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ABSTRACT

The government has made significant financial contributions to the health sector yet public health institutions are still performing below the necessary standard. The medics to patient ratio being below the world health organization recommendations. The study established the effect of customer orientation on service delivery of Level Four Public Hospitals in Kakamega County, Kenya. The study adopted a mixed research design comprising of a descriptive and causal research design. The study target population was 304 comprising of 162 nurses, 135 Hospitals office staff and 7 Hospital Administrators. The study sample size was 173 using Yamane formulae. The study applied stratified and simple random sampling technique. Structured questionnaires aided in data collection. Pilot study was done at Sabatia District hospital in Vihiga County. Reliability was tested using Cronbach Alpha while validity was tested using content validity. The study analyzed data using both descriptive and inferential statistics. Descriptive statistics included frequency, mean, standard deviation, and percentages. Inferential statistics entailed Pearson correlation and regression analysis. Data was presented using tables and figures. The study found out that customer orientation had a significant influence on service delivery (t -statistic=7.489, p -value=0.000< 0.05). The study is of importance to medical practitioners, government Authorities, and management of hospitals in managing strategic orientation plans for service delivery. The study recommends that customer's orientation should be prioritized since it enhances service delivery.

Key words; Customer orientation, Service delivery, Level Four Public Hospitals

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INTRODUCTION

Customer orientation refers to client-based approach determined by achieving customer needs, understanding customer needs, exceeding client expectations, responding to customer grievances and time taken serving a client. Service delivery refers to quality of operations, efficiency, patient satisfaction, timeliness in attending to clients and employee satisfaction.

Strategic customer orientation serves as a framework for organizations to accomplish their strategic objectives. It can accurately represent the organization's values and present a comprehensive cognitive interpretation of its internal resources and external environment (Selmi & Chaney, 2018). Giuri (2019) discovered that service delivery in Indonesia is influenced by strategic orientation. Arias, Ocampo, and Cardona (2021) conducted an analysis of the impact of customer orientation on service delivery in the European health sector. The study underscored the significance of customer orientation in the context of service delivery. The success of any strategic orientation process is a criterion for firm performance in order to bring about development or change in current practices (Mlicka, 2016). Innovation success in the company's practice is achieved when the result of a deliberate operation of service delivery increases. In order to establish a competitive edge and attract high-performing consumers, orientation is the most critical factor in the decision-making process (Boohene, 2018).

Globally Arias *et al.* (2021) examined the impact of strategic customer orientation on service delivery on the healthcare industry in Europe. This found customer orientation, resource orientation and technological orientation of value on service delivery. Strategic orientation added up on green supply chain practices and its performance in manufacturing companies in Pakistan (Nadeem & Siddiqui, 2017). In Indonesia Pratono (2015) found strategic orientation and information technological as of value among small medium in Indonesia. A study in China by Yang and Zhang (2020) found

customer orientation of great importance on performance.

Regionally, Kormilitsyna (2021) investigated the impact of customer orientation on performance within the education sector in South Africa and found technology to be significant on service delivery. Boohene (2018) investigated the relationship between an entrepreneur's client orientation and the success of enterprises in Ghana. Though the study was on SMEs service delivery was attained.

Locally, research conducted by Abdille, Kirigia and Mwenda (2020) looked into how strategic customer orientation affected performance in Mombasa County. The researchers in this study set out to learn how public hospitals in Kenya affected service delivery after they established performance targets. Aladag *et al.* (2020) conducted a research investigation on client orientation within the hotel and tourism industry in Mombasa, Kenya. Abdille's (2021) study on the impact of strategic orientation on hospital performance in Kenya discovered that resource orientation has the greatest influence on beach hospital performance in Mombasa County. Waithaka (2016) examined the moderating effect of organizational factors on strategic orientation and service delivery at Nairobi securities exchange.

Developing countries like Mozambique, Nigeria, Tanzania, Mozambique, Mojave, and Kenya have large populations that lack access to basic healthcare. Public healthcare services have declined and are still declining, and this problem is most severe in public hospitals. As a result, public hospitals must adopt strategies customer oriented toward improvement in service delivery (Onyebu & Omotayo, 2017). Boohene (2018) looked studied the relationship between entrepreneurs' focus on customers and their businesses' growth in Ghana. The study found that entrepreneurs' company performance improved when they had easier access to consumers.

In spite of the fact that the health crisis is a worldwide problem, Sub-Saharan Africa has been

hit the hardest. Not only has the population of these countries grown substantially, but the epidemics of both communicable and non-communicable diseases have also intensified. But there is a severe and persistent shortage of medical personnel (Awino, 2015). Afolayan and Oniyinde (2019) found that resource orientation, in particular human resource for health constraints at nearly every level, has hindered health sector planning, administration, and, ultimately, health outcomes. In order to achieve the health-related Millennium Development Goals and ensure that everyone has access to high-quality healthcare, it is essential to improve the services offered by public hospitals (Aladag, *et al.*, 2020).

