

**CONTRIBUTION OF TECHNICAL SUPERVISION ON DELIVERY OF HEALTH CARE  
SERVICES IN NAMATALA HEALTH CENTER IV IN MBALE CITY**

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**S21/MUC/BPAM/027**

**A DISSERTATION SUBMITTED TO THE SCHOOL OF SOCIAL SCIENCES IN PARTIAL  
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**UGANDA CHRISTIAN  
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**Declaration**

I Buyela Christopher Reg. No S21/MUC/BPAM declares that this research report entitled "technical supervision on delivery of health care services in Namatala health Center IV in Mbale city" is my original piece of work. It has never been presented anywhere in any institution of higher learning for any academic award.

Signed..........

Date 2<sup>nd</sup> 05 2024

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**Approval**

I certify that the research report has been written under my close guidance and supervision.

Signed..........

Date.....*28*...../*5*...../*2024*.....

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I would like with great pleasure to express my sincere appreciation to my beloved family, my guardian Rt Hon Anita Annet Among and all the supportive lecturers and friends at Uganda Christian University.

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## ABSTRACT

Technical supervision provides clinical oversight and guidance to healthcare providers, ensuring that medical practices adhere to evidence-based guidelines, protocols, and standards of care. This study assessed the effect of technical on delivery of health care services in Namatala health Center IV in Mbale city. Specifically the study investigated the effect of spot supervision on delivery of health care services, effect of performance improvement initiatives on delivery of health care services as well as evaluation of the routine supervision on delivery of health care services in Namatala health Center IV in Mbale city.

The study adopted a descriptive research design. This design was preferred because according to Kigenyi (2017) a descriptive research design is useful in collecting views from a large sample. Since the researcher intended to obtain in-depth data about the effect of technical supervision on delivery of health care services in Namatala Health Center iv and a descriptive survey research design was appropriate. The researcher collected data from 142 respondents in the study area who were selected using simple random and purpose sampling and questionnaires together with interview guide were used to collect data from study subjects.

The study found that Seventy-six percent of the respondents agreed with the opinion that routine supervision has significantly improved the quality of patient care at this health centre whereas 5% were in disagreement with the idea and only 19% of the respondents were not sure whether routine supervision has significantly improved the quality of patient care at this health centre. Additionally, study findings also showed Ninety-two percent of the respondents were in agreement with the opinion that performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV and those who disagreed had represented by 5% whereas 3% of the respondents were not certain whether performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV

The researcher recommends that, basing on the above findings, Authorities in Namatala Health Center IV should develop a structured schedule for spot supervision visits to ensure they occur more frequently and predictably. This will help maintain consistency and reliability in the supervision process. Furthermore, the Authorities in Namatala Health Center IV should provide comprehensive training for supervisors to improve their skills and effectiveness. Training should focus on best practices, communication skills, and methods for providing constructive feedback. Authorities in Namatala Health Center IV should introduce standardized protocols and checklists for supervisors to use during their visits. These tools will help ensure that clinical guidelines and protocols are consistently followed.

# **CHAPTER ONE**

## **INTRODUCTION**

### **1.0. Introduction**

This chapter presents the background to the study, statement of the problem, purpose of the study, objectives of the study, research questions, scope of the study, significance of the study, conceptual framework and definition of operational terms and concepts.

### **1.1. Background of the Study**

The concept of technical supervision in healthcare can be traced back to ancient civilizations, where healers and medical practitioners were overseen by senior experts or authorities. However, the modern practice of technical supervision emerged in the late 19th and early 20th centuries with the professionalization of medicine and the establishment of regulatory bodies and professional associations. These organizations developed standards of practice, competency frameworks, and certification processes to ensure that healthcare providers met minimum standards of education, training, and competence. Over time, technical supervision has become an integral part of healthcare systems, encompassing various aspects of clinical practice, management, and quality improvement (Donabedian, 1988).

Technical supervision provides clinical oversight and guidance to healthcare providers, ensuring that medical practices adhere to evidence-based guidelines, protocols, and standards of care. For example, senior physicians may supervise junior doctors during medical procedures, providing mentorship, feedback, and support to enhance clinical skills and decision-making (Institute of Medicine, 2001). Technical supervision is essential for monitoring and evaluating the quality and safety of healthcare services. Supervisors conduct regular audits, inspections, and reviews of clinical practices, facilities, and outcomes to identify areas for improvement and ensure compliance with regulatory requirements. For

instance, hospital quality improvement teams may review surgical outcomes, infection control measures, and patient satisfaction scores to identify opportunities for performance enhancement.

Technical supervision facilitates ongoing professional development and lifelong learning among healthcare providers. Supervisors provide opportunities for training, education, and skill development to ensure that healthcare professionals remain up-to-date with the latest advancements in medical knowledge, technology, and best practices. Continuing education programs may include workshops, seminars, conferences, and online courses on topics such as patient safety, clinical guidelines, and emerging therapies (World Health Organization., 2003). Technical supervision helps mitigate risks and prevent adverse events in healthcare settings. Supervisors identify potential hazards, errors, and vulnerabilities in clinical processes and implement proactive measures to prevent harm to patients. This may include implementing safety protocols, conducting root cause analyses of adverse events, and implementing corrective actions to prevent recurrence.

## **1.2. Statement of the Problem**

The delivery of health care services in Namatala Health Center IV is in undesired state. Services like: maternal child care; HIV/AIDS care and ART services; antenatal care services; theatre services; outpatient and inpatient care; immunization and growth monitoring; postnatal care services; prevention of mother to child transmission (PMTCP); family planning services; and laboratory services are poorly delivered (GoU, 2018). Many studies have been carried out to establish the real cause of poor health care services in Health Center IV and many scholars attribute this to inadequate funding, understaffing and attitude of health workers. However, there is thin literature of the contribution of technical supervision on

delivery of health care services in Health Center IV and this is the reason this study will be undertaken.

### **1.3.1 General Objective of the Study**

The General Objective of this study is to examine effect of technical on delivery of health care services in Namatala health Center IV in Mbale city.

### **1.3. Specific Objectives of the Study**

The study will be guided by the following specific objectives:

1. To establish the effect of spot supervision on delivery of health care services in Namatala health Center IV in Mbale city.
2. To examine the effect of performance improvement initiatives on delivery of health care services in Namatala health Center IV in Mbale city.
3. To evaluate the routine supervising on delivery of health care services in Namatala health Center IV in Mbale city.

### **1.4. Research Questions**

The study seeks to answer the following questions;

4. To what extent does spot supervision contribute to delivery of health care services in Namatala health Center IV in Mbale city?
5. To what extent do performance improvement initiatives contribute to delivery of health care services in Namatala health Center IV in Mbale city?

6. To what extent does routine supervision contribute to delivery of health care services in Namatala health Center IV in Mbale city?

## **1.5 Scope of the Study**

### **1.5.1 Content scope**

This study was limited to the effect of technical supervision on delivery of health care services in Namatala health Center IV in Mbale city.

### **1.5.2 Geographical scope**

The study was carried out in Namatala health Center IV in Mbale city focusing on two variables; the independent and the dependent variables being bureaucracy and delivery health care services.

### **1.5.3 Time scope**

The research covered a period of three years 2021- 2024 as periods of reference in terms of Bureaucracy and delivery of delivery of health care services in Namatala health Center IV in Mbale city.

## **1.7. Significance of the Study**

The findings of this study are expected to be of great importance to the Government, management and Administration of Local Governments (Human Resource Department), the Researcher and various other stakeholders in the following ways:

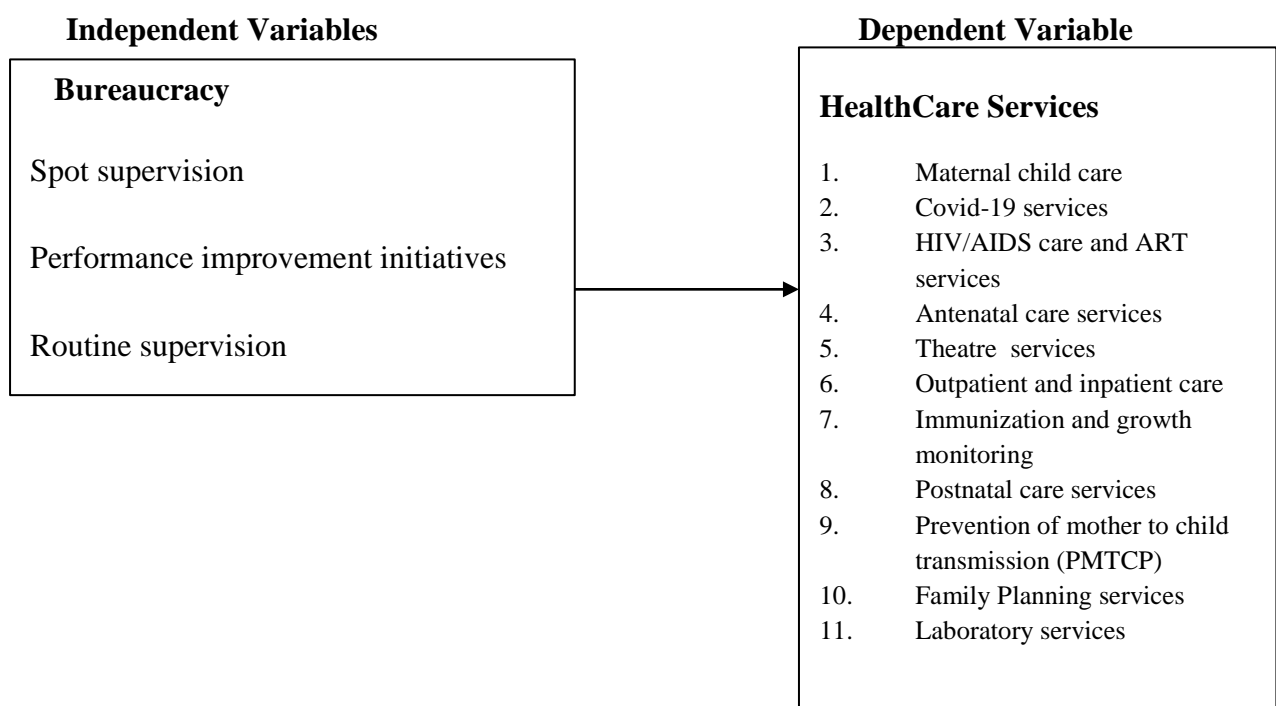
The basis and findings of this research will be useful by future researchers, students and academicians digesting the effects and importance of bureaucracy on delivery of health care services.

