



HAROLD PUPKEWITZ GRADUATE SCHOOL OF BUSINESS

POLYTECHNIC OF NAMIBIA

An Investigation of Performance and Motivational Challenges Affecting Service Delivery in the
Ministry of Health and Social Services in Namibia

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International Business in the Harold Pupkewitz Graduate School of Business at the Polytechnic
of Namibia

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DECLARATION

I declare that **An investigation of performance and motivational challenges affecting service delivery in the Ministry of Health and Social Services in Namibia** is my own work. I further declare that it has not been submitted for any other Degree in any other Institution.

Date: 29 January 2014

Signature:

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Place: Windhoek

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DEDICATION

This thesis is dedicated to my father Kaambula Ruben ya Hamwaanyena for positive legacy he left for education. He left a bright torch for education in our memories and we want to pass this bright torch to his future generations. Before passing on in August 1964, in his own words he said and I quote: "I want my children to be educated".

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ABBREVIATIONS

FDC	Funds Distribution Certificates
GRN	Government of Republic of Namibia
IFMS	Integrated Financial Management Systems
IPM	Institute of Personnel Management
MoHSS	Ministry of Health and Social Services
MTEF	Medium Term Expenditure Framework
OPM	Office of the Prime Minister
PDP	Personal Development Plan
PHC	Primary Health Care
PM	Performance Management
PMS	Performance Management System
PSC	Public Service Charter
PSSR	Public Service Staff Rules
SOE	State Owned Enterprises
T&D	Training and Development
WHO	World Health Organisation

ABSTRACT

This study investigates the performance and motivational challenges affecting the service delivery in the Ministry of Health and Social Services (MoHSS) in Namibia.

A questionnaire was designed to collect primary data on factor affecting services delivery in the MoHSS. Literature was done on best practices that motivate employees to increase organisational performance.

The overall results reveal different factors that affect performance and motivation of employees in the Ministry of Health and Social Services. Identified factors affecting performance and motivation of employees in the MoHSS include Organisational Culture, Leadership Style, Staff Adequacy, Reward System, Mismatch of Qualifications and Positions, Poor Budget Control and Lack of Skills in Contract Management.

The research recommends interventions to address the identified factors that affect service delivery in the ministry and suggests that more research should be conducted from the clients point of view. Furthermore research can be conducted on the operational staff of the Ministry in different regions.

Chapter 1: Introduction to the Study

1.1 Introduction and Background

The Constitution of the Republic of Namibia Act (Act 1 of 1990) laid down the statutory framework for service delivery in Namibia. In Namibia, the principles of good governance are set in the Public Service Charter, the Customer Service Charter and the Public Service Code of Conduct. The public has high expectations of effective, efficient and quality service delivery from public service institutions, such as the Ministry of Health and Social Services (MOHSS). However, the print and electronic media is dominated with perceptions of low levels of service delivery by and within the Ministry of Health and Social Services. Keyter (2006) argues that besides positive developments within Namibia, the people of Namibia have witnessed an increase in corruption, maladministration and poor service delivery. Keyter (2006) further points out that Namibian political analysts, including Lindeke, Du Pisan and Hengari have blamed the Government of Republic of Namibia (GRN) for the appointment of poorly qualified people, the saturation of the Board of Directors of State Owned Enterprises (SOE) with the same faces and lack of transparency at state institutions have all created an atmosphere for poor service to flourish. The Ministry Health and Social Services has performance and motivational challenges that have a capacity to negatively affect service delivery to the communities.

The Health and Social System Review (2008) of the Ministry of Health and Social Services reveals that the Ministry faces challenges including: shortage of health professionals, high vacancy rates, high attrition rates, lack of Human Resource retention

strategy, staff burn- out, no clear demarcation of responsibilities for budget preparation, lack of accountability of Fund Distribution Certificates (FDC) holders, poor budgeting system and poor management accounting systems, heavy bureaucracy and multiple centres of decision makings, public health care facilities in a poor state, lack of technical staff to manage capital projects, lack of knowledge and skills on contract management, lack of transport for service delivery, frequent breakdown of critical equipment, lack of replacement plan of vehicles and equipment and poor coordination of programmes and projects.

The Presidential Commission of inquiry in the Ministry of Health and Social Services (2013) revealed the same information in its findings. This is an indication that these challenges have been in existence for many years and have potential to affect service delivery in the Ministry.

Based on the preceding information, it was essential to conduct the investigation of performance and motivational challenges that can negatively affect service delivery in the Ministry of Health and Social Services. This study focused on National and Regional levels of MoHSS of five regions. The print and electronic media are dominated with perceptions of poor levels of service delivery within the Ministry of Health and Social Services. Meanwhile, many efforts have been made to improve performance levels, according to Guiding Performance Management in the Office of the Prime Minister (GF, 2011:3).

The Public Service has put in place important guideline documents to guide the operations of Public Service institutions such as Public Service Act, Act no 13 of 1995, Public Service Staff Rules, Public Service Code of Conduct, the Charter for the Public

Service in Africa and the Performance Management System that was developed by the Office of the Prime Minister (OPM).

All these policy documents and guidelines have been put in place to constantly improve performance management that eventually leads to quality service delivery. Therefore, the management of the Ministries has responsibilities to ensure optimal utilization of resources at its disposal to strengthen responsiveness to the needs of the people. However, there are still visible signs of poor service delivery in the Public institutions, including the Ministry of Health and Social Services.

The MoHSS as one of the Public Service institutions is also in possession of the policy documents and guidelines to guide its operations, improve performance management, increase quality in service delivery through effectiveness and efficiency. Nevertheless, there is ongoing criticism levelled against the Ministry of Health and Social Services by electronic and print media for low quality service delivery to the public.

With the development and implementation of the Performance Management System (PMS) in the Public Service institutions, one can expect improvement in the health service delivery. Bacal (1999) points out that performance management is an ongoing communication process, undertaken in partnership between an employee and the immediate supervisor that involves establishing clear expectations and understanding the job functions the employee is expected to do. He also states that if performance management is done in collaborative and cooperative with employees it benefits the employee, the manager and the organisation. Bacal (1999) further states that performance management means preventing poor performance and it leads to the

improvement of performance. Therefore, proper execution of PMS can bring improvement in service delivery in the Ministry of Health and Social Services.

The Guiding Framework to the PMS of the Office of the Prime Minister (2011:3) defines Performance Management System as a systematic process for getting better results from the organization, teams and individuals by managing performance within an agreed framework consisting of objectives, outputs and key performance indicators. The Guiding Framework for the Performance Management articulates how the PMS should be implemented in all Public Service institutions including the MoHSS. If the Ministry of Health and Social Services implements the PMS as defined in the Guiding Framework of the OPM, performance and motivational challenges will be largely addressed. According to the Guiding Framework to PMS of the Office of the Prime Minister (2011), the organisational intervention of the PMS is to achieve tangible results. It further states that the main focus is the determination of the organisation's strategy and the implementation of the strategy in respect of organisation structure, technology, business system and operating procedures. The organisational intervention has three principal components, namely performance planning, performance improvement and performance review which can be viewed as very critical for service delivery in any organisation.

Performance planning under this perspective refers to the activities of formulating the vision, mission, objectives and core values of the organization. If the employees of the Ministry of Health and Social Services are guided by the vision, mission, objectives and core values of the organisation, performance can be improved, and quality service delivery can be realised. The Guiding Framework (2011) describes performance improvement as the concept that covers the areas of business process re-

engineering, continuous process improvement, total quality management and benchmarking. It further refers the performance review to the performance measurement and evaluation.

Guiding Framework for the Performance Management of the Office of the Prime Minister (2011) states that Performance Management (PM) is an approach to managing people. Under this perspective, the focus of the PM is on people as individuals and teams working and supporting one another to attain shared goals and objectives.

The introduction of the of PMS is therefore an extra mile that the Public Service has taken towards the improvement of Performance Management in the Public Service institutions including the Ministry of Health and Social Services to address Performance and motivational challenges that have the potential capacity to negatively affect service delivery.

Besides the implementation of Performance Management System, the employees need motivation, encouragement and proper reward system in exchange for the service they render. Quality service delivery requires highly trained, skilled and motivated employees. Meeting the needs and achieving the goals of both the employer and the employee is often difficult. Webster's New Collegiate Dictionary (2011) defines motivation as the process of providing a motive that causes a person to take some actions.