In recent years, certain countries, such as Kenya, have encountered challenges in the development of healthcare systems that can effectively provide quality treatment to their citizens. The Kenyan government has developed and executed policies that are intended to increase the availability of contemporary healthcare. It has been stated that the provision of health services should be sufficient to satisfy the fundamental requirements of the populace. Abdille (2021) proposed that the services should be designed to ensure that health services are easily accessible to Kenyans. The government is obligated to ensure that health services are safe, accessible, and affordable for Kenyans. Consequently, it is imperative to take a proactive approach to enhance the quality of health care by implementing strategic orientation practices.

Extensive devolution of health care service provision to the counties was a result of the new constitution, which was approved in 2010. The goal was to make service delivery more effective, equitable, and of high quality. In addition, devolution was meant to ensure efficient resource allocation, with a focus on a county's most critical health issues. To this end, the Kenya Health Policy was formulated, with an emphasis on efficiency and technical merit in allocating funds (MoH, 2022). In order to determine if devolution is succeeding in its

goals, knowledge of the health facilities' performance is required.

The government's commitment to improving the standard of living in Kenya, particularly in the health sector, is emphasized in key policy papers such as Kenya Vision 2030 and the Kenya Health Policy framework (Kenya Medical Practitioners, 2020). The Kenya Medical Practitioners, Pharmacists, and Dentists Union (KMPDU) have expressed their concern about the shortage of doctors in the country. The doctor-to-patient ratio in Kenya, which stands at 1:17000, falls significantly short of the 1:1000 ratio suggested by the World Health Organization (WHO). This imbalance has resulted in a hampered delivery of high-quality healthcare services, as reported by the Kenya Medical Practitioners, Pharmacists and Dentists Union (KMPDU) in 2023. Kakamega County, the second most populous county in Kenya, with a nurse-to-patient ratio of 34.87: 100,000, which is lower than the national average of 51.5: 100,000. Nairobi, the county with the highest population, has a nurse-to-patient ratio of 88.74 nurses per 100,000 patients.

Statement of the Problem

The government has made significant financial contributions to the health sector yet public health institutions are still performing below the necessary standard (KNBS, 2020). According to the World Health Organization (2022), the patient to nurse ratio is 1 to 6 globally. However, in Kenya, the ratio is approximately 1 to 30. Despite the relatively small number of doctors in Kakamega County, 13 of them have resigned as a result of delayed salaries and unfavorable working circumstances (Kenya Medical Practitioners, 2020). Kakamega County, the second most populous county in Kenya, with a nurse-to-patient ratio of 34.87: 100,000, which is lower than the national average of 51.5: 100,000. The nurse in Kakamega County faces significant work pressure in order to fulfill the healthcare needs of patients, which could potentially hinder the delivery of services (Agina, 2017).

The current healthcare services given in Kenya's public health system do not align with the

fundamental principles of excellent healthcare, which include privacy, dignity, choice, safety, autonomy, and fulfillment (WHO, 2022). Kakamega County had a malaria prevalence rate of 33%, which was the second highest in the region. This necessitates the implementation of effective measures in hospitals to address the issue (National Malaria Control Programme, 2022).

Research has been conducted on strategic orientation in several contexts, such as China (Yang & Zhang, 2020), Jordan (Obeidat, 2016), Thailand (Kerdpitak & Boonrattanakittibhumi, 2020) and Turkey (Alobaidi, 2019). Further the studies have been done in other sectors such as universities (Giuri *et al.*, 2019), and small and medium-sized enterprises (Pratono, 2016). Moreover, previous studies have examined the direct relationship between strategic orientations and performance (Abdille, 2020) but the present study included organizational variables as a moderating component. Abdille, (2020) while examining strategic orientations and performance of hotels in Mombasa County suggested further study in other sectors such as hospitals. This study therefore investigated the impact of customer orientation on the provision of services in Level Four Public Hospitals in the Western Region of Kenya.

Objectives of the Study

To determine the effect of customer orientation on service delivery of Public Level four Hospitals in Kakamega County, Kenya

Research Hypothesis

H_{01} : Customer orientation has no significant effect on service delivery of Public Level four Hospitals in Kakamega County, Kenya.

LITERATURE REVIEW

Resource Based View (RBV) theory

The resource-based view introduced by Barney (1991). The theory examines firm growth and diversification. Public hospitals grow through proper service delivery, increased customer satisfaction and development of infrastructure.