After determining the effect of bureaucracy and delivery of health care services, the City and district local governments will be in a better position to use the findings of this research to develop employee programmes that will see employees acquire relevant skills for effective health care services in health centers.

These study findings will assist different Human resource managers in identifying the best and the most appropriate bureaucracy factors to use in relevant situations for delivery of health care services in health centers.

The study might provide more knowledge to the management of Namatala Health center IV as a whole institution at large.

### 1.8. Conceptual Frame work



**Source:** (Adapted from: Csaszar (2008); Farazmand (2009); Alornyeku, 2011) and modified by the student, 2021).

Figure 1.1: The conceptual framework showing the effect of leadership styles on employee performance. In the conceptual framework depicted above, Bureaucracy, the independent

variable (IV) is hypothesized to contribution of delivery of health care services in Namatala Health Center IV. The framework shows that approval of decisions; hierarchy and organisational structure directly contribute to delivery of health care services in Namatala Health Center IV. While delivery of health care services which is the dependent variable (DV) will be measured in terms of: maternal child care; HIV/AIDS care and ART services; antenatal care services; theatre services; outpatient and inpatient care ; immunization and growth monitoring; postnatal care services; prevention of mother to child transmission (PMTCP); family planning services; and laboratory services.

### **1.9. Definition of Key Concepts**

**Bureaucracy:** bureaucracy refers to any large organization or institution structured with missions, functions, and processes and with significant impact on its internal and external environments.

**Decision making:** Decision-making can be regarded as a problem-solving activity yielding a solution deemed to be optimal, or at least satisfactory. It is therefore a process which can be more or less rational or irrational and can be based on explicit or tacit knowledge and beliefs. Tacit knowledge is often used to fill the gaps in complex decision making processes.

**Organizational Performance:** Organizational performance comprises the actual output or results an organization as measured against its intended outputs (or goals and objectives).

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.0 Introduction**

This chapter presents the theoretical framework, review of related literature of the study on contribution of Bureaucracy on delivery of health care services in Namatala health Center IV in Mbale city and gaps identified in existing literature. The study will be guided by the following specific objectives: to examine the contribution of approval of decisions on delivery of health care services in Namatala health Center IV in Mbale city, to assess the contribution of hierarchy on delivery of health care services in Namatala health Center IV in Mbale city, to establish the contribution of organization structure on delivery of health care services in Namatala health Center IV in Mbale city. It is the basis upon which research gaps are identified and research studies designed

#### **2.1 Spot supervision and delivery of Health care services**

Spot supervision involves periodic visits by supervisors or senior healthcare professionals to healthcare facilities at short notice. These visits aim to assess the quality of care, address immediate concerns, and provide on-the-job training and support to healthcare workers. In Uganda, spot supervision is used to complement traditional supervision methods and ensure the provision of high-quality healthcare services, particularly in rural and hard-to-reach areas. Spot supervision helps improve service delivery by identifying gaps in care delivery, equipment, and infrastructure. For example, during spot visits, supervisors may assess the availability of essential medicines, equipment, and supplies, and take corrective action to address shortages or deficiencies. By addressing these issues promptly, spot supervision helps ensure that healthcare facilities can provide timely and comprehensive care to patients (Okello et al., 2015). Spot supervision serves as a valuable tool for monitoring the

performance of healthcare workers and facilities. Supervisors can observe clinical practices, adherence to protocols, and patient interactions to assess the quality of care. For instance, supervisors may observe immunization sessions to ensure proper vaccine administration techniques or review patient records to assess compliance with treatment guidelines. This real-time feedback allows for immediate correction of any deviations from best practices.

Spot supervision provides opportunities for capacity building and skills development among healthcare workers. Supervisors can provide on-the-job training, mentorship, and coaching to address knowledge gaps and improve clinical skills. For example, supervisors may demonstrate proper infection control techniques, provide refresher training on clinical procedures, or conduct case-based learning sessions to enhance diagnostic and treatment skills (Waiswa et al., 2018). By conducting unannounced visits, spot supervision promotes accountability among healthcare workers and facility managers. Healthcare providers are aware that their performance is being observed regularly, which encourages adherence to standards of care and professional conduct. Moreover, spot supervision helps identify instances of absenteeism, negligence, or misconduct, allowing for timely intervention and disciplinary action as needed. Spot supervision can facilitate community engagement and participation in healthcare delivery. During spot visits, supervisors may interact with community members, gather feedback on their healthcare experiences, and address any concerns or complaints. This engagement fosters trust and collaboration between healthcare providers and the communities they serve, leading to improved health outcomes and patient satisfaction. Despite its benefits, spot supervision faces several challenges in implementation. Limited resources, including staffing, transportation, and funding, can constrain the frequency and effectiveness of spot visits. Additionally, logistical challenges such as poor road infrastructure and long distances between healthcare facilities can make it difficult for supervisors to conduct regular visits in remote areas.

To overcome some of these challenges, spot supervision can be integrated with digital health solutions such as mobile health (mHealth) technologies. For example, supervisors can use mobile applications to schedule visits, collect data on facility performance, and communicate with healthcare workers remotely. These digital tools can streamline supervision processes, improve data accuracy, and facilitate real-time feedback and support (Bagonza et al., 2018).. Uganda can learn from successful spot supervision initiatives implemented in other countries and scale up best practices to strengthen its healthcare system. For example, the Rapid Access Expansion (RAcE) program in Zambia uses spot supervision to improve the quality of maternal and child health services in rural areas, resulting in significant improvements in health outcomes.

## **2.2 Performance improvement initiatives and delivery of health care services**

Performance improvement initiatives play a critical role in enhancing the delivery of healthcare services in Uganda, aiming to address challenges such as limited resources, uneven distribution of healthcare facilities, and gaps in quality of care. Quality improvement initiatives focus on enhancing the quality of healthcare services by promoting adherence to clinical guidelines, improving patient safety, and reducing medical errors. In Uganda, programs such as the Uganda National Quality Improvement Framework aim to strengthen healthcare delivery through activities such as training healthcare workers on best practices, conducting clinical audits, and implementing quality assurance measures (Ministry of Health Uganda, 2015). Effective health information systems are essential for monitoring and evaluating the performance of healthcare services. In Uganda, initiatives such as the District Health Information System (DHIS2) help collect, analyze, and disseminate health data to inform decision-making and improve service delivery. By providing real-time information on

key health indicators, these systems enable policymakers and healthcare managers to identify areas for improvement and allocate resources effectively.

Capacity building initiatives focus on strengthening the skills and competencies of healthcare workers to deliver high-quality care. Examples include training programs for healthcare providers on topics such as clinical management, infection prevention, and maternal and child health. Organizations like the Uganda Ministry of Health and international partners like the World Health Organization (WHO) collaborate to develop and implement training curricula tailored to the country's healthcare needs (Kruk, Pate, Mullan, 2018). Investment in healthcare infrastructure is essential for improving access to healthcare services and enhancing the patient experience. In Uganda, initiatives such as the Health Sector Strategic Plan (HSSP) prioritize infrastructure development through the construction and renovation of healthcare facilities, procurement of medical equipment, and expansion of essential services. For example, the Uganda Cancer Institute has undergone significant expansion to increase access to cancer diagnosis and treatment services. Engaging communities in healthcare decision-making and service delivery is vital for ensuring that services meet the needs and preferences of the population. In Uganda, community health worker programs, village health teams, and community-based organizations play essential roles in mobilizing communities, raising awareness about health issues, and promoting preventive care. For example, community health volunteers may conduct home visits to provide health education, identify health risks, and refer individuals to healthcare facilities for further evaluation and treatment.

Public-private partnerships are increasingly recognized as a valuable mechanism for leveraging resources, expertise, and innovation to improve healthcare delivery. In Uganda, initiatives such as the Public-Private Partnership for Health (PPPH) facilitate collaboration between the government, private sector, and non-governmental organizations to expand access to healthcare services, improve infrastructure, and strengthen health systems. For

example, private hospitals and clinics may partner with the government to provide specialized services or support the delivery of essential health interventions in underserved areas (World Health Organization, 2019). Innovation plays a crucial role in driving improvements in healthcare delivery by introducing new approaches, technologies, and models of care. In Uganda, initiatives such as telemedicine, mobile health (mHealth) applications, and point-of-care diagnostics are being piloted to expand access to healthcare services, particularly in remote and rural areas. For example, the Uganda Village Project uses mobile phones to collect health data, monitor disease outbreaks, and facilitate communication between community health workers and healthcare facilities. Monitoring and evaluation are essential components of performance improvement initiatives, allowing stakeholders to track progress, assess impact, and make evidence-based decisions. In Uganda, initiatives such as the Health Management Information System (HMIS) and routine program evaluations provide valuable data on health service utilization, health outcomes, and program performance. This information enables policymakers and healthcare managers to identify gaps, measure progress towards targets, and adjust strategies as needed to achieve desired outcomes. Policy and regulatory reforms are essential for creating an enabling environment for performance improvement initiatives and ensuring that healthcare services are delivered effectively and efficiently. In Uganda, initiatives such as the National Health Policy and the Health Sector Strategic Plan provide strategic direction and guidance for health system strengthening efforts. Additionally, regulatory bodies such as the Uganda Medical and Dental Practitioners Council oversee professional standards and licensure requirements to maintain quality and safety in healthcare delivery. Achieving sustainability and scale-up of performance improvement initiatives requires long-term commitment, resource mobilization, and stakeholder engagement. In Uganda, efforts to institutionalize quality improvement practices, integrate innovations into routine care, and build local capacity are essential for

ensuring that gains made in healthcare delivery are maintained and expanded over time. Partnerships between government, donors, civil society, and the private sector are critical for mobilizing resources, sharing best practices, and driving continuous improvement in healthcare services.

Performance management, the use of performance information in strategic daily decision making, has not infiltrated local governments to the same degree as state or federal agencies. In a study conducted by Hall (2017), obstacles that affect employee performance in local governments include: insufficient administrative capacity, limited fiscal resources, insufficient economies of scale, absence of comparable entities for benchmarking, inadequate use of strategic planning, complex implementation environments (intergovernmental, intersectoral, cooperative, and collaborative), strings attached to state or federal grant awards, the illusion of control created by proximity to decision makers and citizens, task simplicity, and the cacophony of reform expectations (strategic planning, program evaluation, performance measurement and management, evidence-based practice). Because of these challenges, these small local governments are less likely to encounter demands for performance information, or to develop an a priori appreciation for its value to day-to-day administration. The study concludes with a look at what can be done to inspire increased attention to performance in local government administration.

