compliance with the QMS as well as excellent customer service. This will improve employees commitment to service as well as increase compliance with the QMS at KNH.



**TABLES USED**

**Table 1: KNH Population Distribution**

Division	Directorate	Total Population
Corporate Support	Affiliations and Institutional development Internal Audit and Risk Supply Chain Management Human Resources Facilities and Services Finance Planning and Strategy Corporation Secretary	1783
Clinical Services	Surgical Services Medical Services Pharmaceutical Services Nursing Services	2917

Source: KNH Human Resource Department, 2019

**Table 2: Total Sample Distribution**

Job Category	Number	Proportion	Sample Size	Adjusted	Final Sample	
					Clinical	Corporate
Director/Asst. Director	15	0.32%	1	2	1	1
Heads of Departments	30	0.64%	2	4	2	2
Middle level Managers	70	1.49%	6	6	3	2
Officer Level	1500	31.91%	120	120	72	48
Technician/Clerical Level	1600	34.04%	128	128	77	51
Support Level	1485	31.60%	119	119	71	48
Total	4700	100.00%	377	379	227	150

Source: Author's Own, 2019

**Table 3: Overall Attitude**

	Attitude Constructs	Mean	Standard Deviation	Factor Loading
Experiential	I feel motivated when complying with ISO Procedures	5.50	1.74	0.673
	I will apply ISO procedures to all processes in my work	2.42	2.06	0.674
	I don't feel stressed when I am complying with ISO procedures	3.61	2.16	0.632
Cognitive	I believe that ISO procedures are important for achieving organizational goals	6.12	1.37	0.588
	Compliance with ISO procedures improves motivation of employees	5.45	1.69	0.727
	I believe that employees are motivated with the application of ISO procedures	5.55	1.72	0.588
	Overall Mean Score	4.78		

Source: Field Data, 2020



**Table 4: Compliance with ISO 9001:2015 QMS Procedures**

Compliance with ISO 9001:2015 QMS Procedures	Mean	Standard Deviation	Factor Loading
I Expect to comply with all ISO procedures at KNH	5.97	1.46	0.728
I intend to comply with ISO procedures at KNH	2.35	2.16	0.222
I want to comply with ISO procedures at KNH	6.07	1.55	0.690
Overall Mean Score	4.80		

Source: Field Data, 2020

**Table 5 : Correlation between employees' attitudes and compliance with ISO 9001:2015 QMS**

Dependent Variable	Tests	Employees' Attitude
Compliance with ISO 9001:2015 QMS procedures	Pearson Correlation	.522**
	Sig. (2-tailed)	.000
	N	287

Source: Field Data, 2020

**REFERENCES**

1. Obura J., Mise, J., & Indiya, G. (2018). 'Relationship Between Quality Management System Adaptation and Organization Performance of Public Universities in Kenya;' in *Global Journal of Management and Business Vol 5(1) pp 071 – 079*, July 2018. Retrieved from [www.premierpublishers.org](http://www.premierpublishers.org) ISSN: 8018-0934 on May 20th 2021.
2. Ajzen, I. (2013). 'Theory of Planned Behaviour Questionnaire. Measurement Instrument Database for the Social Science.' Retrieved from [www.midss.ie](http://www.midss.ie) on August 25th 2021
3. Stephanie, E. (2016). *Slovin's Formula Sampling Techniques*. Extracted from [www.sciencing.com/Slovin-samplingtechniques](http://www.sciencing.com/Slovin-samplingtechniques) in January 17, 2021.
4. Ajzen, I.: (1991) 'The theory of planned behaviour.' *Organizational Behaviour and Human Decision Processes* 50, 179–211 (1991) Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4933736/> on 14th October 2021
5. Ajzen A, Timko C. (1986) 'Correspondence between health attitudes and behaviour.' *Basic Applications to Social Psychology*.1986;7: 259–276. doi: 10.1207/s15324834basp0704\_2. [Google Scholar]
6. Ajzen I, Driver BL. (1992) 'Application of the theory of planned behaviour to leisure choice'. *J Leis Res*. 1992; 24:207–224. [GoogleScholar]
7. Boiral, O. (2012). 'ISO 9000 and Organizational Effectiveness: A Systematic Review.' *The Quality Management Journal* 19 (3): 1637.
8. P Sivasankar, 2013, 'Employees Attitude Towards the Implementation Of Quality Management Systems With Special Reference To K.G. Hospital,' *Coimbatore in International Journal of Management Research & Business Strategy*, 2013 ISSN 2319-345X [www.ijmrbs.com](http://www.ijmrbs.com) Vol. 2, No. 4, October 2013
9. Ray Linda, 2917, *Effect of Employee Attitude on Productivity in the Workplace* Retrieved from [www.careertrend.com](http://www.careertrend.com) on 14<sup>th</sup> October, 2020