Resources such as hospital equipment should be able to stimulate service delivery. Research by Penrose (1959) laid the groundwork for the idea, in which she posited that development is mostly driven by unrealized management resources. Penrose conceded that a company's internal managerial resources can be both an opportunity and a threat to its expansion. One part of the knowledge-based resource that is useful in healthcare settings is the management resource. Managers are highly skilled at managing customer orientation.

According to Chahal *et al.*, (2020), resource-based thinking places an emphasis on assets that are difficult for competitors to replicate and have value within a specific strategic framework. These resources encompass management expertise, focus on customer needs, emphasis on technology, and efficient allocation of resources. Public hospitals and enterprises typically have different resources. Hospitals utilize distinct technologies in medication, and their competence in each product area is determined by their resources and their ability to effectively mobilize and integrate these resources.

The idea assumes that enterprises within an industry vary in terms of the resources they possess (Imran & Abbas, 2020). Consequently, every company possesses a distinct collection of assets and capabilities. However, this study specifically focuses on level 3 hospitals in Kakamega town, which are considered to be homogeneous. Furthermore, the theory postulates the presence of imperfect resource mobility. Consequently, acquiring company resources in the marketplace is challenging (Boohene, 2018). This may be attributed to their elevated transaction costs, since they need the utilization of other resources, or because they hold greater value for the corporation now in possession of them compared to any other potential scenario.

It is important to acknowledge that the resources of a corporation can directly or positively, as well as indirectly or negatively, affect the execution of its services. When enterprises strategically utilize their

resources, the firm's assets have a direct impact on customers and an indirect impact on service delivery (Boohene, 2018). For example, a hospital can improve its service delivery just through technical expertise.

Hospitals have resources that need coordination for effective service delivery. The resources can be attained through partnership with donors so as to build resource ability. Knowledge resource is based on experience and skills level of workers. Hospitals ought to utilize available facilities and disbursed funds from the ministry. However adequacy of resources becomes a key attribute (Arias *et al.*, 2021). The study finds resource based theory vital on resource orientation and technological orientation. Technologically training and ICT facilities crowns the resource based view.

Conceptual Review

Customer Orientation

The premise of customer orientation is to attract and retain a specific type of loyal patient population that seeks out a specific healthcare provider. It is anticipated that client orientation will have little long-term effect on growth in a dynamic framework, especially in a flourishing market. However, according to Ziggers and Henseler (2016), a customer-oriented strategy may work well in predictable environments, but it fails to inspire the kind of substantial innovation that is necessary in dynamic contexts. Consequently, the best strategy for propelling a company's performance in a customer-centric market is for the organization to center its actions on the client (Frambach *et al.*, 2016). Gaining an advantage over customers was defined as meeting or exceeding their demands, as well as their expectations, addressing their complaints, and minimizing the amount of time it took to service them.

Service delivery

Services are perceived to be availed if users agree or are satisfied and that it can be seen through infrastructural growth and the well-being of stakeholders in charge. Hospitals service delivery is

articulated through patients satisfactory and recovery from ailment (Izadi & Ahmadian, 2018). It is also seen through ease of service such as number of hours taken before service delivery. It is therefore a customer centered achievement process. The assessment of service quality in the healthcare industry was initiated by an American surgeon named Ernest Codman whose contributions to quality assessment resulted in the establishment of the American College of Surgeons and the Joint Commission on Accreditation of Health Organizations (Obeidat, 2016).

Service delivery refers to the level of quality and accessibility of a particular service. A service is considered supplied when customers possess a clear understanding of its nature, purpose, scope and operational procedures (Choi & Yoon, 2015). The document provides information regarding the requirements, restrictions, expenses, and acquisition process of the service. Delivering an excellent service entails providing and delivering promptly with minimal delay (Kormilitsyna, 2021). Consistently providing high-quality healthcare services generates a sense of being cared for in patients, resulting in increased patient satisfaction and loyalty. The manner in which doctors, nurses, and supported personnel interact with patients and how patients perceive their treatment are crucial indicators of the quality of service provided. This study utilized quality of service, efficiency and patient and employee satisfaction as primary metrics for evaluating service delivery.

Empirical Review

Yang and Zhang (2020) examined the impact of customer orientation on new product development performance in china. Based on a sample of 366 high performance manufacturing firms across ten countries, the obtained results of hierarchical moderated regression analyses reveal that customer focus, customer involvement and communication with customers have significantly positive effects on both financial and nonfinancial performance of firms. This study is innovative because it seeks to make a contribution to existing

literature from a theoretical perspective by investigating the sub-dimensions of customer orientation. The study examines manufacturing firms and not hospitals.