Haenisch (2012) explains that while there have been a variety of studies concerning government worker motivation and productivity, few, if any, studies have focused specifically on state government workers perceptions about what factors affect their productivity. With more than 5 million workers employed by state governments in the United States, any improvement in state workplace productivity could have significant financial and service impact for society. In this study, state government workers identified those factors perceived as most affecting their workplace productivity. Data were collected through a

survey offered to state government workers in the state of Wyoming. Factor analysis was used to derive key productivity factors from survey responses. The results indicate that state government workers appreciate having freedom and autonomy, like their jobs and the sense of achievement, and welcome teamwork, but feel limited by poor supervision and management, poor communications, and insufficient budgets and staffing. To improve productivity, the workers would eliminate bureaucracy, supervise better, and improve communication.

According to Kotková & Yee (2021), public sector organizations face a lack of efficiency and ineffectiveness in providing their mandates due to fear of change among the public service workers. Public sector managers can instil a high performance-driven culture in employees of the public sector. As discovered from the case study analysis, these local governments have successfully constructed and implemented performance measurement and management systems. Concurrently, they practice performance-driven culture key characteristics to achieve their organizational targets without any significant difficulties. Performance reporting and communication systems are employed in all local governments in the research study. Mostly, the annual report is a kind of performance assessment for the employees in the organization. Depending on their organization, they report annually, monthly, and quarterly, etc. By adopting this reporting performance system, all the organizations in the study have improved in accountability, reputation, legitimacy, and performance assessment. Moreover, transparency, effectiveness, and efficiency are also enhanced, so there is more mutual trust in customers, stakeholders, and employees relationships. Ultimately, the performance review meeting is proceeding in all municipalities successfully. It also improves organizational learning and provides a better decision-making process in these organizations.

Maier-Rigaud (2008) argues that span of control and the "flat/tall" dimensions are closely related. Flat/tall refers to the number of hierarchical levels of organization. With a given

number of employees, relatively tall structure (many hierarchical levels) must necessarily have a narrower average span of control. Correspondingly, a relatively flat structure (few hierarchical levels) would necessarily have a wider average span of control. For this reason, studies reviewed in each are interchangeable. Worthy, for instance, stated "flatter structures tend to create a potential for more effective supervision". Again, no data have been reported to support this contention. Several studies have directly addressed the flat/ tall dimension. Meltzer and Salter (1962) examined the productivity of physiologists. A positive association was found between number of publications and vertical span. The amount of time taken to complete decisions did not differ significantly between tall and flat structures; however, flat organizations required more time to resolve conflict and coordinate effort, and tall organizations performed better with respect to profit and rate of return on revenue.

Performance formalization refers to the extent to which appropriate behaviour is described in writing. Standardization is closely aligned to formalization. Standardization prescribes or limits behaviour and procedures of members of the organization. Formalization in this sense might be a job description outlining those activities expected in a job classification (e.g., "the assistant personnel manager will be responsible for the testing of prospective employees"). Notice that, although this written statement describes a certain behaviour expected of persons in the classification, it does not in any way limit or prescribe procedures by which assistant personnel managers should fulfil this responsibility. Standardization would specifically outline those procedures by which the "testing of prospective employees" should (must) be accomplished (Okechukwu, 2018).

Peng (2012) states that centralization and Performance Centralization involves the locus of authority to make decisions in organizations. If, for instance, the power to make decisions is exercised by one or relatively few individuals, the structure is considered centralized. One person making every decision is the ultimate in centralization. The minimum degree of

centralization (decentralization) would exist in an organization if decision-making authority were exercised equally by every member of the organization. Degree of centralization, then, refers to the dispersion of decision-making authority throughout the organization.

### **2.3 Routine supervision and delivery of Health care services**

Routine supervision plays a pivotal role in the delivery of healthcare services in Uganda, serving as a mechanism for oversight, support, and quality assurance within the healthcare system. Routine supervision in Uganda is typically conducted by district health teams, regional health authorities, and national health agencies. These supervisory bodies are responsible for monitoring the performance of healthcare facilities, assessing compliance with standards of care, and providing guidance and support to healthcare workers. For example, district health officers regularly visit health centers and hospitals within their jurisdiction to assess service delivery, address challenges, and provide technical assistance as needed (Ministry of Health Uganda, 2010). Routine supervision contributes to quality improvement efforts by identifying areas for improvement and implementing corrective measures. Supervisors assess the quality of healthcare services, adherence to clinical protocols, and patient outcomes during routine visits. For instance, they may review patient records, observe clinical practices, and conduct interviews with healthcare providers to assess the quality of care delivered. Based on their findings, supervisors can develop action plans to address deficiencies and enhance service delivery.

Routine supervision provides opportunities for training and capacity building among healthcare workers. Supervisors identify training needs, provide on-the-job coaching, and organize workshops or seminars to improve clinical skills and competencies. For example, supervisors may conduct training sessions on topics such as infection prevention, maternal and child health, or chronic disease management to enhance the knowledge and skills of

healthcare providers (Makumbi, 2015). Routine supervision involves monitoring performance indicators to track progress towards healthcare goals and targets. Supervisors collect data on key indicators such as patient volume, service utilization, and health outcomes during facility visits. This data is used to assess the effectiveness of healthcare services, identify trends, and inform decision-making. For example, supervisors may track immunization coverage rates to ensure that vaccination programs reach target populations and prevent outbreaks of vaccine-preventable diseases. Routine supervision helps ensure the effective allocation and utilization of resources within the healthcare system. Supervisors assess the availability of essential medicines, equipment, and supplies during facility visits and address any shortages or stockouts. By identifying resource gaps and mobilizing additional support as needed, supervisors help ensure that healthcare facilities have the necessary resources to provide quality care to patients.

Routine supervision promotes accountability among healthcare workers and facility managers by ensuring that standards of care are met and performance expectations are upheld. Supervisors conduct regular inspections, review documentation, and provide feedback on performance during routine visits. This oversight helps deter misconduct, promote transparency, and uphold professional standards within the healthcare workforce (Ministry of Health Uganda, 2018). Routine supervision provides opportunities to identify and disseminate best practices in healthcare delivery. Supervisors observe clinical practices, interview staff, and review facility operations to identify innovative approaches or successful interventions that can be replicated elsewhere. For example, supervisors may recognize facilities that have achieved high levels of patient satisfaction or implemented effective disease management programs and share these success stories with other facilities to inspire improvement. Routine supervision fosters community engagement and participation in healthcare delivery. Supervisors may meet with community leaders, conduct outreach events,

or solicit feedback from patients and caregivers during facility visits. This engagement helps build trust, strengthen relationships between healthcare providers and communities, and ensure that healthcare services are responsive to local needs and preferences. Routine supervision plays a critical role in implementing health policies and guidelines at the grassroots level. Supervisors ensure that healthcare facilities comply with national and regional policies, protocols, and standards of care. For example, supervisors may monitor compliance with immunization schedules, antenatal care guidelines, or treatment protocols for common diseases such as malaria or HIV/AIDS. Ultimately, routine supervision contributes to continuous improvement in the delivery of healthcare services by fostering a culture of learning, innovation, and accountability within the healthcare system. By providing regular feedback, support, and guidance to healthcare workers, supervisors help build capacity, improve performance, and ensure that healthcare services meet the evolving needs of the population.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.0 Introduction**

This chapter contains a detailed description of the research methodology that was used in the study. It includes the research design, study population, sample size, sampling techniques, sources of data, research instruments, data collection procedure, data processing and analysis, quality control methods, that is, validity, reliability and ethical considerations.

#### **3.1 Research Design**

The study adopted a descriptive research design. This design is preferred because according to Kigenyi (2017) a descriptive research design is useful in collecting views from a large sample. Since the researcher intends to obtain in-depth data about the effect of Bureaucracy on organizational performance in Namatala Health Center iv and a descriptive survey research design is appropriate.

#### **3.2 Study Population**

The study population included technical staff at Namatala Health Center Iv. The study population will include; Hospital Director, Senior Medical Consultants, Specialized Medical Officers, Hospital Administrative staff.

#### **3.3 Sample Size Determination**

The sample for this study is 70 selected from 85 target population. From the population of study given above and in accordance with the Krejcie and Morgan sampling frame (1970) cited in Amin (2005); the sample size of the study is 70 respondents.

**Table 3.1: Sample size and Determination**

Category of target population	Target Population	Sample size	Sampling technique
<b>Senior Medical Officer and Medical Officer</b>	02	02	Purposive sampling
<b>Health staff</b>	50	36	Simple random sampling
<b>Patients</b>	98	70	
Total	150	108	

**Source: Namatala Health Center IV Report (2024)**

### **3.4 Sampling Techniques**

The study employed non-probability sampling techniques. These include purposive sampling.

#### **3.4.1. Purposive Sampling**

Purposive sampling is a sampling techniques used when the researcher is sure that the person being selected has the information needed (Amin, 2005). This research would purposively to select senior medical officer and medical officer using this method.

#### **3.4.2. Simple Random Sampling**

This is a probability technique of sampling whereby every element of the population has an equal chance and independent chance of being selected for the sample (Amin, 2005). This technique used to select health officers because it is too difficult for the researcher to use the whole population.

### **3.5 Data Collection Methods**

To collect a large quantity of data, the following data collection methods were used: questionnaire and in-depth interviews.

### **3.6 Research Instruments**

#### **3.6.1 Questionnaires**

In this study, questionnaires were used to collect data from health staff on issues surrounding technical supervision and health care delivery in Namatala health center IV. Questionnaires were used because apart from being easier to administer, they more reliable and also easier to analyze (Amin, 2003).

#### **3.6.2 Interviews**

Face to face interviews were held to collect data from the Senior medical officer and medical officer in order to collect in-depth data on technical supervision and health care delivery in Namatala Health center IV in Mbale City.

### **3.7 Validity and Reliability of Instruments**

The instruments of data collection in this study was assessed in terms of validity and reliability to ensure that dependability of the results of the study.

#### **3.7.1 Validity of Instruments**

Validity is the extent to which the instruments used during the study measure the issues they are intended to measure (Amin, 2005). To ensure validity of instruments, the instruments will be developed under close guidance of the supervisor. After designing the questions, they will be pre-tested. This will help to identify ambiguous questions in the instruments and be able to

re-align them to the objectives. Validity of the instrument was assessed by consultation with the supervisor and computation of the Content Validity Index which indicated that the validity of the instruments was acceptable.