In most cases, the motivation is derived from a need that leads to the behaviour that results in some types of rewards when the need is fulfilled. The rewards can be intrinsic/ internal rewards or extrinsic/ external rewards. Intrinsic rewards are derived from within the individuals. For healthcare service delivery, employee takes pride and feels good for a job well done (e.g. providing excellent patient care).

Extrinsic rewards pertain to rewards that are given by the other person such as giving a bonus to teams of workers when quality and patient care satisfaction is demonstrated to be exceptional. Motivation can be done when management provides various types of incentives in an effort to influence performance of employees in a number of ways, such as by changing job descriptions, rearranging work schedules, improving working conditions and reconfiguration of teams. These may have an impact on an employee's level of motivation and willingness to act.

Direct implications on the level of motivation of individual employee may include factors that are indicated in the Health System Review of the MoHSS (2008) such as shortage of health professional, high vacancy rates, high attrition rates, lack of Human Resource retention strategy, staff burn out, no clear demarcation of responsibilities for budget preparation, lack of accountability of Fund Distribution Certificates (FDC) holders, poor budgeting system and poor management accounting systems, heavy bureaucracy and multiple centres of decision makings, public health care facilities in a poor state, lack of technical staff to manage capital projects, lack of knowledge and skills on contract management, lack of transport for service delivery, frequent breakdown of critical equipment, lack of replacement plan of vehicles and equipment.

Keyter (2006) blamed the Government of Republic of Namibia for the appointment of poorly qualified people. Keyter (2006) also indicates that lack of professionalism, dedication, commitment and poor leadership among some political leaders and public officials may have influence on poor service delivery.

It is therefore imperative for the researcher to conduct an investigation of performance and motivational challenges of employees of the Ministry of Health and Social Services that can affect negatively the service delivery in the Ministry.

The purpose of the study was therefore to investigate the performance and motivation challenges of the employees that affect service delivery in Mass. The study was further look at the assessment of international and regional best practices on performance management and motivation of employees that are needed to address low quality service delivery.

1.2 Problem Statement

There is a deep rooted perception in society that the Ministry of Health and Social Services provides services of low quality. Furthermore, the community has an understanding that low quality services are provided by incompetent and demotivated employees. It is also further generally accepted in the public that lack of supervision of performance by competent officials in the MoHSS is the main source of low quality services. It is accepted that the effective implementation of Performance Management Systems with its Monitoring and Evaluation System and Motivation of employees will essentially make a contribution to the improvement of quality service delivery in the Ministry.

It was therefore important to conduct investigations in the Ministry of Health and Social Services to identify performance and motivational challenges that affect service delivery in the Ministry and recommends strategy interventions for improving service delivery. Furthermore, it is also imperative to explore international and regional best practices on performance management and motivation of employees in the Ministry to develop an intervention strategy to address low quality service delivery.

1.3 Research objectives

The objectives of the study are:

1. To identify factors affecting performance and motivation of employees in the Ministry of Health and Social Services in Namibia.
2. To describe factors that contribute to low service delivery in the Ministry and

3. To identify some of the international best practices in the performance management and motivation of employees of an organization.
4. To make recommendations to the management of the Ministry to address performance and motivational challenges of employees in the MoHSS.

1.4 Research Questions

1. What are the factors affecting performance and motivation of employees in the Ministry of Health and Social Services in Namibia?
2. What are the underlying factors contributing to low service delivery in the Ministry of Health and Social Services in Namibia?
3. What international and regional best practices in performance management and motivation of employees can be explored and recommended to improve service delivery in the MoHSS?
4. What recommendations can be made to address low quality service delivery in the MoHSS?

1.5 Thesis outline

The research paper would be divided into five chapters as follows:

Chapter 1: Introduction, problem statement, motivation for study, research objectives and research questions of the study.

Chapter 2: Present the literature Review.

Chapter 3: Research methodology.

Chapter 4: Findings and Discussion.

Chapter 5: Conclusion and Recommendations.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

This section consists of two parts. Part one focuses on the introduction, part two focuses on the theoretical framework. Service delivery is very complex, and it requires high performance management and motivated workforce. According to Homedes and Ugalde (2004), human resources are the most critical assets of any health system. Performance Management and employee motivation are therefore critically essential for service delivery in the health sector. Performance and motivational challenges of employees can negatively affect service delivery in the organization.

Hence, the performance of individuals, teams and the entire Ministry of Health and Social Services depend on competent and effective leadership of those managers responsible for managing the performance of subordinates.

2.2 Performance Management

One of the best ways to address low quality service delivery in the Ministry of Health and Social Services is to adopt and implement Performance Management System (PMS). The performance management system is a vital component of service delivery. Performance management can be viewed as a sequence of activities for planning, controlling, measuring and rewarding for the service delivery according to WHO (2001). If an organisation sets clear goals and knows what it wants to achieve, the performance of employees is directed to the set goals.

According to Armstrong and Baron (1998), Performance Management is both a strategic and an integrated approach to delivering successful results in organizations by improving the performance and developing the capabilities of teams and individuals. The capabilities and abilities of employees can have impacts on service delivery. Armstrong further states that Performance Management (PM) is a forward looking process which is concerned with the development of people who work in organisations and system in which they work to deliver sustainable performance.

Arzuffi (2007) indicates that performance management interventions have been conducted in many organisations to improve operational efficiency so that the system could evaluate processes with a focus on specific activities or structures.

Performance management is a concept in the field of human resource management. According to (Aguinis, 2009) “Performance management is a continuous process of identifying, measuring and developing the performance of individuals and aligning performance with the strategic goals of the organization.” There is no single universally accepted model of performance management. Various experts have explained the concept in their own ways. Mabey (1999) prescribed the model of performance management system in the form of ‘performance management cycle’. This cycle has 5 elements which suggest how performance management system should be implemented in an organization. The elements of performance management system cycle include:

- Setting of objectives.
- Measuring the performance.
- Feedback of performance results.
- Reward system based on performance outcomes
- And amendments to objectives and activities (Mabey et al, 1999).

Performance management system

Performance management is part of the system theory in organisations, according Nirupama (2007). Nirupama (2007) states that performance of employees is managed and developed through interrelated dynamics. He further states that the theory of systems approach begins with systems thinking. There are specific processes that are mostly connected with performance management such as planning, budgeting and forecasting and the best known methodologies include balance scorecard and activity based management.

According to Senge (1990) an organization consists of many components. He states that the organization is a whole and its various departments are subsystems within it. If capable employees are placed in the correct positions in various components of the organisation, the performance of the organisation can be improved. Senge further states that systems theory is characterized by five principles include personal mastery, shared vision, mental models and team learning and employee identification. Employees with shared vision strive to achieve common goals. They share information necessary for decision making and performance experts required for service delivery.

Therefore, performance management could be regarded as a process of monitoring and evaluating performance and taking corrective action to improve performance according to Arzuffic(2007). The Ministry of Health and Social Services needs to consider the implementation of monitoring and evaluation of programmes, projects and activities to improve service delivery.

Managing performance needs essential skills which many managers may not have according to the Tamworth Regional Development Corporation (2009). Managers find it easier to manage employees with excellent performance, but are not so adept when it comes to improving poorer performers. According to Goldring (2005), there is no point in pretending that every employee is the right match in terms of their skills, capability, attitude and cultural fit. Many of the Directors in the Ministry of Health and Social Services are from the nursing profession and may have limited or little understanding of issues pertaining to Human Resource Management, Finance, Public Management or Business Management.

According to the report of Tamworth Regional Development Corporation (2009), well performing staff is critical to the ongoing success of any business. On the flip side, poor employee performance can have a significant impact on a business, its customers and other staff and can be felt in terms of low morale, low productivity and high staff turnover. The report also emphasizes the importance of a Performance Management System and what it covers. Many organisations support performance management system based on the balance scorecard approach. Realising that only 10% of organisational strategies are ever implemented, Kaplan and Norton (1996) attempted to find a better way to approach strategic planning and performance management.

Their research identified four key dimensions that any successful plan needs to balance:

- Customer perspective
- Finance perspective
- Internal process perspective
- Growth and learning perspective

Joanne Sujansky, President of KEYGroup Consultancy, believes that many managers fall on the job when it is time to deal with poor performers. 'Perhaps they do not want to rock the boat, fearing that poor performers will retaliate with even worse performance. Or perhaps they do not know how to confront someone professionally. So they do nothing, and everyone suffers' Sujansky(2009).