Utami and Nuvriasari, (2023) examined the effects of customer orientation, competitor orientation and promotion on the marketing performance of logistics companies in Surakarta City. The research design employed quantitative approach, utilizing a sample population of micro, small and medium-sized enterprises (MSMEs) in the expeditions or courier services sector. Data collection involved questionnaires and secondary data obtained from the Department of Cooperatives, MSMEs, and Industry in Surakarta City. Descriptive statistics and regression analysis were used to analyze the data. The result of hypothesis testing revealed that customer orientation, competitor orientation, and promotion did not have a significant effect on the marketing performance of expedition services companies in Surakarta City. In conclusion, customer orientation, competitor orientation, and promotion were found to be insignificant factors influencing the market performance of logistics companies in Surakarta City. This study population was on micro, small and medium-sized enterprises and not hospitals.

Islama and Zhea (2021) conducted a study on the effect of customer orientation on financial performance in service firms, the mediating role of service innovation. A theoretical research model was investigated via structural equation modeling (SEM) using 686 survey responses from the service industry. The findings of the structural equation model indicated that customer orientation is positively related to financial performance and service innovativeness respectively. And service innovativeness was found as a partial mediating effect, which means that the service innovativeness intervenes for some part but not all of the relationships between customer orientation and financial performance. The dependent variable was financial performance and not service delivery. The study was on service firms and not hospitals.

Aklilu and Kero (2024) examined the effect of customer orientation, open innovation and enterprise performance, evidence from Ethiopian SMEs. Explanatory research design and multi-stage sampling were used to acquire both primary and secondary data from the study area. The study used structural equation modeling to examine the data and research hypotheses in the suggested structural regression model based on the empirical data of 321 SMEs operating in the study area. The SEM results indicated that small and medium-sized enterprises with higher level of customer orientation are more innovative in their performance. The findings also showed that open innovation partially mediated the relationship between consumer orientation and enterprise performance. Hence, the study found that customer orientation creates better value through open innovation, having an indirect effect on the performance of SMEs. The study's findings suggest that enterprise performance can be realized by implementing business strategies that prioritize customer requirements and satisfaction. SMEs can leverage customer insights to create customer-focused innovation strategies that spread acquired knowledge and new ideas throughout internal decision-making processes, ultimately enhancing open innovation and performance of SMEs. The study dependent variable was enterprise performance and not service delivery.

Kerdpitak and Boonrattanakittibhumi (2020) studied the effect of strategic orientation basically customer orientation and organizational culture on performance of banks operating in the Thailand. A questionnaire based on structured questions was developed with reference to the objectives of the research. It was revealed by the results that significant and positive relation exists between customer orientations and performance. This study delved into banking sector and not hospitality sector

Zhu and Nakata (2007) reexamining the link between customer orientation and business performance. The study was based on the literature

that suggests that business performance is multidimensional consisting of market and financial dimensions, and that customer orientation is facilitated by information systems consisting of information technology, or IT, capability and information services. The study points to a positive significant relationship between customer orientation and business performance.

Babu (2018) studied the impact of firm's customer orientation on performance, the moderating role of inter-functional coordination and employee commitment. Drawing on dynamic capability theory and service climate theory, this study addresses how employees and a firm's inter-functional coordination play a key role in the firm's customer orientation to drive its customer-related performance. Based on a sample from the UK's service industry, the findings support the arguments. The findings also offer new insights into the interplay of different strategic orientations and employees' role in driving superior performance through customer orientation. The current study is moderated by organizational factors and not of inter-functional coordination.

Bruno, Giuseppina and Anna (2017) conducted research on customer orientation and leadership in the healthcare sector. The study centered on the examination of organizational culture, effectiveness, workplace social support, and leader conduct. A survey research was done among 57 health directors affiliated with the National Health Service in the northern region. The study found that workplace social support played a moderating role in the link between customer orientation and leadership. The present study utilized organizational elements as moderators to address the knowledge gap in the health sector regarding general strategy orientation.

Pehrsson and Pehrsson (2015) illustrated the influence of entrepreneurial orientation and market orientation on the contextual function of strategic orientation. The research demonstrated that organizations must recognize customer preferences, implement competitive strategies,

improve product innovation, and evaluate the impact of these modifications on consumer satisfaction in order to pursue customer orientation. Conversely, this investigation examined strategic orientation as a variable that is influenced by other variables, whereas the present investigation assessed it as a variable that influences other variables. The present study was focused on service delivery, in contrast to the previous study, which was based on performance.

Choi and Yoon (2015) investigated the impact of customer orientation on organizational performance. The study specifically examined the influence of customer orientation on organizational performance. The study found that employee dedication and competence played a role in influencing organizational results, namely by positively impacting the acceptance of organizational performance. Furthermore, it was observed that customer orientation had adverse effects on the efficacy of marketing and innovation in learning orientation. According to a study that investigated the influence of customer orientation and innovation on innovation orientation and organizational efficacy, market orientation is a critical factor in improving the delivery of firm services, including the success of innovation. The current study re-examined strategic orientation on service delivery of level four hospitals.