### **3.7.2. Reliability of Instruments**

Reliability is the extent to which the measuring instruments produced consistent scores when the same groups of individuals are repeatedly measured under the same conditions (Amin, 2005). The study administered one type of questionnaire to selected respondents for Cronbach reliability test, Alpha values of 0.753 was attained implying that the tool is suitable for to be used in the study. Besides, most authorities accept the minimum alpha value of 0.5.

### **3.8 Data Processing and Analysis**

Data was processed and analyzed as explained below:

### **3.9 Processing of Data**

Data collected was coded, classified and before being processed by using categorization, tallying and tabulated. Coding which is an important technique in qualitative research was employed during the processing in order to enter it into the Statistical Package for Social Scientists (SPSS) computer software so as to analyse the data.

### **3.10 Data Processing and Analysis.**

This section discusses the approach was followed when analysing the, interviews and questionnaire data. The purpose of data analysis was to reduce sets of data as a basis for data management. Both non-quantifying and quantifying techniques of analysis was used to present the research findings.

### **3.10.1 Quantitative Data Analysis**

Quantitative data analysis entailed categorizing and summarizing data in order to find answers to the research questions. Quantitative data will be analyzed by using statistical tools to reduce the data, summarize it and make the most important facts and relationships apparent. Quantitative data from both the questionnaires and interviews will be subjected to statistical analysis using the Statistical Package for Social Sciences (SPSS) with the help of a Quantitative Economics. The statistical package helped in the breakdown of categories of data as well as in organizing the data more quickly. The reason for this choice is that the result of the study establishing the utilization in the management of records shown in descriptive detail in tables, graphs and illustrations which the SPSS generated. Quantitative data will be processed and analysed using three processes namely; editing, coding and tabulation. Calculation of frequencies and percentages, drawing of frequency tables and figures will be done with the help of excel and SPSS.

### **3.10.2 Qualitative Data Analysis**

The qualitative data in this study was analysed through data reduction, editing and categorizing into themes that are in line with the objectives of the study. The qualitative data from interviews will be analysed using content analysis method. The researcher categorized code, edit and analyse data according to themes and sub-themes in relation to research objectives and research questions to answer the research question.

### **3.11. Ethical considerations**

As a matter of principle, an ethical consideration was kept in mind at every stage of the study. The researcher will obtain a letter of introduction from the University to proceed with the study after the proposal is approved. Permission would be sought from Namatala Health

Center IV to administer the instruments. During the collection of data, anonymity was observed and extreme confidentiality observed while handling the responses. Information provided by the respondents were not pose any danger to them directly or indirectly and participation was out of their free will.

**CHAPTER FOUR**  
**PRESENTATION AND ANALYSIS OF DATA**

**4.0. Introduction**

The chapter presents the analysis and interpretation of data collected from respondents regarding the impact of bureaucracy on staff performance in Namatala Health Ceenter IV. A total of 150 questionnaires were distributed to the respondents, and the researcher was able to collect 142 completed questionnaires, representing a response rate of 94.6%. The researcher ensured a high collection rate by actively following up with the respondents. This involved persistent check-ups and maintaining continuous engagement with the participants throughout the data collection process.

**4.1. Demographic characteristics of Respondents**

Demographic data of respondents involved establishing the gender and age of respondents as are detailed below:

**4.1.1 Gender of Respondents**

**Table 4.1.1.1: showing gender of respondents**

<b>Gender of Respondents</b>	<b>Frequency</b>	<b>Percentage</b>
Male	59	41.5
Female	83	58.5
<b>Total</b>	<b>142</b>	<b>100</b>

**Source:** Field data, 2023

The interpretation of the gender distribution among respondents in this study indicates that the majority of participants were female, accounting for 58.5% of the total respondents. On the other hand, male respondents constituted 41.5% of the sample, representing a smaller proportion. The higher representation of female respondents suggests that their perspectives

and opinions hold significant weight in this study. It highlights the importance of considering gender-specific viewpoints and experiences within the context of the research topic. This gender disparity may also indicate specific trends or patterns related to the subject matter that predominantly affect or interest women.

#### 4.1.2 Age of respondents

**Table 4.1.2.1: showing age of respondents**

Age of Respondents	Frequency	Percentage
20 and below	8	5.6
21-30	39	27.5
31-40	52	36.6
Above 41 years	43	30.3
<b>Total</b>	<b>142</b>	<b>100</b>

**Source:** Field data, 2023

The interpretation of the age distribution of respondents in this study suggests that the majority of participants were in the age bracket of 31-40 years, accounting for 36.6% of the total respondents. This indicates a relatively higher representation of individuals in their thirties. Additionally, respondents above the age of 41 comprised 30.3% of the sample, reflecting a significant portion of the participants. Those ranging from 21-30 years represented 27.5% of the respondents, indicating a substantial presence of younger individuals. However, respondents aged 20 years and below constituted the smallest proportion, representing only 5.6% of the total respondents. The fact that the highest percentage of respondents falls within the 31-40 age bracket suggests that the opinions and perspectives gathered in this study are predominantly from mature individuals. This age group typically has more life experience and may have a broader understanding of the subject matter, potentially providing valuable insights. The relatively large representation of

respondents above the age of 41 further supports the notion of maturity and potentially deeper knowledge or expertise in the study's focus area.

#### 4.3. Contribution of spot supervision on health care delivery in Namatala health center IV

**Table 4.3.1. Showing Effect of spot supervision on health care delivery in Namatala health center IV**

<b>Spot supervisor on health care delivery in Namatala health centre IV</b>	<b>SD</b>	<b>D</b>	<b>N</b>	<b>A</b>	<b>SA</b>	<b>Mean</b>	<b>St. D</b>	<b>Comment</b>
supervisors visit Namatala Health Centre IV regularly.	1(.7%)	62(43.7)	1(.7)	77(54.2)	1(.7)	3.106	1.016	Moderate
The quality of supervision received during spot visits is high.	14(9.9)	91(64.1)	3(2.1)	32(22.5)	2(1.4)	2.416	.991	Low
Spot supervision has significantly improved the quality of patient care at this health centre.	5(3.5)	99(69.7)	0	38(26.8)	0	2.500	.928	Low
Spot supervision effectively ensures adherence to clinical guidelines and protocols.	19(13.4)	80(56.3)	0	43(30.3)	0	2.471	1.063	Low
Spot supervision has led to improvements in staff performance and productivity.	21(14.8)	95(66.9)	0	23(16.2)	3(2.1)	2.239	.967	Low
Feedback and guidance from spot supervisors make me feel more supported and motivated in my role.	32(22.5)	86(60.6)	0	24(16.9)	0	2.113	.946	Low
Spot supervisors are effective in identifying and addressing resource shortages (e.g., medicines, equipment).	19(13.4)	74(52.1)	0	49(34.5)	0	2.556	1.101	Low
<b>Overall mean</b>						<b>2.486</b>	<b>1.002</b>	<b>Low</b>

Source: Field data, 2022

The responses from the questionnaire were presented by combining the responses for strongly agree and agree as positive, and those for strongly disagree and disagree as negative. The response of "not sure" will be left as is. This approach to interpreting the scale will aid in presenting the findings of the study.

## Legend

## Implication for Mean Values

7.	Strongly agree = Very High	1-1-1.9 Very low
8.	Agree = High	2.0-2.9 Low
9.	Not Sure =Moderate	3.0-3.9 Moderate
10.	Disagree = Low	4.0-4.9 High
11.	Strongly disagree = Very Low	5.00 Very High

In mean values, “very high” means that the disparity in answers is minimal while “very low” meant that many respondents have varying answers.

In order to determine the contribution of spot supervision on health care delivery in Namatala health center IV, seven indicators were generated to guide the study. When respondents were requested to give their view about whether supervisors visit Namatala Health Centre IV regularly, 78(54.9%) of the respondents agreed with the opinion supervisors visit Namatala Health Centre IV regularly, whereas only 1(.7%) respondent was undecided, 63(44.4%) of the respondents disagreed with the opinion. The calculated mean (3.106, standard deviation = 1.106) indicates that supervisors visit Namatala Health Centre IV regularly is at a moderate level.

Majority of the respondents 105(74%) disagreed that the quality of supervision received during spot visits is high, whereas 3(2.1%) of respondents remained undecided, 34(23.9%) of the respondents agreed with the opinion. The calculated mean (2.416, standard deviation = .991) shows that the quality of supervision received during spot visits is high is at a low level.

When respondents were requested to give their view about whether spot supervision has significantly improved the quality of patient care at this health center, the majority of the respondents 104(76.7%) of the respondents disagreed with the opinion spot supervision has significantly improved the quality of patient care at this health center, while 38(26.8%) of the respondents agreed with the opinion. The calculated mean (2.500, standard deviation = .928)

indicates that spot supervision has significantly improved the quality of patient care at this health center is at a low level.

When respondents were asked to give their opinion about whether spot supervision effectively ensures adherence to clinical guidelines and protocols, the majority of the respondents 99(69.7%) of the respondents were in disagreement with the view and only 43(30.3%) of the respondents agreed with the opinion that spot supervision effectively ensures adherence to clinical guidelines and protocols. The calculated mean (2.471, standard deviation = 1.063) also indicates spot supervision effectively ensures adherence to clinical guidelines and protocols is at a low level.

When respondents were asked to give their opinion about whether spot supervision has led to improvements in staff performance and productivity, 91% of the respondents agreed with the opinion, whereas 5% of the respondents disagreed with the opinion and only 3% were not sure whether When respondents were asked to give their opinion about whether spot supervision has led to improvements in staff performance and productivity, The calculated mean (4.51, standard deviation = 0.858) elaborates that When respondents were asked to give their opinion about whether spot supervision has led to improvements in staff performance and productivity, is at a high level.

Ninety-two percent of the respondents were in agreement with the opinion that feedback and guidance from spot supervisors make me feel more supported and motivated in my role and those who disagreed had represented by 5% whereas 3% of the respondents were not certain whether the feedback and guidance from spot supervisors make me feel more supported and motivated in my role. The calculated mean (4.59, standard deviation = 0.853) shows that feedback and guidance from spot supervisors make me feel more supported and motivated in my role is at a high level.