Stuart Duff, head of development at occupational psychologists Pearn Kandola, said 'most companies just reward the top performers and ignore the poor performers. The reason for this is that it is difficult to manage performance to the extent that managers can be confident enough to fire someone. Seemingly they claim that they are too busy to manage their staff properly. However, those organizations that do set their staff clear goals, and manage their progress towards the achievement of those goals over a long period of time, can then act on the results and reap the rewards.' Tamworth Regional Development Corporation (2009).

It is crucial that before an employee's poor performance is addressed that the manager determines whether the issue is caused by a lack of ability or a lack of motivation on the part of the employee. It may be that an employee with a lack of ability may have been badly matched with the job at the recruitment stage or they may have been promoted to a position that is too demanding for them, or they no longer have the support that previously helped them to perform. Therefore, low individual performance leads to lower service delivery in the organisation.

Tamworth Regional Development Corporation (2009) states that performance challenge generally falls into different categories of unsatisfactory work performance, unacceptable behaviour, breach on workplace policies, rules or procedures and impact of

employee personal issues on their performance and others in the workplace. There are many reasons why an employee may perform badly and some relate to the job duties/tasks or the design of the role, however, there are common causes like workplace policies, goals or standards are not clear, and the employee is not sure what is expected of them. Employees do not receive feedback and are not sure if they are doing a fantastic job, there is a capability/skill mismatch between the role and the employee, personal issues and lack of motivation or low morale of staff. The performance of employees with low morale is very low and can have a negative effect on the performance of the organisation and eventually on the service delivery. Tamworth Regional Development Corporation (2009) suggests some of the steps to be followed for managing poor performance, including the identification and assessment of the problem. According to Marko Saravanja (2010), when it becomes apparent that an employee is not performing to the standard required, it is essential to identify the underlying causes of poor performance. Poor performance could be related to lack of application to the role and tasks, lack of capability/skills in general, lack of capability due to illness or injury. Therefore, these factors need to be assessed the cause of low performance. Each of these situations needs different remedial actions, thus emphasizing the importance of correctly identifying the cause of poor performance. It is therefore important to conduct investigations in the Ministry of Health and Social Services to determine what performance and motivational challenges affect service delivery.

In many organisations, poor performers can and do affect sales, revenue and profitability and affect high performing employees who may not want to work with a person who is unreliable and incapable of correcting their mistakes according to

Saravanja (2010). Allowing poor performance to continue unchecked may result in the departure of these high performers who get impatient with the lack poor performance management.

Silberman (2003) noted that an effective performance management program can increase productivity and morale in the organization and help to retain valued high performers. In the public sector, organisations are differentiated in comparison with their counterparts in the private sector in terms of provision of quality health care. However, performance management theory applies equally to both public and private sectors.

Performance management in health care is not only aiming at the systematic generation and control of the economic value of an organisation, but also the optimization of efficiency and effectiveness of service delivery. Therefore PM like other management approaches can only be implemented successfully if strategic planning is closely linked to operational execution and controlling of planned activities. Performance Management includes activities that ensure that goals are consistently being met in an effective and efficient manner according to Aubrey (2004).

Performance Management involves a continuous communication between managers and the people they manage. The ongoing dialogues are based on achievement of individual and organisational goals, performance analysis and provision of feedback that can contribute to high performance and development of personal development plans (PDP). Therefore, Performance Management (PM) is a useful approach that can be effective in the planning the development of employees to increase high performance.

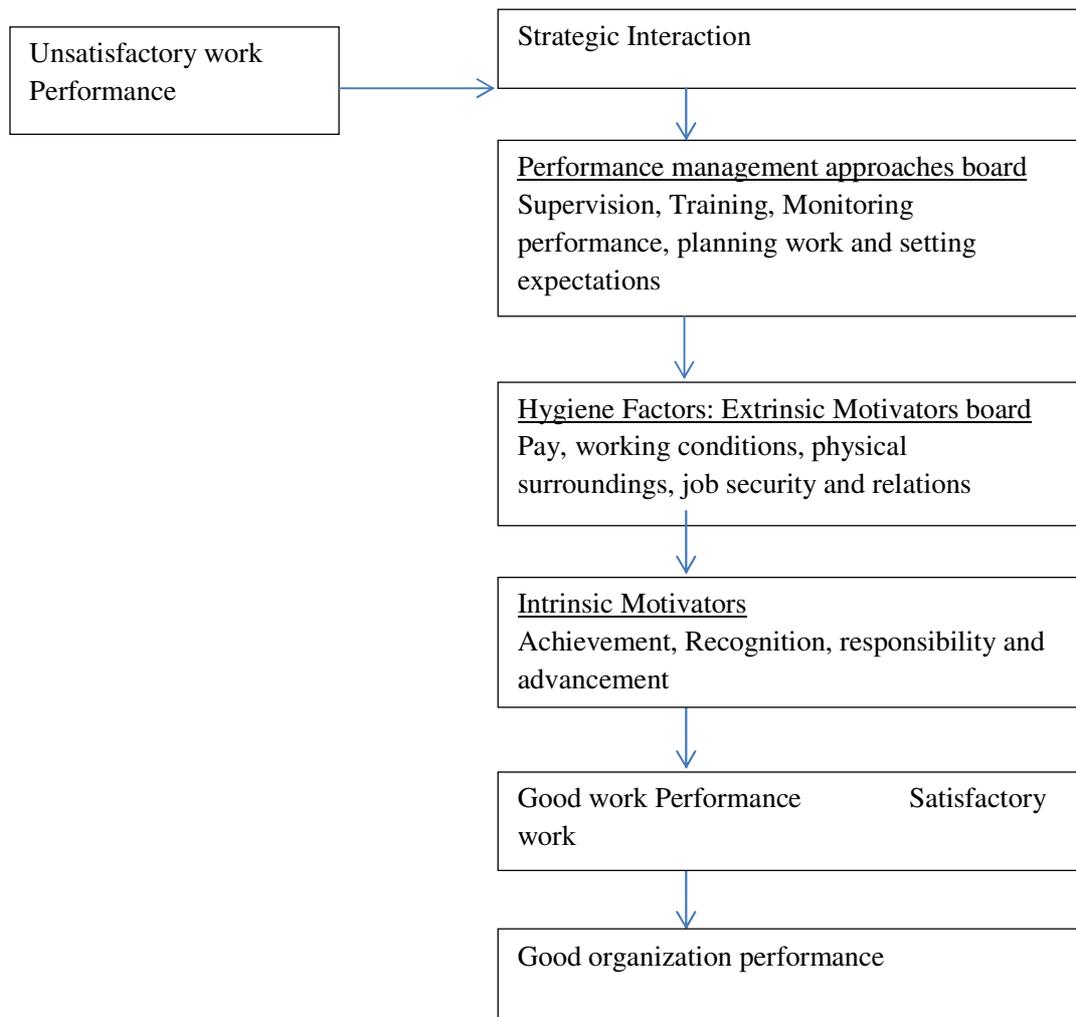


Figure 1 Conceptual framework of performance Management

Source Briscoe and Claus (2008)

2.2.1 Definition of performance

Briscoe and Claus (2008) define Performance Management as the system through which organisations set goals, determine performance standards, evaluate performance, provide performance feedback determine training and development needs and distribute rewards. (Bititcti, Carrie & McDevitt, 1997) defines performance management as a “process by which the company manages its performance in line with its corporate and functional strategies and objectives.” Bacal (1999:3) points that performance

management (PM) is an ongoing communication process, undertaken in partnership between an employee and the immediate supervisor that involves establishing clear expectations and understanding the job functions the employee is expected to do.

Armstrong defines Performance Management as a systematic process for improving organisational performance by developing the performances of individuals and teams.

According to Institute of Personnel Management (IPM) (1992) the definition of performance management system includes the following elements:

- Performance Management communicates a vision of its objectives to all its employees.
- It sets organisational and individual performance targets that are related to wide and broad objectives.
- Performance Management conducts a formal review of progress towards the set goals.
- It uses the review process to identify training needs for personal development and reward outcomes.
- It involves the evaluation of the whole process in order to improve the effectiveness.
- It expresses performance targets in terms of measurable outputs, accountabilities and learning targets.
- It uses formal appraisal procedures as a way of communicating performance requirements that are set on a regular basis.
- Performance Management links performance requirements to pay Senior Managers

2.2.2 Performance Planning

(Zaffron, Logan, Steve & David, 2009) indicate that Performance Management is a cycle of Performance Planning where goals and objectives are set, Performance Coaching where a Manager can intervene to give feedback and adjust performance and Performance Appraisal where individual performance is documented and feedback

delivered. If the performance of the employee is properly documented areas of weaknesses can be identified, studied and potential solutions can be developed and directed to the identified problems.