Research conducted by Chegenye *et al.*, (2015) looked into how different management systems affected the delivery of services at Kenya's Kakamega County General Hospital. The researchers in this study set out to learn how public hospitals in Kenya affected service delivery after they established performance targets. A descriptive case study design was employed by the researcher. Specifically targeted were 300 health workers with the hope of securing permanent roles for them. Using a random sampling technique, the population was divided into strata. One stratum included doctors and nurses, while the other stratum included clinical officers, laboratory technologists and technicians, dentists, and pharmacists. The

participants were chosen using a combination of simple random selection and selective sampling procedures in the study. In order to gather information, a closed-ended questionnaire was used primarily. SPSS was employed to ascertain the instrument's reliability and validity, which were 0.97 and 0.82, respectively. The research identified client orientation as a critical factor in the delivery of services. However, this study did not address additional variables such as technological orientation and organizational issues. Additionally, the quality-of-service delivery in the referral hospitals did not meet the expected standards.

Abdille (2020) examined the influence of organizational factors on the relationship between

Conceptual Review

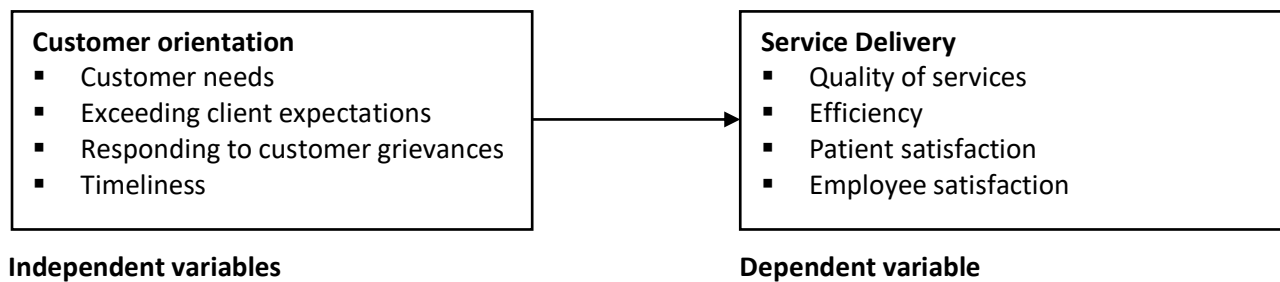


Figure 1: Conceptual Framework

Researcher (2024)

This conceptual framework explains two sectors of variables constituting the independent variables and the dependent variable. The independent variable comprises of customer orientation. Customer orientation was determined by customer needs, exceeding client expectations, responding to customer grievances and timeliness in attending clients. The dependent variable was service delivery measured by quality of services, efficiency, patient satisfaction, and employee satisfaction.

METHODOLOGY

Study Design: This study utilized a combination of descriptive and causal research designs, resulting in a mixed research design. Descriptive design relies on its capacity to elucidate the connections between variables. Causal research design, as described by Orodho (2003), is a method used to

strategic orientation and service delivery. The study used structured questionnaires and interviews in data collection. Data was analyzed using both descriptive and inferential statistics. The study found that organization factors had a significant effect on service delivery. The study proposed that the services should be designed to ensure that health services are easily accessible to Kenyans. The government is obligated to ensure that health services are safe, accessible, and affordable for Kenyans. Consequently, it is imperative to take a proactive approach to enhance the quality of health care by implementing strategic orientation practices.

examine and evaluate the cause-and-effect relationship between variables in a study. It is applicable for gathering data on individuals' attitudes, beliefs, habits, as well as various educational or societal matters. Questionnaires were utilized to collect primary data, which was then analyzed to find answers to the research questions and obtain the necessary information to meet the research objectives.

Target Population: The population is the comprehensive collection of elements from which a researcher intends to derive conclusions (Kothari, 2013). The target population is the particular group of individuals that a researcher intends to investigate and draw conclusions from. The study targeted the employees of level four hospitals in Kakamega County. Inefficient service delivery in level four hospitals evidenced by patient

complaints, medics to patient ration prompted this study. This based on hospital administrators, staffs, and nurses. The population is based on statistical knowledge where according to organization's Human Resource Employee Data (2022), employees working in various employment cadre at Kakamega County level 4 listed hospitals are 162 nurses (County Chief Officer of Health, 2023), 135 Hospitals office staff (Kakamega County Level four Human Resource Employee Data, 2022) and 7 Hospital Administrators (Kakamega County Level four Human Resource Employee Data, 2022). The total target was 304 respondents. This comprised of seven level four hospitals Butere District Hospital, Makunga Hospital, Likuyani sub county hospital, Lumakanda District hospital, Malava District hospital, Elwesero Sub County hospital and Iguhu sub county hospital.