Ninety-eight percent of the respondents agreed with the opinion that spot supervisors are effective in identifying and addressing resource shortages (e.g., medicines, equipment) and those who were not certain had representation of 2%. The calculated mean (4.59, standard deviation = 0.529) shows that spot supervisors are effective in identifying and addressing resource shortages (e.g., medicines, equipment) is at a high level.

The overall mean is (2.486) implying that the spot supervision and delivery of health services in Namatala health centre IV is at a low level.

#### 4.5. Contribution of performance improvement initiatives on health care delivery in Namatala Health center IV

**Table 4.5 Opinion of respondents about the performance improvement initiatives on health care delivery in Namatala Health center IV**

	<b>Indicators</b>	<b>SD</b>	<b>D</b>	<b>N</b>	<b>A</b>	<b>SA</b>	<b>Mean</b>	<b>Std. Dev</b>	<b>Comment</b>
1.	Performance improvement initiatives are regularly implemented at this health center.	2	7	0	36	55	4.37	0.927	High
2.	The performance improvement initiatives have led to significant enhancements in the quality of patient care.	3	5	0	39	63	4.42	0.986	High
3.	Staff receive adequate training and support as part of performance improvement initiatives.	2	2	2	25	69	4.59	0.768	High
4.	The initiatives have effectively addressed the key challenges in healthcare delivery at this health centre.	2	3	3	25	66	4.51	0.858	High
5.	Performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV.	2	3	3	17	75	4.59	0.853	High
6.	There is a noticeable improvement in staff performance and productivity due to these initiatives	0	0	2	37	61	4.59	0.529	High
7.	The initiatives have contributed to better teamwork and communication among staff members.	3	9	10	46	32	3.95	0.529	Moderate
8.	The initiatives have improved the overall efficiency of healthcare service delivery.	13	50	18	12	7	2.46	1.041	low
	<b>Overall Mean</b>						<b>4.18</b>		<b>High</b>

The overall mean is (4.18) implying that performance improvement initiatives and employee health care service delivery in Namatala health centre IV is at a high level.

In order to determine the relationship between performance improvement initiatives and health care delivery, eight indicators were generated to guide the study. When respondents were requested to give their view about whether performance improvement initiatives are regularly implemented at this health centre, 91% of the respondents agreed with the opinion that performance improvement initiatives are regularly implemented at this health centre, whereas 9% of the respondents disagreed with the opinion. The calculated mean 4.37, standard deviation = 0.927) indicates that performance improvement initiatives are regularly implemented at this health centre is at a high level.

Majority of the respondents (92%) agreed that the performance improvement initiatives have led to significant enhancements in the quality of patient care and only 8% of the respondents disagreed with the opinion. The calculated mean (4.42, standard deviation = 0.986) shows that the performance improvement initiatives have led to significant enhancements in the quality of patient care is at a very level.

When respondents were asked to give their opinion about whether staff receive adequate training and support as part of performance improvement initiatives, 4% of the respondents were in disagreement with the view whereas those who were not certain with the idea had represented by 2% and only 94% of the respondents agreed with the opinion that staff receive adequate training and support as part of performance improvement initiatives. The calculated mean (4.59, standard deviation = 0.768) also indicates that staff receive adequate training and support as part of performance improvement initiatives is at a high level.

When respondents were asked to give their opinion about whether the initiatives have effectively addressed the key challenges in healthcare delivery at this health center, 91% of

the respondents agreed with the opinion, whereas 5% of the respondents disagreed with the opinion and only 3% were not sure whether the initiatives have effectively addressed the key challenges in healthcare delivery at this health center. The calculated mean (4.51, standard deviation = 0.858) elaborates that the initiatives have effectively addressed the key challenges in healthcare delivery at this health centre is at a high level.

Ninety-two percent of the respondents were in agreement with the opinion that performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV and those who disagreed had represented by 5% whereas 3% of the respondents were not certain whether performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV. The calculated mean (4.59, standard deviation = 0.853) shows that performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV is at a high level.

Ninety-eight percent of the respondents agreed with the opinion that there is a noticeable improvement in staff performance and productivity due to these initiatives and those who were not certain had representation of 2%. The calculated mean (4.59, standard deviation = 0.529) shows that there is a noticeable improvement in staff performance and productivity due to these initiatives is at a high level.

When respondents were demanded to give their opinion about whether the initiatives have contributed to better teamwork and communication among staff members 78% of the respondents were in agreement with the view and those who disagreed with the opinion had represented by 12% and only 10% of the respondents were not certain with the idea that the initiatives have contributed to better teamwork and communication among staff members. The calculated mean (3.95, standard deviation = 0.529) emphasizes that the initiatives have contributed to better teamwork and communication among staff members is at a high level.

When respondents were asked to give their opinion whether the initiatives have improved the overall efficiency of healthcare service delivery, 16% of the respondents agreed with the opinion and those who disagreed had represented by 65% where those who were not certain had represented by 19%. The calculated mean 2.46, standard deviation = 1.041) elaborates that the initiatives have improved the overall efficiency of healthcare service delivery is at a high level.

#### 4.4 Contribution of routine supervision on delivery of health care services in Namatala health Center IV in Mbale city

**Table 4.7 Opinion of respondents about of routine supervision on delivery of health care services in Namatala health Center IV in Mbale city**

	Indicators	SD	D	N	A	SA	Mean	Std. Dev	Comment
1.	Routine supervision visits are conducted regularly at Namatala Health Centre IV.	32	29	5	22	12	2.52	1.443	Moderate
2.	The quality of routine supervision received at this health centre is high.	0	0	3	44	53	4.49	0.569	Very high
3.	Routine supervision has significantly improved the quality of patient care at this health centre.	2	3	19	29	47	4.17	0.968	Very high
4.	Routine supervision effectively ensures adherence to clinical guidelines and protocols.	3	20	31	29	17	3.36	1.095	High
5.	Routine supervision has led to improvements in staff performance and productivity.	0	5	20	51	24	3.93	0.807	High
6.	The feedback and guidance provided during routine supervision visits are useful for my daily tasks.	9	20	22	27	22	3.34	1.268	High
7.	Routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment).	3	14	37	25	20	3.46	1.072	High
8.	The availability of essential supplies has improved due to routine supervision.	0	5	29	51	15	3.76	0.773	High
9.	Routine supervision has had a positive impact on patient satisfaction at this health centre.	7	25	24	20	24	3.29	1.274	High
	Overall Mean						<b>3.59</b>		<b>High</b>

The overall mean is (3.59) implying that routine supervision on health care service delivery in Namatala health centre IV is at a moderate level.

In order to determine the effects of routine supervision on health care service delivery, nine indicators were selected. The results from the study that revealed the opinion of the respondents varied. Thirty-four percent of the respondents were in agreement with the opinion that routine supervision visits are conducted regularly at Namatala Health Centre IV whereas 62% of the respondents were in disagreement and those who were not certain with the view had represented by 5%. The calculated mean 2.53, standard deviation = 1.443) show that routine supervision visits are conducted regularly at Namatala Health Centre IV is moderate.

When respondents were asked to give their view about whether the quality of routine supervision received at this health centre is high, 97% of the respondents were in agreement that the quality of routine supervision received at this health centre is high. The calculated mean (4.49, standard deviation = 0.569) indicates that the quality of routine supervision received at this health centre is high is at a high level.

Seventy-six percent of the respondents agreed with the opinion that routine supervision has significantly improved the quality of patient care at this health centre whereas 5% were in disagreement with the idea and only 19% of the respondents were not sure whether routine supervision has significantly improved the quality of patient care at this health centre. The calculated mean (4.17, standard deviation = 0.968) elaborates that routine supervision has significantly improved the quality of patient care at this health centre is at a high level.

When respondents were demanded to give out their view about whether routine supervision effectively ensures adherence to clinical guidelines and protocols, 46% of the respondents

were in agreement with the opinion that routine supervision effectively ensures adherence to clinical guidelines and protocols whereas 23% disagreed and 31% were not with the opinion that routine supervision effectively ensures adherence to clinical guidelines and protocols. The calculated mean (3.36, standard deviation = 1.095) emphasizes that routine supervision effectively ensures adherence to clinical guidelines and protocols is at a moderate level.

Seventy-five percent of the respondents agreed that routine supervision has led to improvements in staff performance and productivity whereas 5% of the respondents disagreed and those who were not certain whether routine supervision has led to improvements in staff performance and productivity had represented by 20%. The calculated mean (3.93, standard deviation = 0.807) shows routine supervision has led to improvements in staff performance and productivity is at a moderate level.

When respondents were asked to give their opinion about whether the feedback and guidance provided during routine supervision visits are useful for my daily tasks, 49% of the respondents agreed with the opinion whereas 29% of the respondents were in disagreement and those who were not certain had represented by 22% of the respondents. The calculated mean (3.34, standard deviation = 1.268) shows that the feedback and guidance provided during routine supervision visits are useful for my daily tasks is at a high level.

When respondents were asked to give their opinion about whether only routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment), 45% of the respondents agreed with the opinion that routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment), whereas 17% of the respondents disagreed. Those who were not sure with opinion that routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment) had represented by 37%. The calculated mean (3.46, standard deviation = 1.072) indicates that routine supervision helps in

identifying and addressing resource shortages (e.g., medicines, equipment) is at a moderate level.

When respondents were asked to participate in giving out view whether the availability of essential supplies has improved due to routine supervision, 66% of the respondents agreed with the opinion that the availability of essential supplies has improved due to routine supervision, whereas 5% disagreed with the opinion and only 29% of the respondents were not certain with the view that the availability of essential supplies has improved due to routine supervision or not. The calculated mean (3.76, standard deviation = 0.773) shows that the availability of essential supplies has improved due to routine supervision is at a moderate level.

Forty-four percent of the respondents agreed with the idea that routine supervision has had a positive impact on patient satisfaction at this health centre whereas 32% of the respondents were in disagreement. Those who were not sure whether routine supervision has had a positive impact on patient satisfaction at this health centre. The calculated mean (3.29, standard deviation = 1.274) indicates that routine supervision has had a positive impact on patient satisfaction at this health centre is at a moderate level.

## **CHAPTER FIVE**

### **DISCUSSION AND INTERPRETATION OF FINDINGS**

#### **5.0. Introduction**

This chapter discusses and interprets the findings while examining the extent to which the studies succeed to satisfy its objectives. The findings were triangulated with other studies and sources to strengthen and confirm the findings. The chapter further discusses and explains the results and their relationship to the set research questions as presented in chapter four.