According to US Office of Personnel Management, Performance management consists of a system or process whereby work is planned, expectations are set, performance at work is monitored, stability to performance is developed and enhanced, performance is rated or measured and ratings are summarised. Top performance is also rewarded accordingly. In some organisations, high performance is recognised and rewarded in either monetary value or in kind.

Performance Management is the systematic process of planning work, and setting expectations continually motivating performance, developing the capacity to perform, periodic rating performance in a summary fashion and rewarding meritorious performance.

In Performance Management System, planning implies setting performance expectations, setting goals for groups and setting goals for individuals. The aim is to direct their efforts towards the achievement of organizational objectives. The employees need to get involved in the planning process to help them understand the goals of the organizations. Establishing elements and standards of performance plans are critical requirements for the planning of performance of employees. The performance elements and standards should be measurable, understandable, verifiable and achievable. By establishing these elements and standards, the employees can be held accountable as individuals for work assignments and responsibilities. In effective organizations, work is planned well in advance state (Zaffron, Logan, Steve & David, 2009).

Tamworth Regional Development Corporation (2009) defines Performance Management System (PMS) as a formal process, ensuring that employees understand what is expected of them, assess their performance and provides them with feedback. This helps the employees to do their job better. It is essential to address problems immediately, or as soon as practicable. Waiting until the annual appraisal or review may allow problems to accumulate.

During the Performance Management process, feedback can be managed through both regular information feedback interventions and formal performance at appraisal stage. An information approach may involve supervisor giving advice and guidance to employees on an ad-hoc basis which adequately addresses minor issues. When matters occur repeatedly or of a serious nature, a more formal approach to dealing with performance challenges is required.

2.2.3 Performance Monitoring and Evaluation

Monitoring performance refers to the process of measuring performance and providing feedback to employees. An organisation can implement appraisal programs that are required to provide ongoing appraisal to conduct one or more progress reviews during each appraisal period which is normally a financial year or calendar year.

Monitoring implies consistently measuring performance and consistently providing feedback to employees and work groups on their progress toward reaching the right goals. Monitoring performance involves conducting progress reviews with employees in which their progress is compared against the set elements and standards. Ongoing monitoring provides the supervisor with opportunities to check how well employees meet the predetermined elements and standards. Through monitoring, poor

performance can be identified and rectified immediately rather than waiting for the summary rating period.

It is vital to determine what data to collect for each performance element and the source of data. It is also vital to determine who collects the data and who will receive the data. General measures can be expressed in terms of quality and timeliness.

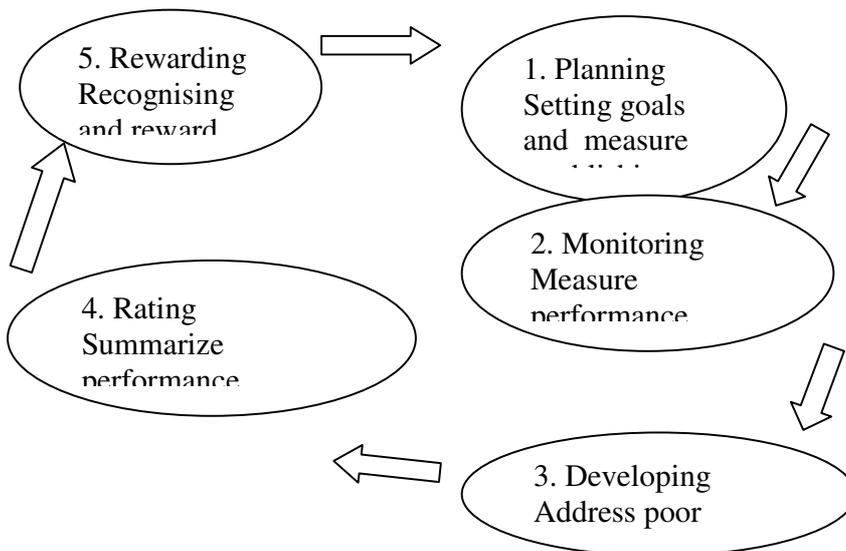


Figure 2: Performance Management’s Five Key Components

Source: David Hakala (2008)

Developing

For an effective organization, developmental needs of employees are identified, evaluated and addressed. In this context, developing refers to increased capacity of individuals to perform through training, giving challenging assignments that can introduce new skills or higher levels of responsibilities to improve work progress and work methods. Training and development provide individual employees with

opportunities to develop feelings of strong performance, strengthen job related skills and helps employees to keep up with new technology.

Performance Management provides excellent opportunities to supervisors to supervise employees to identify performance deficiencies. It is crucial and useful to summarize employees' performance periodically. Rating means evaluating an employee or group performance against the set element standard in the employers plan and assigning a rating of record. The rating of record is done according to the procedures of appraisal programs of the organization. The rating is based on work performed during the entire appraisal period stated Hakala (2008).

Rewarding

In an effective organisation, the rewards are properly set to reward top performers. Rewarding refers to recognising employees individually and as members of groups for their performance and acknowledging their contribution toward realization of the organisation's mission. A basic principle of effective management is that all behaviour is controlled by its consequences.

2.2.4 Performance Measurement

Many organisations have measured their organisational performance by focusing on internal performance. Private sectors focus on financial measures, including return on the investment market share earnings per share. However, balancing customer and employee satisfaction are critical for measuring performance of the organisation.(Robert S. Kaplan and David P. Norton 1996)developed a set of measures that they refer to as a

balanced scorecard. These measures are very important as they provide management with a comprehensive picture of the organisation performance and include both processes and results measures. Balanced measures help public and private sectors create high performing organisations. Perspectives have been identified for measuring organisation's performance and these include business perspective, customer perspective, employee perspective and financial perspective. Business perspective focuses on organisational efficiency and effectiveness.

Customer perspective considers the performance of the organisation in the eyes of its customers. The organisation should focus on customer needs and satisfaction in order to achieve organisational performance. The organisation is expected to incorporate customer needs and wants as part of their performance planning and respond to these wants and needs as part of performance execution. Employee perspective focuses on the critical internal processes that drive the organisation, including employee development and retention. Adequate investment in the employee and infrastructure of the organisation is critical for the future success of the organisation. Performance standards are the management approved expressions of the performance thresholds, requirements or expectations that employees must meet and to be appraised at particular levels of performance. Performance standards need to be met by employees. Hakala (2008) argued elements must have a fully successful or equivalent standard established.

An effective and timely feedback to employees is immensely important. Feedback should address employee performance on set elements and standards. Employees need to know in time how they have performed so that they can work towards improving their performance. Line of reporting is very vital in the provision of feedback as feedback can

come from different sources, including managers and supervisors, measurement systems, peers and customers. An effective organisation provision of feedback works well when it relates to a specific set goal. Providing feedback on the employee's performance based on the set elements and standards is particularly effective and powerful. In an effective organisation employees should receive information on their performance on time. It is also crucial to provide feedback in positive manners for employees to improve performance in positive ways. Involvement of employees in the development of elements and standards is particularly pertinent for clarifying expectations and measurement of employee's performance.

Employee participation in creating valid measures that can accurately reflect performance minimises the feeling of employees that the system is manipulated to the disadvantage of the employees. Performance measures the following indicators of performance:

- Quantity
- Quality
- Timeliness
- Cost effectiveness
- Creativity
- Adherence to policy
- Manager appraisal
- Self appraisal
- Peer appraisal
- Team appraisal
- 360-degree or full circle appraisal
- MBO (Management by objectives)

2.2.5 Performance Appraisal

Performance standards are the management approved expressions of the performance thresholds, requirements or expectations that employees must meet when being appraised at particular levels of performance. Elements must have a fully successful or equivalent standard established. Monitoring performance refers to the process of measuring performance and providing feedback to employees. An organisation can implement appraisal programs that are required to provide ongoing appraisal to conduct one or more progress reviews during each appraisal period which is normally a financial year or calendar year. It is essential to determine what data to collect for each performance element and the source of data. It is also important to determine who collects the data and who will receive the data. General measures can be expressed in terms of quality and timeliness.