Samples Design and Sample Size: Stratified and simple random sampling design was used in this study. The study adopted stratus on basis of hospital staffs such as, nurses, hospital administrators and Hospitals office staff of which were then picked randomly. Additionally, a simple random technique was employed to select respondents from the strata. Sharma (2017) suggests that the precision of the estimate can be

improved by dividing the population units into a specific number of groups.

Yamane (1967) presents a streamlined equation for determining the required sample sizes. This formula was utilized to determine the sample sizes. The confidence level is set at 95% with a significance level of P = 0.05. The formula used to calculate the sample size is $n = N/1 + N(e)^2$. Due to the study's characteristics, the researcher opted to choose a sample of 304 participants from personnel in different departments and sections across the Kakamega County.

where: n = sample size

N= Population, e= Level of precision

$$n = N/1 + N(e)^2$$

$$n = \frac{N}{1 + N(e)^2}$$

$$n = \frac{304}{1 + 304(0.05)^2}$$

$$= \frac{304}{1.76} = 172.7$$

The total sample was 173.

Table 1: Sampling frame

Hospitals	Nurses	Hospital office staff	Hospital Admins	Total
Butere	20	20	1	41
Makunga	22	23	1	46
Likuyani	22	22	1	45
Lumakanda	20	19	1	40
Malava	20	18	1	39
Elwesero	23	17	1	41
Iguhu	14	16	1	31
Sub-totals	162	135	7	
Sample Size	$\frac{162}{304} \times 173 = 92$	$\frac{135}{304} \times 173 = 77$	$\frac{7}{304} \times 173 = 4$	173

Source: Kakamega County Ministry of Health, (2024)

Instrumentation: The main method of data collection in this study was a questionnaire. The survey utilized solely closed-ended questions. A questionnaire is a written instrument that is specifically intended to collect information by

requesting written responses from individuals. Although questionnaires don't usually ask very in-depth questions, the data they collect is similar to what an interview would yield (Mugenda & Mugenda, 2013).

The major data in this study was acquired through the use of closed-ended questionnaires. These questionnaires contained prewritten response categories, allowing respondents to choose from a predetermined set of answers. The questionnaires were categorized into four distinct components. Section A encompassed inquiries regarding the respondent's general information, Section B focused on strategy orientation, Section C incorporated organizational variables, and Section D addressed service delivery information.

Questionnaires were selected as the preferred method of data collection due to their ability to achieve a high response rate. The questionnaires were distributed to respondents, who completed them and returned them directly to the researcher. This method required less time and effort to administer. Additionally, questionnaires allowed for the possibility of anonymity, as respondents were not required to provide their names. Furthermore, the use of closed-ended questions in the questionnaires reduced the potential for bias and facilitated easier comparison of responses to each item (Kothari, 2014). Questionnaires were responded to by the hospital administrators, nurse, and hospital office workers.

Data Analysis: The accuracy and completeness of the questionnaires collected from the participants in the data gathering phase were checked and double-checked. A version 23 of the Statistical Package for the Social Sciences (SPSS) was used to analyze the encoded questions. According to Babbie (2015), researchers are able to make sense of the massive amounts of data they acquire through data analysis.

Descriptive and inferential statistics were used to examine the data that was gathered for the study. Statistics that are used for descriptive purposes include metrics like standard deviation, mean, percentage and frequency. Executed regression and inferential Pearson correlation. The data was analyzed using quantitative methods. All of the independent variables' impacts on the dependent variable are included in this analytical model. Use of SPSS, version 23, was employed for the entry and analysis of the quantitative data derived from the questionnaire. In order to answer the primary research questions, quantitative data is presented in graphical and tabular formats using SPSS version 23, which also performs descriptive statistics like calculating percentages and frequencies. One variable depending on three independent factors was utilized in a multiple regression model to assess the impact of strategic direction on service delivery.

Inferential statistics used included Pearson correlation, simple linear regression, multiple regression and hierarchical regression. The Pearson product-moment correlation coefficient (r) was used to calculate the bivariate correlation, which quantifies the relationship between two variables. Regression analysis helped in ascertaining the relationship among study variables. The study tested 95% confidence level and 5% significance levels.

RESULTS AND DISCUSSION

A response rate of 87.9% was achieved, as 152 of the one hundred and seventy-three (173) questionnaires that were distributed were completed and returned. A research is considered excellent if the response rate exceeds 70%, as per Mugenda and Mugenda (2013).