#### **5.1. Contribution of spot supervision on health care delivery in Namatala health centre IV**

The findings suggest a mixed perception regarding the regularity of spot supervision visits at Namatala Health Centre IV. While a significant portion of respondents (54.9%) agreed that supervisors visit the health center regularly, a notable proportion (44.4%) disagreed with this opinion. The calculated mean of 3.106, indicating a moderate level of agreement, reflects this divided perspective. This discrepancy underscores potential inconsistencies in the implementation of spot supervision practices, highlighting the need for further investigation into the factors influencing the frequency and effectiveness of supervisor visits. Factors such as staffing constraints, resource availability, and organizational priorities may contribute to variations in supervision practices, warranting closer examination to optimize spot supervision's contribution to healthcare delivery at Namatala Health Centre IV.

The survey results reveal a notable discrepancy in perceptions regarding the impact of spot supervision on the quality of healthcare delivery at Namatala Health Centre IV. A significant majority of respondents (74%) disagreed that the quality of supervision received during spot visits is high, indicating a prevailing dissatisfaction with the supervisory processes. Similarly, a substantial proportion (76.7%) disagreed that spot supervision has significantly improved

the quality of patient care at the health center. These findings, coupled with the calculated mean values indicating low levels of agreement (2.416 for supervision quality and 2.500 for improvement in patient care), underscore the perceived ineffectiveness of spot supervision in enhancing healthcare quality. This discrepancy highlights the need for a closer examination of the factors contributing to suboptimal supervision practices and their implications for patient care outcomes, suggesting avenues for improvement and further research to better understand and address these challenges.

The data underscores a significant discrepancy in perceptions regarding the effectiveness of spot supervision in ensuring adherence to clinical guidelines and protocols at Namatala Health Centre IV. With nearly 70% of respondents disagreeing with the notion that spot supervision effectively ensures adherence, it suggests a prevailing skepticism or dissatisfaction among healthcare staff regarding the efficacy of this supervisory approach. Conversely, only a minority of respondents (30.3%) agreed with the effectiveness of spot supervision in this regard. The calculated mean of 2.471 further supports this observation, indicating a low level of agreement among respondents. This discrepancy highlights a critical area of concern, suggesting potential gaps or inadequacies in the implementation or impact of spot supervision on ensuring adherence to established clinical standards. Further investigation is warranted to identify the underlying factors contributing to this perception gap and to develop strategies to enhance the effectiveness of spot supervision in promoting adherence to clinical guidelines and protocols within the healthcare facility.

The overwhelming agreement among respondents, with 91% endorsing the view that spot supervision has led to improvements in staff performance and productivity, suggests a positive perception of the impact of spot supervision at Namatala Health Centre IV. With only a small percentage (5%) expressing disagreement and an even smaller percentage (3%) being uncertain, the data indicates a strong consensus among healthcare staff regarding the

beneficial effects of spot supervision on staff performance and productivity. The calculated mean of 4.51, coupled with a relatively low standard deviation of 0.858, further confirms this sentiment, emphasizing that the perception of improvements in staff performance and productivity due to spot supervision is consistent and widely held. This finding underscores the potential value of spot supervision as a means of enhancing staff performance and productivity within the healthcare facility. However, further research may be necessary to explore the specific mechanisms through which spot supervision achieves these improvements and to identify any potential areas for optimization or refinement in the supervision process.

The high level of agreement among respondents (92%) regarding the positive impact of feedback and guidance from spot supervisors on their sense of feeling supported and motivated in their roles is a significant finding. With only a small percentage (5%) expressing disagreement and an even smaller percentage (3%) indicating uncertainty, the data suggests a strong consensus among healthcare staff at Namatala Health Centre IV regarding the beneficial effects of spot supervision in this regard. The calculated mean of 4.59, coupled with a relatively low standard deviation of 0.853, further reinforces this sentiment, indicating a consistent and widely held perception of the supportive and motivational role played by spot supervisors. This finding underscores the importance of effective communication and mentorship within the supervision process, as it contributes positively to staff morale and job satisfaction. However, further research could explore the specific aspects of feedback and guidance that are most valued by healthcare staff, as well as any potential challenges or barriers to effective communication between spot supervisors and their supervisees.

The overwhelmingly positive agreement (98%) among respondents regarding the effectiveness of spot supervisors in identifying and addressing resource shortages such as medicines and equipment is a notable finding. With such a high level of consensus and only a

small proportion (2%) expressing uncertainty, it indicates a strong belief among healthcare staff at Namatala Health Centre IV in the ability of spot supervisors to efficiently manage and rectify resource deficiencies. The calculated mean of 4.59, coupled with a relatively low standard deviation of 0.529, further supports this assertion, indicating a consistent and widely held perception of the efficacy of spot supervisors in this regard. This finding underscores the importance of spot supervision not only in overseeing clinical practice but also in ensuring the availability of essential resources necessary for delivering quality healthcare services. However, further research could explore the specific strategies employed by spot supervisors in identifying and addressing resource shortages, as well as any potential challenges or limitations faced in this aspect of their role.

The overall mean of 2.486 indicating a low level of spot supervision and the delivery of health services at Namatala Health Centre IV highlights significant concerns regarding the effectiveness and impact of spot supervision in this healthcare setting. Such a low mean suggests that there are fundamental deficiencies in the current system of spot supervision, potentially hindering the delivery of healthcare services. This finding underscores the need for urgent attention and intervention to improve the quality and efficacy of spot supervision practices at Namatala Health Centre IV. Further investigation into the specific challenges and barriers contributing to this low level of spot supervision, as well as the factors influencing the delivery of health services, is crucial for developing targeted strategies to address these shortcomings and enhance the overall quality of care provided to patients.

## **5.2. Contribution of performance improvement initiatives on health care delivery in Namatala Health center IV**

With an overall mean of 4.18 indicating a high level of performance improvement initiatives and employee healthcare service delivery at Namatala Health Centre IV, the study

underscores the effectiveness of these initiatives in enhancing healthcare delivery. This finding suggests that the efforts invested in implementing performance improvement initiatives have yielded positive results, leading to significant improvements in the delivery of healthcare services to patients. The high mean score reflects the consensus among respondents regarding the successful implementation of these initiatives and their positive impact on various aspects of healthcare service delivery. This underscores the importance of continued support and investment in performance improvement strategies to sustain and further enhance the quality of healthcare services provided at Namatala Health Centre IV. Further research could explore specific components of these initiatives that have contributed most to their success, as well as potential areas for refinement or expansion to optimize their impact on healthcare delivery outcomes.

The study's findings reveal a strong perception among respondents regarding the regular implementation of performance improvement initiatives at the health center, with 91% in agreement. This high level of agreement is reflected in the calculated mean of 4.37, indicating that performance improvement initiatives are indeed regularly implemented at the health center. This suggests that there is a consistent effort to integrate and execute initiatives aimed at enhancing healthcare delivery. The low standard deviation of 0.927 further reinforces the consensus among respondents, indicating a minimal level of variability in their perceptions. This high level of regular implementation underscores the commitment of the health center to continually improve its healthcare services and suggests a positive organizational culture that prioritizes quality improvement. Further analysis could explore specific initiatives implemented regularly and their impact on healthcare delivery outcomes to better understand their effectiveness and areas for optimization.

The overwhelming agreement among respondents, with 92% acknowledging significant enhancements in the quality of patient care due to performance improvement initiatives,

underscores the positive impact of these initiatives on healthcare delivery. With only 8% of respondents expressing disagreement, the consensus is clear, reflecting a strong belief in the effectiveness of these initiatives in elevating patient care standards. The calculated mean of 4.42 further solidifies this perception, indicating a high level of agreement and satisfaction with the improvements observed in patient care quality. Moreover, the low standard deviation of 0.986 suggests a high level of consistency in respondents' opinions, highlighting the robustness of the findings. This indicates that the performance improvement initiatives implemented at the health center have indeed succeeded in achieving their intended goal of enhancing the quality of patient care. Further research could delve deeper into specific aspects of patient care quality that have been positively impacted by these initiatives, as well as identifying any areas for further improvement to sustain and build upon these enhancements.

The overwhelmingly positive consensus among respondents regarding the provision of adequate training and support to staff as part of performance improvement initiatives reflects a commendable aspect of the healthcare delivery system at Namatala Health Centre IV. With 94% of respondents expressing agreement and only a minor 4% in disagreement, coupled with a negligible 2% unsure, the findings underscore a strong belief in the effectiveness of these initiatives in ensuring staff are well-equipped and supported in their roles. The calculated mean of 4.59, along with a relatively low standard deviation of 0.768, further reinforces the high level of satisfaction and consensus among respondents regarding the adequacy of training and support provided. This indicates that the performance improvement initiatives have been successful in prioritizing staff development and empowerment, ultimately contributing to the overall enhancement of healthcare service delivery at the health center. Further research could explore specific aspects of training and support that have been

particularly beneficial or identify any areas for refinement to ensure continuous improvement in this regard.

When respondents were asked to give their opinion about whether the initiatives have effectively addressed the key challenges in healthcare delivery at this health center, 91% of the respondents agreed with the opinion, whereas 5% of the respondents disagreed with the opinion and only 3% were not sure whether the initiatives have effectively addressed the key challenges in healthcare delivery at this health center. The calculated mean (4.51, standard deviation = 0.858) elaborates that the initiatives have effectively addressed the key challenges in healthcare delivery at this health centre is at a high level.

Ninety-two percent of the respondents were in agreement with the opinion that performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV and those who disagreed had represented by 5% whereas 3% of the respondents were not certain whether performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV. The calculated mean (4.59, standard deviation = 0.853) shows that performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV is at a high level.

Ninety-eight percent of the respondents agreed with the opinion that there is a noticeable improvement in staff performance and productivity due to these initiatives and those who were not certain had representation of 2%. The calculated mean (4.59, standard deviation = 0.529) shows that there is a noticeable improvement in staff performance and productivity due to these initiatives is at a high level.

When respondents were demanded to give their opinion about whether the initiatives have contributed to better teamwork and communication among staff members 78% of the respondents were in agreement with the view and those who disagreed with the opinion had

represented by 12% and only 10% of the respondents were not certain with the idea that the initiatives have contributed to better teamwork and communication among staff members. The calculated mean (3.95, standard deviation = 0.529) emphasizes that the initiatives have contributed to better teamwork and communication among staff members is at a high level.