An effective and timely feedback to employees is very important. Feedback should address employee performance on set elements and standards. Employees need to know in time how they have performed in the previous period so that they can work on improving their weak areas. Line of reporting is very crucial in the provision of feedback as feedback can come from different sources, including managers and supervisors, measurement systems, peers and customers.

An effective organisation provision of feedback works well when it relates to a specific set goal.

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2.3 Leadership

Implementation of performance management which is a prerequisite for service delivery is the responsibility of the top leadership of the organisation. This implies that the implementation of any change in the organisation requires the support of top leadership. Therefore, the top leadership should understand how the performance management works and also understand its benefits and limitations. In Namibia, the top leadership in the Ministries is comprised of political appointees with little technical knowledge and skills of management. This implies that political leadership is appointed on political grounds rather than on managerial competency. Therefore, there is always a wide gap between the political leadership and middle management that is charged with the responsibility of implementing changes that enhance service delivery. Therefore, leaders are required to understand managerial roles of planning, implementing and monitoring performance in the organisation. Similarly, it is high time for managers to assume leadership roles of leading, visioning, exploring, risk taking and inspiring to ensure effectiveness and efficiency in service delivery. Sanger (2008) argues that an effective introduction of performance measurement requires a cultural change and a committed leadership. This implies that service delivery requires cultural change and

committed leadership of top management. Furthermore, Sanger states that result oriented leadership seeks to shape the culture of governments and organisations to focus on results, values, mobilise initiative, encourage initiative, encourage learning and promote experimentation to achieve performance. Therefore, leadership is particularly crucial in influencing staff performance, which eventually leads to effective service delivery in the organisation.

2.4 Human Resource Management

2.4.1 Recruitment and selection

One of the most crucial aspects of Human Resource Management is the recruitment and selection of appropriate people with the right skills and right qualification in the right position in the organisation. When wrong people are appointed in the organisation, the performance of the organisation can be deteriorated. Therefore, proper systems and mechanisms have to be put in place to ensure that the right people are appointed in the right positions.

Doherty and Horne (2004) suggest the following main steps in the recruitment and selection process.

- Reviewing the strategic plan for staffing implication in the organisation.
- Auditing the skills and age profile of existing staff
- Succession planning
- Describing jobs for which staff has to be appointed
- Deciding the appropriate terms and condition for employment.
- Defining personnel specifications
- Placement of advertisement of available posts

- Deciding on selection methods to be employed
- Communication of decisions.

Other aspects for consideration in the recruitment and selection process include activities of interviewing; reference checking and criminal record checking. Some organisations conduct tests to determine the required competencies and talents. These include the competency test to determine individual ability in the area of numeracy, communication, problem solving skills, analytical skills, creativity and innovation.

2.4.2 Induction

After the recruitment of staff, they need to be introduced into the working environment of the organisation by attending induction sessions. The purpose of induction is to introduce the new person into the operational procedures, structures, processes, systems and culture of the organisation. Induction helps a new person to position him or herself in the organisation structure. Du Toit (2002) defines induction as the introduction of the new employee to the department. Induction helps a new employee to feel welcomed. It creates a room where a new employee is provided with the necessary information, advice, tools and equipment needed to carry out their work.

2.4.3 Reward system

A generous reward strategy is one that ensures that high performance is recognized and rewarded Armstrong (2004) argues that a good reward system considers both financial and non-financial rewards that managers can employ to reward to good performance. Financial rewards include salaries, wages, bonuses and share options. Nonfinancial reward includes delegation, recognition, responsibility, meaningful work

autonomy and opportunities for achievement. Armstrong suggests that the best reward system is developed when organization continue to provide financial and non-financial rewards

2.4.4 Training and Development

Training and development programs have a crucial impact on staff motivation. People feel that their organisations look after them in terms of acquisition of new skills required to improve performance. Some organizations have realised that human capital is regarded as more significant than financial capital. Therefore, some organisations continue to invest large financial resources in Training and Development (T&D). When people receive training they feel motivated, inspired and passionate to work harder and eventually increase their performance in the organisation.

Training and Development are about expanding existing knowledge, acquisition of new knowledge and skills and changing attitudes and behaviours. There are some challenges regarding training and development in public service such as:

- Training not linked to performance
- Favouritism in terms of allocation of training opportunities
- Training not linked to skills deficiencies in the organization
- Favouritism in the selection of trainees which can compromise training

quality

2.4.5 Labour Relation Management

Public service staff rules (PSSR), Public Service Act, Act13 of 1995 and code of conduct provide guidance in managing labour relation in the public service. Van Der Waldt et al. (2002) define labour relations as the working relationship between the employer and employees. This includes the rights of each party on how decisions are made and how problems are solved. He further suggests human resource managers are required to have a wide variety of strategies to manage employer-employee relationships. These strategies should include change management, diversity management, conflict management, negotiations and fair labour practices. Labour unions represent the interest of workers and supervisors are expected to exercise a significant role of delinquency in dealing with unions to avert strike actions. Therefore, labour relations must be managed proactively and strategically for the benefits of both employers and employees.

The following are the common challenges that face labour relations management:

- Managers are not trained in labour laws and procedures.
- Managers are not well trained in negotiation skills and conflict management.
- Financial losses from strike actions and lost of court cases.

2.4.6 Retention strategic and Succession Planning

Retention is a very crucial component of Human Resource Management. Retention is a proactive planning, and it is in place as a mechanism to reduce staff turnover, especially people with scarce talents and skills. Reqenesys (2007) defines succession planning as a process of identifying potential vacancies in the management or influential positions and developing strategies to fill them. Succession planning is a proactive approach to deal with the circumstance of losing essential workers through a variety of reasons such as unexpected resignation, disease or death. Retention and succession strategies include activities such as Mentoring, development of long term

career paths, Job rotation, Promotions, Diversifications of responsibilities, Training and Development regular communication and realisation of the interests of employees.

There are benefits for well implemented retention strategies such as prevention of organization crises and shocks that can be caused by unexpected resignation of Senior Managers and Leaders, proactive and strategic management of human resources, staff motivation and consistency of organizational performance.

2.5 Financial Management

The financial performance of an organisation is the key indicator of the credibility of the organisation. The procedure for Financial Management in the public sector in Namibia is guided by the State Finance Act, Act 31 of 1991. Furthermore, the Auditor General is appointed and mandated to audit the financial operations of the Offices, Ministries, Agencies, Regional Councils, Local Authorities and other public sectors. The audit reports indicate how these public sectors perform and how the financial resources managed on that specific financial year. The qualified audit report indicates poor management of allocated financial resources while unqualified audit report indicates sound management of financial resources. The financial year of the Public Service starts on 1st April of a particular year and ends on the 31st March of the following year. Some ministries including the ministry of health and social services report overspending of the allocated budget. Overspending is an indicator of poor budgeting or poor allocation of financial resources.

Integrated Financial Management System (IFMS) was introduced to strength financial control in the public sector. It is a system introduced with a purpose to serve as

a guiding tool for improving financial Management. The system comprises of different modules such as payroll, procurement and payment of creditors.

Budgeting for the implementation of activities, programmes and projects are very essential for quality service delivery. There are two types of budgets namely operational budget and development budgets. The budget covers three years, and it is known with a concept of the Medium Term Expenditure Framework (MTEF) to fund the planned activities, programmes and projects. Development budget covers investment costs for acquisitions of infrastructures and assets while the operational budget covers running costs.

2.6 Quality Management

Quality is the key indicator of performance in the organisation. Therefore, the performance of any organisation is measured against the services they deliver. The customers of the organisation play vital role in the determination of quality of service. Managing quality requires new skills, innovation and continuous improvement of systems and processes. For the quality management to exist it requires the support of top management and continuous investment of resources. Quality management in the organisation needs to be the responsibility of everyone in the organisation from top leaders down to the low level staff. Principles of quality service delivery in public service are incorporated in the Public Service Charters (PSC). The principles the PSC include Access, Courtesy, Information, Service Standards, Openness, Transparency and Honest, Non-discrimination and Value for money.