Table 2: Response Rate

		Frequency	Percent
Valid	Returned	152	87.9
	Not Returned	21	22.1
	Total	173	100.0

Source: Field Data, (2024)

The study examined the respondent's level of agreement on statements about customer orientation in Kakamega County level four hospitals. The analysis of data utilized a Likert Scale with five levels, ranging from one (1) indicating the lowest positive reaction to five (5) representing the most

positive answer. Specifically, the scale was defined as follows: 1=Strongly Disagree (SD), 2=Disagree (D), 3=Fairly agree (FA), 4=Agree (A), and 5=Strongly Agree (SA).The results of the Likert Scale were shown in Table.

Table 3: Descriptive Statistics Results on Customer orientation

Description	N	SD (%)	D (%)	FA (%)	A (%)	SA (%)	Mean	Std
The hospital has set standards to deal with customer needs.	152	18 (11.8)	28 (18.4)	0 (0)	55 (36.2)	51 (33.6)	4.42	1.50
The set standards are customer based making service delivery attainable	152	2 (1.3)	6 (3.9)	0 (0)	54 (35.5)	46 (30.3)	1.59	1.49
The hospital understands customer needs making service delivery effective	152	8 (5.3)	52 (34.2)	0 (0)	38 (25)	54 (35.5)	4.47	1.50
The customer needs are well handled	152	4 (2.6)	60 (39.5)	41 (27)	0 (0)	47 (30.9)	4.31	1.65
Hospital strive to exceed client expectations	152	2 (1.3)	24 (15.8)	56 (36.8)	42 (27.6)	28 (18.4)	3.49	1.50
Client concerns are given maximum priority in the hospital	152	10 (6.6)	52 (34.2)	54 (35.5)	0 (0)	36 (23.7)	1.47	1.30
We respond to customer grievances effectively	152	2 (1.3)	8 (5.3)	54 (35.5)	57 (37.5)	31 (20.4)	3.31	1.22
Customers are always treated with much respect	152	6 (3.9)	50 (32.9)	65 (42.8)	0 (0)	31 (20.4)	2.49	1.11
The hospital has ensured that waiting time before customer service are minimal	152	26 (17.1)	38 (25)	0 (0)	72 (47.4)	16 (10.5)	4.49	1.62

Source: Field Data, (2024)

From Table 3, the results showed that 55(36.2%) agreed as 51(33.6%) strongly agreed that the hospital had set standards to deal with customer needs. This statement had an average score of 4.42 and a significant standard deviation of 1.496 showing that hospital had set standards to deal with customer needs. On whether the set standards are customer based making service delivery attainable, 54(35.5%) agreed as 46(30.3%) strongly agreed average score of 1.59 and a significant standard deviation of 1.49 showing that set standards are customer based.

Regarding on whether the hospital understands customer needs making service delivery effective 38(25%) agreed as 54(35.5%) strongly agreed, whether the customer needs are well handled 47(30.9%) agreed, whether client concerns are given maximum priority in the hospital 36(23.7%) agreed, whether company respond to customer grievances effectively, 31(20.4%) strongly agreed, whether customers are always treated with much respect 31(20.4%) strongly agreed and whether the hospital has ensured that waiting time before customer service are minimal 72(47.4%) agreed, a

significant standard deviation of above 1.0 were noted showing that customer orientation was agreed upon as of significant effect on service delivery in level four hospitals in Kakamega County. This finding agrees with Aladag *et al.*, (2020) who

conducted a study on customer orientation in hospitality and tourism in Mombasa Kenya. The study found that customer orientation had a positive and significant effect on service delivery.

Table 4: Descriptive Statistics Results on Service Delivery

Description	N	SD (%)	D (%)	FA (%)	A (%)	SA (%)	Mean	Std
Quality of service provided by the hospital is excellent	152	8(5.3)	0(0)	0(0)	15(9.9)	56(36.8)	1.63	1.48
The staffs adhere to efficiency slogan producing the best using limited resources available	152	2(1.3)	24(15.8)	59(38.8)	41(27)	26(17.1)	1.43	1.49
Customers are satisfied with services delivered at the hospital	152	47(30.9)	40(26.3)	0(0)	49(32.2)	16(10.5)	1.57	1.50
Our patients have always been satisfied and appreciation has always reached our desk	152	4(2.6)	43(28.3)	0(0)	89(58.6)	16(10.5)	1.50	1.50
Patients are always served upon arrival	152	24(15.8)	56(36.8)	48(31.6)	0(0)	24(15.8)	1.56	1.50
Employees at the hospital are satisfied with the direction the hospital is taking	152	34(22.4)	48(31.6)	58(32.9)	0(0)	20(13.2)	1.32	1.50

Source: Field Data, (2024)

Based on the study findings in Table 4: 56(36.8%) strongly agreed that the quality of service provided by the hospital is excellent. This statement had an average score of 1.63 and a significant standard deviation of 1.48 showing that quality of service provided by the hospital was excellent.