When respondents were asked to give their opinion whether the initiatives have improved the overall efficiency of healthcare service delivery, 16% of the respondents agreed with the opinion and those who disagreed had represented by 65% where those who were not certain had represented by 19%. The calculated mean 2.46, standard deviation = 1.041) elaborates that the initiatives have improved the overall efficiency of healthcare service delivery is at a high level.

### **5.3. Contribution of routine supervision on delivery of health care services in Namatala health Center IV in Mbale city**

The moderate level of routine supervision on healthcare service delivery at Namatala Health Centre IV, as indicated by the overall mean of 3.59, suggests a mixed perception among respondents regarding the effectiveness and consistency of supervision practices. While the mean falls within the moderate range, indicating that routine supervision is neither strongly effective nor ineffective, it highlights the need for further evaluation and potential enhancements in the supervision process. This moderate rating may indicate that while routine supervision occurs, there could be room for improvement in its frequency, quality, or impact on healthcare delivery outcomes. Additional research could delve deeper into specific aspects of routine supervision to identify areas for enhancement and ensure that it optimally contributes to the improvement of healthcare services at Namatala Health Centre IV.

In order to determine the effects of routine supervision on health care service delivery, nine indicators were selected. The results from the study that revealed the opinion of the

respondents varied. Thirty-four percent of the respondents were in agreement with the opinion that routine supervision visits are conducted regularly at Namatala Health Centre IV whereas 62% of the respondents were in disagreement and those who were not certain with the view had represented by 5%. The calculated mean 2.53, standard deviation = 1.443) show that routine supervision visits are conducted regularly at Namatala Health Centre IV is moderate.

When respondents were asked to give their view about whether the quality of routine supervision received at this health centre is high, 97% of the respondents were in agreement that the quality of routine supervision received at this health centre is high. The calculated mean (4.49, standard deviation = 0.569) indicates that the quality of routine supervision received at this health centre is high is at a high level.

Seventy-six percent of the respondents agreed with the opinion that routine supervision has significantly improved the quality of patient care at this health centre whereas 5% were in disagreement with the idea and only 19% of the respondents were not sure whether routine supervision has significantly improved the quality of patient care at this health centre. The calculated mean (4.17, standard deviation = 0.968) elaborates that routine supervision has significantly improved the quality of patient care at this health centre is at a high level.

When respondents were demanded to give out their view about whether routine supervision effectively ensures adherence to clinical guidelines and protocols, 46% of the respondents were in agreement with the opinion that routine supervision effectively ensures adherence to clinical guidelines and protocols whereas 23% disagreed and 31% were not with the opinion that routine supervision effectively ensures adherence to clinical guidelines and protocols. The calculated mean (3.36, standard deviation = 1.095) emphasizes that routine supervision effectively ensures adherence to clinical guidelines and protocols is at a moderate level.

Seventy-five percent of the respondents agreed that routine supervision has led to improvements in staff performance and productivity whereas 5% of the respondents disagreed and those who were not certain whether routine supervision has led to improvements in staff performance and productivity had represented by 20%. The calculated mean (3.93, standard deviation = 0.807) shows routine supervision has led to improvements in staff performance and productivity is at a moderate level.

When respondents were asked to give their opinion about whether the feedback and guidance provided during routine supervision visits are useful for my daily tasks, 49% of the respondents agreed with the opinion whereas 29% of the respondents were in disagreement and those who were not certain had represented by 22% of the respondents. The calculated mean (3.34, standard deviation = 1.268) shows that the feedback and guidance provided during routine supervision visits are useful for my daily tasks is at a high level.

When respondents were asked to give their opinion about whether only routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment), 45% of the respondents agreed with the opinion that routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment), whereas 17% of the respondents disagreed. Those who were not sure with opinion that routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment) had represented by 37%. The calculated mean (3.46, standard deviation = 1.072) indicates that routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment) is at a moderate level.

When respondents were asked to participate in giving out view whether the availability of essential supplies has improved due to routine supervision, 66% of the respondents agreed with the opinion that the availability of essential supplies has improved due to routine

supervision, whereas 5% disagreed with the opinion and only 29% of the respondents were not certain with the view that the availability of essential supplies has improved due to routine supervision or not. The calculated mean (3.76, standard deviation = 0.773) shows that the availability of essential supplies has improved due to routine supervision is at a moderate level.

Forty-four percent of the respondents agreed with the idea that routine supervision has had a positive impact on patient satisfaction at this health centre whereas 32% of the respondents were in disagreement. Those who were not sure whether routine supervision has had a positive impact on patient satisfaction at this health centre. The calculated mean (3.29, standard deviation = 1.274) indicates that routine supervision has had a positive impact on patient satisfaction at this health centre is at a moderate level.

## **CHAPTER SIX**

### **CONCLUSIONS AND RECOMMENDATIONS**

#### **6.0 Introduction**

This chapter presents conclusions and recommendations of the study in relation to the establishment of the contribution of technical supervision on delivery of health care services in Namatala Health Center IV. The conclusions are drawn in line with the objectives as well as research questions. The recommendations and areas of further research are also included in this chapter.

#### **6.1 Conclusions**

##### **6.1.1 Contribution of spot supervision on health care delivery in Namatala health center IV**

The study on the contribution of spot supervision and performance improvement initiatives to healthcare delivery at Namatala Health Centre IV reveals contrasting impacts. While performance improvement initiatives are highly effective, with an overall high impact (mean = 4.18), spot supervision is perceived to be less effective, with an overall low impact (mean = 2.486). The majority of respondents affirm that performance improvement initiatives are regularly implemented (91%, mean = 4.37), significantly enhance patient care quality (92%, mean = 4.42), provide adequate staff training and support (94%, mean = 4.59), and improve patient satisfaction and staff productivity (92% and 98%, means = 4.59 each). However, spot supervision is seen as less regular (mean = 3.106), of lower quality (mean = 2.416), less impactful on patient care quality (mean = 2.500), and less effective in ensuring adherence to clinical guidelines (mean = 2.471). Despite some positive feedback on spot supervision improving staff performance and identifying resource shortages (means = 4.51 and 4.59), the

overall perception indicates a need for better implementation and quality of spot supervision to match the effectiveness of performance improvement initiatives.

### **6.1.2. Contribution of performance improvement initiatives on health care delivery in Namatala Health center IV**

The study on the contribution of performance improvement initiatives to healthcare delivery at Namatala Health Centre IV reveals a high overall impact (mean = 4.18), with strong agreement across multiple indicators. Respondents overwhelmingly affirmed that these initiatives are regularly implemented (91% agreement, mean = 4.37) and have significantly enhanced patient care quality (92% agreement, mean = 4.42). Additionally, the initiatives have effectively addressed key healthcare delivery challenges (91% agreement, mean = 4.51) and improved patient satisfaction (92% agreement, mean = 4.59). Staff training and support were rated highly (94% agreement, mean = 4.59), contributing to noticeable improvements in staff performance and productivity (98% agreement, mean = 4.59). The initiatives also fostered better teamwork and communication among staff (78% agreement, mean = 3.95). However, there was a divergence regarding the overall efficiency of healthcare service delivery, with only 16% in agreement (mean = 2.46), suggesting room for improvement in this area. Overall, the performance improvement initiatives have made a significant positive impact on healthcare delivery at Namatala Health Centre IV.

### **6.1.3. Contribution of routine supervision on delivery of health care services in Namatala health Center IV in Mbale city**

The study on the contribution of routine supervision to healthcare service delivery at Namatala Health Centre IV in Mbale City reveals mixed perceptions among respondents, with an overall moderate rating (mean = 3.59). While 62% of respondents disagreed with the regularity of routine supervision visits, those who believed in the high quality of such

supervision constituted a significant 97% (mean = 4.49). Routine supervision was also perceived to significantly improve patient care (76% agreement, mean = 4.17) and staff performance (75% agreement, mean = 3.93). However, opinions on adherence to clinical guidelines (46% agreement, mean = 3.36) and the usefulness of feedback and guidance (49% agreement, mean = 3.34) showed moderate support. Additionally, routine supervision's role in addressing resource shortages and improving the availability of essential supplies was seen positively by a moderate number of respondents (45% agreement, mean = 3.46; 66% agreement, mean = 3.76). Lastly, the impact of routine supervision on patient satisfaction was moderately endorsed (44% agreement, mean = 3.29), underscoring the need for more consistent and effective supervisory practices to enhance healthcare delivery.

## **6.2. Recommendations**

### **6.2.1. Contribution of spot supervision on health care delivery in Namatala health center IV**

Authorities in Namatala Health Center IV should develop a structured schedule for spot supervision visits to ensure they occur more frequently and predictably. This will help maintain consistency and reliability in the supervision process.

Authorities in Namatala Health Center IV should provide comprehensive training for supervisors to improve their skills and effectiveness. Training should focus on best practices, communication skills, and methods for providing constructive feedback.

Authorities in Namatala Health Center IV should introduce standardized protocols and checklists for supervisors to use during their visits. These tools will help ensure that clinical guidelines and protocols are consistently followed.

Authorities in Namatala Health Center IV should establish clear and structured feedback mechanisms where supervisors can provide actionable insights and staff can share their

perspectives. This two-way communication will foster a more supportive and responsive environment.

Authorities in Namatala Health Center IV should utilize spot supervision to actively engage with healthcare staff, offering mentorship and professional development opportunities. Positive reinforcement and recognition of good performance can significantly boost morale and productivity.

Authorities in Namatala Health Center IV should align spot supervision efforts with existing performance improvement initiatives to create a cohesive approach. Ensure that the goals and objectives of both strategies are complementary and mutually reinforcing.

Authorities in Namatala Health Center IV should use spot supervision visits to systematically identify resource shortages and promptly address them. Empower supervisors with the authority to escalate issues and secure necessary resources to mitigate any gaps.

Authorities in Namatala Health Center IV should implement robust monitoring and evaluation processes to continuously assess the impact of spot supervision. Use data and feedback from these evaluations to make necessary adjustments and improvements.

Authorities in Namatala Health Center IV should employ digital tools and mobile applications to streamline the supervision process. Technology can facilitate real-time feedback, accurate documentation, and efficient tracking of supervision visits.

Authorities in Namatala Health Center IV should foster a culture of collaboration by incorporating team meetings and discussions into the supervision process. Encourage open communication among staff members to improve teamwork and collective problem-solving.