2.7 Health Service Delivery

The World Health Organisation (WHO) defines health service delivery as the way inputs are combined to allow the delivery of a series of interventions or health actions

(WHO 2001b). The entire health system is often identified with just service delivery. Therefore, health service delivery can be understood as a system with inputs, processes, outputs and outcomes as indicated in Fig. 2. The core inputs that are very much necessary for health service delivery include financial resources, competent health care workers, adequate physical facilities and functional equipment, essential medicines and supplies, current guidelines and operating policies. In order to provide impact to the service delivery process, these inputs must be available and accessible by the communities.

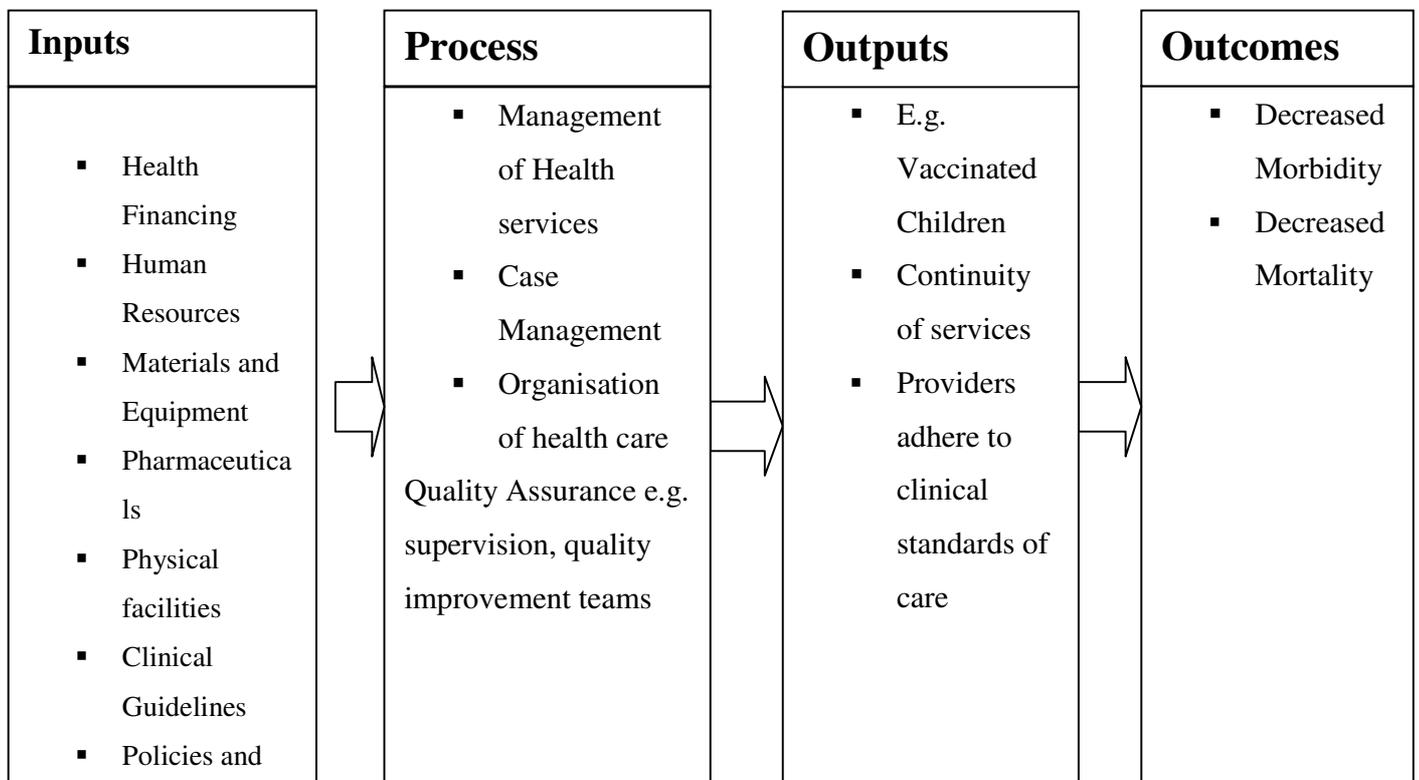


Figure 3 Systemic View of Health Service Delivery

Source: Adapted from Massoud and others et al (2001).

The figure reflects different inputs, the process that takes place to produce the outputs that affect the desired outcomes. These inputs include financial resources, competent health care workers, adequate physical facilities and functional equipment,

essential medicines and supplies, current guidelines and operational policies. The process includes management of health services, case management, supervision and quality improvement teams. The output is the community received quality health care services while the desired outcomes can be a decreased illness and reduced related deaths.

It is therefore essential to understand how the service delivery system works before identifying its strength and weaknesses. According to the WHO (2001), Health service delivery is described in terms of the size of the public health service delivery system covering both infrastructures and human resources. In the case of infrastructure, it is necessary to determine whether public facilities cover all areas of the country. It is also crucial to find out whether existing facilities have functional equipment and medicines are available. However, both the Health System Review (2008) and the Presidential Commission of Enquiry Report (2013) indicate that some critical equipment in the Health facilities is not functional, and some of the existing facilities are in the state of dilapidation.

Important aspects of service delivery concerning human resources include human resource adequacy, skills, and whether human resources are constrained by low salaries, poor deployment and loss of staff to the private sector. The structure and composition of the management and supervisory actors in the health delivery system, their roles and responsibilities are critically essential for service delivery.

The structure of service delivery covers aspects of determining whether the services are delivered by the public sector or private sector. This includes the determination of levels of service delivery and a number of health facilities in the regions. Another important element in service delivery is the support service. Support service delivery is vital in the

provision of quality services. This function involves elements of planning, resource allocation, supervision and monitoring and evaluation.

Service availability is also crucial for the determination of quality service delivery. It is more important to have large coverage of service availability. According to the WHO (2001) availability coverage refers to the proportion of people for whom sufficient resources have been made available, the ratio of human resources and material resources to the total population. In other words, availability coverage is the degree to which health facilities that are functional, adequately staffed, equipped and supplies are available to the population in the country.

Another important aspect of service delivery is Service delivery access. WHO (2001) refers Service delivery access as the ability of the population to reach appropriate health services. Various factors can reduce service delivery access, including the presence of geographical and transport barriers, lack of financial resources and lack of cultural appropriateness according to WHO (2001). Organisation of service delivery is critical in the provision of quality service to the communities. WHO (2001) defines organisation of service delivery as choosing the appropriate level for delivering interventions and the degree of integration. To assure the quality health service delivery, there is a need for health information system to be in place. The health information system must define, communicate and monitor the level of quality of health care. It is necessary to understand that well functioning health care system requires a robust financing mechanism, well trained and adequately paid workforce, reliable information on which to base decisions and policies, well maintained facilities and proper logistics to deliver quality services.

2.8 Performance Management and Motivation

The success of organisations depends on their staffs that are motivated, committed and passionate. Therefore, staff motivation is a prerequisite for high performance and eventually leads to effective service delivery in the organisation. There are a variety of ways to motivate people, including the proper setting of individual goals, goals for the teams and goals for the organisation. People can also be motivated by financial incentives and by fear of losing a job. Drucker suggests that employee satisfaction comes through encouraging by pushing employee to accept responsibility.

According to Nelson and Quick (2003) motivation is the process of arousing and sustaining goal directed behaviour. Pinder (1998) defines work motivation as the set of internal and external forces that initiate work-related behaviour and determines its form, direction, intensity and duration. From the definitions, it is clear that the motivation is inbuilt in human beings, and it needs to be aroused. Motivation is not permanent, but a temporary item as even motivated person can be demotivated at any time.

Mathis and Jackson (2000) indicate that the performance of employees is influenced by individual and organisational factors. Individual factors include the ability of the employee to perform and what motivates individual to perform. Furthermore the individual employee needs support and guidance to increase productivity. The organisational factors include job design, job elements, organisational policies, organisational culture, organisational structure and reward system. A motivated and qualified workforce is critical for the increase of productivity and the quality of service delivery by the organization in order to achieve the objectives of the organization.

(Gibson, Ivanceich & Donnelly, 1996) argue that motivation is considered as the main determinant for increased performance. Therefore, the more employees are

motivated, the higher the productivity of an organisation. Gibson (1987) identified three factors that affect performance as listed below.

- Individual factors: ability, skills, family background, experience of employment and social demographic levels of a person.
- Psychological factors: personality, attitudes, behaviours, values, interpersonal skills, perception, motivation, roles and job satisfaction,
- Organisational factors: organizational structure, job design, organizational culture, leadership and reward systems.