On whether the staffs adhere to efficiency slogan producing the best using limited resources available 41(27%) agreed as 26(17.1%) strongly agreed, whether customers are satisfied with services delivered at the hospital 49(32.2%) agreed as 16(10.5%) strongly agreed, whether our patients

have always been satisfied and appreciation has always reached our desk 89(58.6%) agreed as 16(10.5%) strongly agreed, whether patients are always served upon arrival 24(15.8%) strongly agreed and whether employees at the hospital are satisfied with the direction the hospital is taking as 20(13.2%) strongly agreed a significant standard deviation of above 1.0 were noted showing that strategic orientation positively affected service delivery in level four hospitals in Kakamega County. This agrees with Kising'u, (2017) who examined the influence of strategic orientation on service delivery in hospitals in Machakos County.

Table 5 Pearson Correlation Analysis

		Customers orientation	Service delivery
Customers orientation	Pearson Correlation	1	.522**
	Sig. (2-tailed)		.000
	N	152	152
Service delivery	Pearson Correlation	.522**	1
	Sig. (2-tailed)	.000	
	N	152	152

Source: Field Data, (2024)

Based on the data, it can be inferred that at a significance level of 0.05, there was a significant correlation between Customers orientation and service delivery. The correlation coefficient (r) between the two variables was 0.522, and the p-value was 0.000, indicating a statistically significant relationship as it is less than the threshold of 0.05. An increase in customer focus leads to a

proportional improvement in the service delivery of level four public hospitals. This is consistent with the results of a study conducted by Bruno *et al* (2017) on customer orientation and leadership in the health service industry. This implies that allocating more money results in an enhanced quality of treatment delivered by public hospitals categorized as level four.

Table 6: Customers orientation and Service delivery of Level Four Public Hospitals

Model Summary									
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	R Square Change	F Change	df1	df2	Sig. F Change
1	.522 ^a	.272	.267	.60945	.272	56.088	1	150	.000

a. Predictors: (Constant), Customers orientation

ANOVA ^a						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	20.833	1	20.833	56.088	.000 ^b
	Residual	55.714	150	.371		
	Total	76.547	151			

a. Dependent Variable: Service delivery
b. Predictors: (Constant), Customers orientation

Coefficients ^a						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.937	.356		2.632	.009
	Customers orientation	.709	.095	.522	7.489	.000

a. Dependent Variable: Service delivery

Source: Field Data, (2024)

The data presented in Table 7 indicates that the R-square value was 0.272, suggesting that 27.2% of the difference in service delivery across level four hospital staff may be attributed to customer orientation. The ANOVA test, conducted at a significance level of 0.05, showed that customer orientation was a significant predictor of service delivery across level four hospitals in Kakamega County. This was indicated by a P value of 0.000, which is less than the 0.05 significance threshold ($p=0.000 < 0.05$). The study found that customer orientation had a substantial impact on service delivery in level four hospitals in Kakamega County. This was supported by a t-statistic of 7.489 and a p-value of 0.000, which is less than the significance level of 0.05. The null hypothesis was rejected, and the alternative hypothesis - that customer orientation has a substantial impact on service delivery - was supported. The focus on customer satisfaction resulted in a 0.709 improvement in service delivery. The equation of the regression model $Y = \beta_0 + \beta_1 X_1 + e$, becomes $Y = 0.937 + 0.709$ customer orientation.

The results were consistent with those of Yang and Zhang (2020) who found that customer orientation was significant on service delivery. Similarly it agrees with Zhu and Nakata (2007) who found customer orientation significant on business performance. This further agreed with Yang and Zhang (2020) who stated that customer orientation was significant on new product development performance. On the contrary a study by Utami and Nuvriasari, (2023) found that customer orientation did not have a significant effect on the marketing

performance. However, the discrepancy can be due to the fact of examining marketing performance and not service delivery. Additionally, the study focused on management systems rather than strategic orientation.

CONCLUSION AND RECOMMENDATIONS

According to the first objective, the orientation of customers was a strong indicator of service delivery. The customer's orientation provided valuable information to the hospital management. Hence, the customer's orientation exerted a substantial impact on the provision of services in Public Level four Hospitals in Kakamega County, Kenya. In relation to the second objective, the focus on resources had a notable and beneficial impact on the provision of services in Public Level four Hospitals located in Kakamega County, Kenya. This led hospital administration to comprehend the resources required for service delivery.

Based on the aforementioned findings and conclusions, the study made the following recommendations: - Given that customer orientation improves service delivery, it should be given priority. This will facilitate the development of a robust customer culture in which senior personnel will engage in customer relationship management. The hospital should establish and enforce criteria to address customer requirements. It should comprehend customer needs, handle customers proficiently, endeavor to surpass customer expectations, effectively address customer complaints, and minimize waiting time before serving customers.

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