### **6.2.2. Contribution of performance improvement initiatives on health care delivery in Namatala Health center IV**

Authorities in Namatala Health Center IV should ensure continuous and consistent implementation of performance improvement initiatives. Develop a detailed plan with timelines and responsibilities to maintain the regularity and effectiveness of these initiatives.

Authorities in Namatala Health Center IV should continue to focus on strategies that have proven to significantly enhance patient care quality. Regularly review and update clinical practices and protocols to incorporate the latest medical research and evidence-based practices.

Authorities in Namatala Health Center IV should identify and prioritize the key challenges in healthcare delivery that require immediate attention. Develop targeted interventions to address these challenges, ensuring that they are integrated into the broader performance improvement initiatives.

Authorities in Namatala Health Center IV should conduct patient satisfaction surveys and focus group discussions to gather detailed feedback. Use this feedback to tailor services and improve patient experiences. Implement patient-centered care models to enhance engagement and satisfaction.

Authorities in Namatala Health Center IV should develop ongoing training and professional development programs for healthcare staff. Ensure these programs are tailored to address specific needs and gaps identified through performance assessments. Encourage a culture of continuous learning and development.

Authorities in Namatala Health Center IV should implement performance appraisal systems that recognize and reward high performance. Provide opportunities for career advancement

and professional growth. Ensure that staff have access to the necessary resources and tools to perform their duties effectively.

Authorities in Namatala Health Center IV should organize regular team-building activities and workshops to foster a collaborative work environment. Implement communication platforms and protocols that facilitate easy and effective information sharing among staff members.

Authorities in Namatala Health Center IV should conduct a thorough analysis of the existing workflows and processes to identify inefficiencies. Implement process optimization techniques and lean management principles to enhance efficiency. Invest in technology and infrastructure that support streamlined operations.

Authorities in Namatala Health Center IV should develop a robust data collection and analysis system to monitor the impact of performance improvement initiatives. Use data-driven insights to make informed decisions and continuously refine and improve healthcare delivery practices.

Authorities in Namatala Health Center IV should engage with all relevant stakeholders, including patients, staff, community leaders, and policymakers, to gain diverse perspectives and support. Foster a collaborative approach to healthcare delivery that leverages the strengths and resources of all stakeholders.

Authorities in Namatala Health Center IV should encourage a culture of innovation where staff are empowered to suggest and implement new ideas and solutions. Regularly review and assess the impact of implemented initiatives and make necessary adjustments to ensure continuous improvement.

Authorities in Namatala Health Center IV should ensure that sufficient financial, human, and material resources are allocated to support the performance improvement initiatives. Develop a resource allocation plan that aligns with the strategic goals and objectives of the health

Authorities in Namatala Health Center IV should prioritize efforts to ensure strict adherence to clinical guidelines and protocols during routine supervision visits. Provide ongoing education and support to healthcare staff to reinforce the importance of compliance.

Authorities in Namatala Health Center IV should actively utilize feedback gathered during routine supervision visits to identify areas for improvement and implement corrective actions. Foster a culture of continuous learning and quality improvement within the health center.

Authorities in Namatala Health Center IV should ensure that sufficient resources, including medical supplies and equipment, are allocated to address identified deficiencies during routine supervision. Advocate for additional resources as needed to maintain quality standards.

Authorities in Namatala Health Center IV should foster strong partnerships with medical suppliers and other stakeholders to improve the availability of essential supplies. Negotiate favorable contracts and streamline procurement processes to minimize supply chain disruptions.

Authorities in Namatala Health Center IV should establish a system for monitoring and evaluating routine supervision practices to assess their effectiveness over time. Use performance metrics and key performance indicators to track progress and identify areas for improvement.

Authorities in Namatala Health Center IV should involve community members and local stakeholders in the supervision process to ensure their perspectives and needs are considered. Foster community engagement and participation in healthcare decision-making.

Authorities in Namatala Health Center IV should recognize and reward staff members who demonstrate excellence in implementing and adhering to routine supervision protocols. Offer incentives to motivate continued commitment to quality improvement efforts.

Authorities in Namatala Health Center IV should explore opportunities for collaboration with external organizations, academic institutions, and healthcare experts to enhance the effectiveness of routine supervision practices. Leverage external expertise and resources to support capacity-building initiatives.

### **6.3. Areas of further studies**

12. Investigate the impact of specific technical training programs on healthcare staff performance and service delivery outcomes.
13. Assess the long-term effectiveness of training initiatives in improving clinical skills, adherence to protocols, and patient care quality.
14. Explore the relationship between technical supervision practices and patient outcomes, including measures such as mortality rates, readmission rates, and patient satisfaction scores. Examine how effective technical supervision contributes to better health outcomes and patient experiences.

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## APPENDICES

### Appendix I: Consent Letter

Dear Respondents

**Ref. Request to Complete Research Questionnaire**

I am **BUYERA CHRISTOPHER** a student of Uganda Christian University pursuing Bachelor's Degree of public administration and management and am currently undertaking a research on a topic '*effect of technical on delivery of health care services in Namatala health Centre IV in Mbale city*'. You are kindly requested to participate in this research and your selection to this effect has been based on random basis. Please feel free as you respond to the study questions because the information you are to give will only be used for academic purposes, confidential and will be held anonymous before any publication.

Thank you

.....

**(RESAERCHER)**

**APPENDIX II**

**QUESTIONNAIRE GUIDE FOR PATIENTS**

**SECTION A: REpondent's BIO – DATA**

***INSTRUCTIONS***

*Please fill in the blank spaces or tick (✓) in the boxes provided where necessary.*

1. Name: (optional)

.....

2. Age: 15 – 30     31 – 45     46 – 60     60 +

3. Sex: Male                       Female

4. Marital status: Single     Married     Divorced     Separated     Widowed

5. Location:

Cell ..... Parish .....

Sub – county .....

6. Levels of education:

None     Primary     Secondary     Tertiary and above

Other (please specify) .....

.....

7. Religion: Protestant     Catholics     Muslims     Born again

Others (please specify).....

**SECTION B: EFFECT OF SPOT SUPERVISION ON DELIVERY OF HEALTH CARE SERVICES**

In a score of 1-5, please choose the most appropriate answer where 1- strongly disagree, 2- disagree, 3- agree, 4-strongly agree and 5 uncertain

<b>Question Statements</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Supervisors visit Namatala Health Centre IV regularly.					
The quality of supervision received during spot visits is high.					
Spot supervision has significantly improved the quality of patient care at this health centre.					
Spot supervision effectively ensures adherence to clinical guidelines and protocols.					
Spot supervision has led to improvements in staff performance and productivity.					
Feedback and guidance from spot supervisors make me feel more supported and motivated in my role.					
Spot supervisors are effective in identifying and addressing resource shortages (e.g., medicines, equipment).					

**SECTION C: EFFECT OF PERFORMANCE IMPROVEMENT INITIATIVES ON DELIVERY OF HEALTH CARE SERVICES**

In a score of 1-5, please choose the most appropriate answer where 1- Strongly Disagree, 2- Disagree, 3- Agree, 4-Strongly Agree and 5-Uncertain

<b>Question statements</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Performance improvement initiatives are regularly implemented at this health centre.					
The performance improvement initiatives have led to significant enhancements in the quality of patient care.					
Staff receive adequate training and support as part of performance improvement initiatives					
The initiatives have effectively addressed the key challenges in healthcare delivery at this health centre.					
Performance improvement initiatives have improved patient satisfaction at Namatala Health Centre IV.					
There is a noticeable improvement in staff performance and productivity due to these initiatives					
The initiatives have contributed to better teamwork and communication among staff members.					
The initiatives have improved the overall efficiency of healthcare service delivery.					

**SECTION D: EFFECT ROUTINE SUPERVISING ON DELIVERY OF HEALTH CARE SERVICES**

In a score of 1-5, please choose the most appropriate answer where 1- Strongly Disagree, 2- Disagree, 3- Agree, 4-Strongly Agree and 5-Uncertain

<b>Question statements</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Routine supervision visits are conducted regularly at Namatala Health Centre IV.					
The quality of routine supervision received at this health centre is high.					
Routine supervision has significantly improved the quality of patient care at this health centre.					
Routine supervision effectively ensures adherence to clinical guidelines and protocols.					
Routine supervision has led to improvements in staff performance and productivity.					
The feedback and guidance provided during routine supervision visits are useful for my daily tasks.					
Routine supervision helps in identifying and addressing resource shortages (e.g., medicines, equipment).					
The availability of essential supplies has improved due to routine supervision.					
Routine supervision has had a positive impact on patient satisfaction at this health centre.					

**END**

## **APPENDIX III**

### **INTERVIEW GUIDE FOR MEDICAL OFFICERS**

1. What is your position?
2. How long have you worked here?
3. What are some of the challenges faced in the delivery of health care services in Namatala health Center IV in Mbale city?
4. What is the effect of spot supervision on delivery of health care services in Namatala health Center IV in Mbale city?
5. What is the effect of performance improvement initiatives on delivery of health care services in Namatala health Center IV in Mbale city?
6. How have routine supervision affected the delivery of health care services in Namatala health Center IV in Mbale city?
7. Suggest possible interventions for improving the delivery of health care services in Namatala health Center IV in Mbale city.

*Thank you for your time*



UGANDA CHRISTIAN  
UNIVERSITY  
A Centre of Excellence in the Heart of Africa  
MBALE UNIVERSITY COLLEGE

Office of the Academic Registrar

To city clerk  
Mbale

Dear Sir/Madam,  
Re: Academic Research  
Christian greetings!

We are honored to introduce to you Mr. Mrs./Miss Buyeta Christopher  
Of Registration Number; SO1/MUC/BPAM/027 pursuing a Masters'  
Degree/Postgraduate Diploma / Bachelor's Degree Bachelor Degree in  
Public Administration and Management  
He/ she is required to carry out an academic research on the topic  
Technical supervision and health  
Care Services delivery in Namatala HCU  
Mbale City

and thereafter produce a well bound hard cover research report (MAROON) in color for undergraduate and three (BLACK) copies for Postgraduate students as a University requirement for the award of a degree/diploma in the academic discipline that he / she is pursuing.

We shall be grateful for the help you may offer to him or her accordingly.  
Thank you.

Yours faithfully,

Mr. Akampurira Timothy  
Academic Registrar

28 FEB 2024

Permission Granted  
ABB  
PRINCIPAL ASSISTANT  
FINANCIAL CLERK  
05 APR 2024  
INDUSTRIAL CITY DIVISION  
MBALE CITY

A map of Mbale City showing Northern City Division