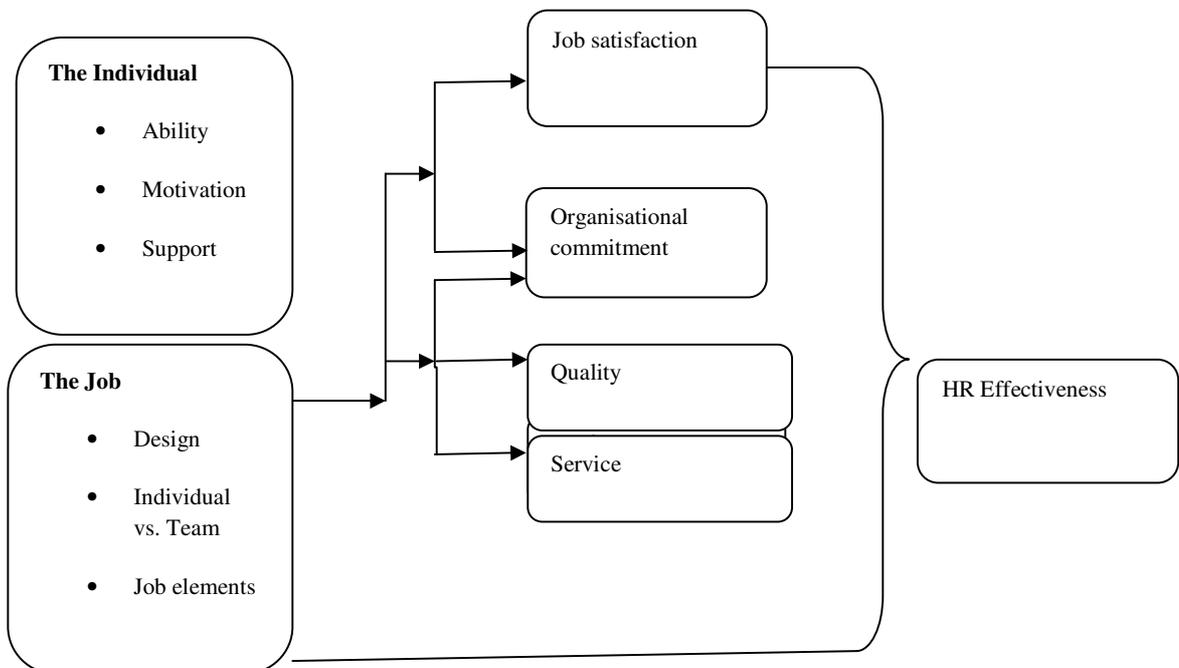


Figure 4. Individual and organisational performance

Source: Mathis and Jackson (2000)

According to Re'em (2011) job performance is typically viewed as particularly determined by the motivation of the employee to work hard and therefore an increase in motivation should lead to greater effort and high performance. To improve the organisation's performance, the organization should implement a good performance

appraisal and salary systems to enhance employees' motivation. Re'em further states that before any motivation system is implemented it is necessary for someone to make sure that there is a good performance appraisal system in place. Warren (2006) states that motivation is the force that energises behaviours while Suea (2004) states that motivation is about arousal, direction and persistence of effort in a work setting. An increase in staff motivation can therefore result in high performance and eventually lead to high service delivery.

There are various incentives that managers can give to employees to increase productivity. These include money in the form of pay, bonuses, stock options and other benefits in different forms such as medical aid, vacation leave, sick leave and payments received after retirement. It is essential to reward employees in the way that enhance performance and motivate them. According to Atchison, (2003) it is better to spend money on true rewards for specific types of performance and outcomes. Furthermore, Atchison argues it is essential to focus on revitalising employees as research shows that when employees are overloaded with work, motivation is diminished and productivity declines.

Motivation is significant because even people with the right knowledge, skills, abilities can perform poorly if there is nothing to motivate them to devote their time and effort to their work.

When employees lack motivation, they develop negative attitudes towards work that can result in absenteeism late coming to work negligence of duty, failure to meet deadlines and display of open frustrations.

Lack of motivation can cause a high staff turnover, absenteeism, low service and high operating costs. Employees have different needs and wants based on individual choices. Employees are individuals from different backgrounds, experiences, education and thereby each employee has a primary interface to satisfy needs, ambitions, desires and goals (P. Pertcharak, 2002)

The Assessment of Motivation.

2.8.1 Theories of Performance Management and Motivation

Job performance can be evaluated in terms of the extent to which it contributes to the organization effectiveness according to (Onukwebe, Iyabga & Fajana,2010). It is clear from these definitions that job performance is related to the extent to which an employee is able to accomplish the task assigned to him or her and how accomplished tasks contributes to the achievement of the organization goals (MA Mawoli 2011)

Kreitner and Kinicki (2008) state that despite the fact that research does not clearly support Maslow theory, there is one key managerial implication of Maslow theory that needs to be noted. A satisfied need may lose its motivational potential. If it's critical that managers put in place programs aimed at satisfying new and every need in order to motivate employees. Managers can use Maslow's theory to provide employees with physiological and security needs in terms of pay, service benefits and job security.

During the analysis of various theories of motivation, some factors have been identified.

- **Rewards-** That are linked to performance and valued by employees.
- **Goal setting-** Goals that are challenging but achievable.
- **Feedback-** That informs employees of their level of performance and progress towards achieving their goals.
- **Job characteristics-** A job that is enthralling, but challenging.
- **Salary-** As a motivator.

- Advancement and growth opportunities with the organization.
- **Working conditions-** Friendly working environment, quality of equipment.
- **Recognition and appreciation-** For employees' performance and achievements.
- **Training and development-** To enhance skills and abilities to improve performance.
- **Job responsibility-** responsibility for own work.
- **Job security-** Sense of security about future with the organization.
- Performance Appraisals- That accurately measure an employee's level of performance.

Various theories of motivation can be used by managers as a reference to learn and understand the various relationships between motivation and performance. Motivation is a prerequisite for high staff performance. Many authors have written more about motivation theories and other theories that influence performance in the organization. However, this study will focus on Maslow's hierarchy of needs theory, Herzberg's theory of motivation, theory X & theory Y and McClelland's theory. If these theories are correctly applied to the Ministry of Health and Social Services, service delivery can be improved. Buchner has identified three theories for performance management, namely goal theory, control theory and social cognitive theory.

Goal Theory

The goal theory was developed by Latham and Locke (1979). The goal theory points out four mechanisms that link goals to performance outcomes. The direct attention to organisational priorities, they stimulate efforts, they challenge people to use their knowledge and skills to increase chances of success and challenging goals need employees use their potential skills.

The theory puts more emphasis on setting agreeable objectives against which performance can be managed and measured.

According to (Robertson, Smith & Cooper,1992) goals inform individuals to achieve a particular higher level of performance. Goal setting guides employees to direct their thinking and evaluate their actions. Performance feedback allows individuals to track how well the employee has been performing towards the set goals.

Control Theory

Control theory concentrates on feedback as a mechanism of shaping behaviours of people. When the employees receive feedback, they recognise their behaviours and correct them when necessary. Therefore, feedback is an integral part of Performance Management.

Social Cognitive theory

Social cognitive theory was developed by Bandura (1986). The theory concentrates on self efficacy. It suggests that people believe that what they can or cannot do has an impact on performance.

Developing and sustaining self belief in employees is an extremely crucial part of performance management

Abraham Maslow's Hierarchy of needs

Maslow advanced the theory about human behaviour. According to Maslow a man is a wanting being. Maslow points that satisfied needs are not motivating factors of behaviour. He states that only unsatisfied needs motivate a person. The needs are arranged in a series of levels a hierarchy of importance. Maslow believed that the underlying needs of all human motivation to be on five general levels from lowest to highest. According to this theory, once one level is satisfied individual will be motivated

to progress to satisfy the next level of needs. The following are the five Hierarchical of the needs of Maslow:

1. Physiological needs, including needs for water and food
2. Safety needs, including needs for job security, shelter, safe working environment and money.
3. Belonging needs, including the needs for association, social interaction, friendship, affection
4. Esteem needs, including the needs for status, recognition
5. Self actualization needs such as needs for personal growth, development and achievement

Herzberg's theory of motivation

The major finding of the theory was that the events that led to satisfaction were no different from those that led to dissatisfaction. The research results came up with hygiene (intrinsic) factors associated with employee satisfaction on one hand and unhygienic (extrinsic) factors on the other hand associated with employee dissatisfaction. The employees are motivated by hygiene factors include achievement, recognition, the work itself, responsibility, growth, development and advancement. However, employees in most cases are discouraged by inflexible company policy, outdated administrative policies, close supervision, low salaries and unhealthy relations in the organization.

Theory X and Theory Y Managers

Douglas McGregor proposed theory X and theory Y model. The purpose of the model was to explain the human traits. Theory X makes assumptions that the average human being has an inherent dislike of work and a person can avoid it if the person can wish to do so. The theory further states that most people need to be coerced, controlled,

directed or threatened with punishment to get them expend adequate effort towards the achievement of the organizational objectives.

On the other hand, Theory Y makes different assumptions about the nature of people. Theory Y states that external control and threats of punishment are not the only means to bring an effort. According to this theory people can exercise self-direction to achieve objectives to which they are committed. Theory Y further stresses that employees who like work must be allowed to exercise self control and these employees take responsibilities and more innovative. The theory states that commitment to objectives is a result of the rewards associated with their achievement and the most significant of those rewards is the satisfaction of the self-actualization needs.

David McClelland's theory of needs

According to McClelland's study of motivation (1955) three basic types of motivating needs are present in people. He points that all three needs can be present in a person, but the weight attached to each can be different. According to this theory employees are motivated by needs for achievement, affiliation and power. From the theories, people factors such as leadership, skills and motivation directly impact service delivery. Other issues such as organisational culture, attitudes, work ethics, emotional and spiritual intelligence also has an immense impact on organisational performance.

This study utilised conceptual model as reflected in figure 5. Leadership Style, Organisational Structure, Organisational Culture and Performance Management and Evaluation play critical role in Job Performance which leads to improved Service Delivery in the organisation.

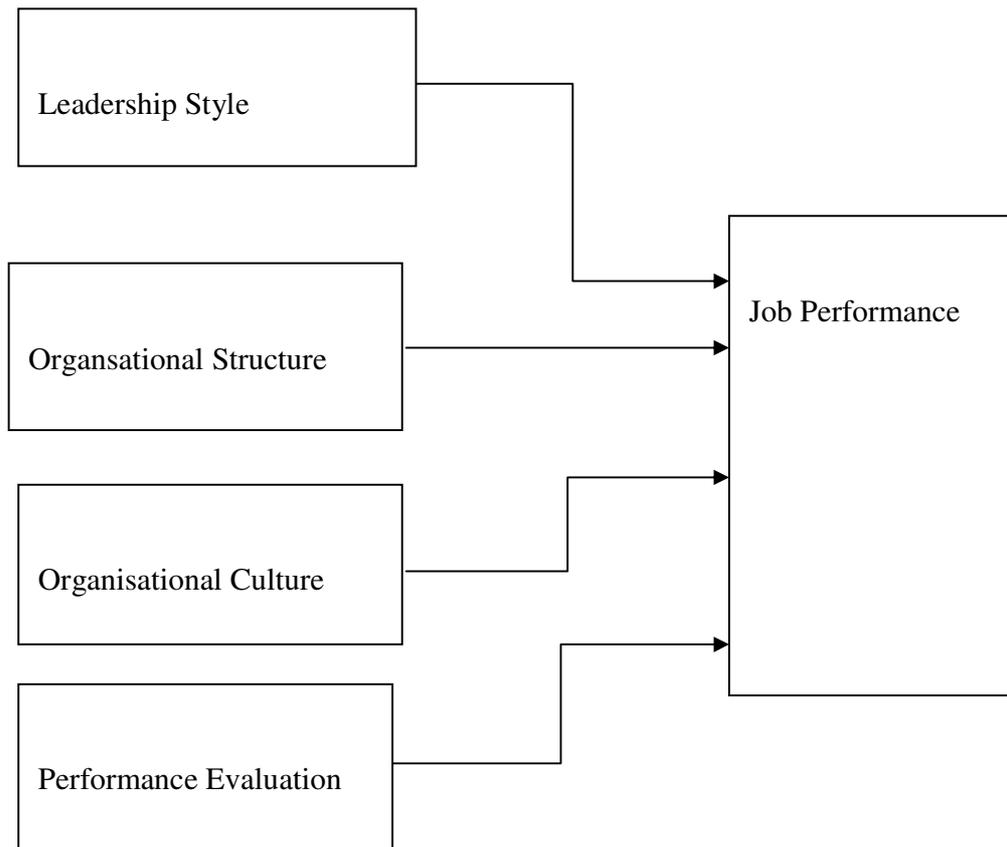


Figure 5. Conceptual model of job performance

Source: Kalyani L. D. (2006)

2.9 Summary

The review of literature on performance and motivation of employees reveals how staff performance, motivation, leadership, human resource management and development are crucial for quality service delivery in the organisation. Theoretical framework for analysing performance and motivational challenges that affect service delivery was discussed. It was made clear that organizational, cultural, psychological and individual factors affect staff performance and eventually affect service delivery. The next chapter describes the research methodology employed in this study.

Chapter 3: Research Methodology

3.1 Introduction

This chapter describes the research methodology that was employed to investigate performance and motivational challenges that affect service delivery in the Ministry of Health and Social Services. This research methodology includes the research questions, research objectives, research design, research strategy, research method, research instruments, data collection and ethical considerations.

3.2 Research objectives

The objectives of the study are:

1. To identify performance and motivational challenges of employees that affect service delivery in the Ministry of Health and Social Services.
2. To describe factors that contribute to low service delivery in the Ministry.
3. To identify some of the international best practices in performance management and motivation of employees of an organization.
4. To make recommendations to the management of the Ministry to address performance and motivational challenges of employees in the MoHSS.

3.3 Research Questions

1. What are the performance and motivation challenges of employees that affect service delivery in the Ministry of Health and Social Services?
2. What are the underlying factors causes the performance and motivation challenges?
3. What international and regional best practices in performance management and motivation of employees can be explored and recommended improving service delivery in the MoHSS.
4. What recommendations can be made to address low quality service delivery in the MoHSS?

3.4 Research design

A research design is a work plan of how to conduct the research study. In social research, the issues of sampling, methods of data collection, design of questionnaire, observation, document analysis and design of questions are components of research design. A research needs design or structure is the research foundation that needs to be built before data collection and data analysis starts. The function of research design is therefore to ensure that the evidence obtained enables the researcher to answer the initial question as unambiguously as possible. Research design is therefore a framework that provides detailed procedures necessary for obtaining the information needed to resolve research problems.

In research design, there are some very important tasks for research design such as the definition of needed information, designing exploratory and descriptive phase of the research, specifying the measurement and scaling procedures, constructing questionnaires, specifying sampling process and sample size and development of data analysis.

This study employed a combination of qualitative and quantitative approaches. The combination of qualitative and quantitative approaches is known in research language as mixed method. According to Creswell and Plano Clark (2007), the mixed method research is an approach that combines both qualitative and quantitative forms. They further stress that the mixed method is not only important for collecting and analysing both kinds of data, but also involves the use of both approaches in tandem so that the overall strength of study is greater than either qualitative or quantitative research.

The concept of mixing different methods was introduced by Campbell and Fisk in 1959, but the method is still less known. They developed the concept when they used multiple methods to study the validity of psychological traits. They encouraged other researchers to apply multiple method matrixes to examine multiple approaches to data collection.

According to Sieber (1973) mixed approaches link field methods such as observation, and interviews (qualitative data) with traditional surveys and questionnaires (quantitative data).

The researcher employed questionnaire to collect quantitative data including the ages of respondents.

Creswell and Clark (2007), indicate that the qualitative and quantitative data can be merged into one large database to reinforce each other through the use of qualitative quotes and quantitative statistical results.

John and Onwuegbuzie (2004) defined the mixed method as the class of research in which the researcher combines qualitative and quantitative research techniques, methods, approaches, concepts and languages into a single study. Since this study explores complex relationships of multiple factors that affect staff performance and motivation in the Ministry of Health and Social Services, this research is largely a qualitative approach. These factors cannot be quantified or measured, and qualitative research methodology is suitable for this study. A qualitative research approach was employed because it is effective in obtaining culturally specific information about the values, opinions, behaviours, and social contexts of a particular population. Qualitative research is characterized by its aims which relate to understanding some aspects of social

life and its methods which in general generates words rather than numbers as data for analysis according to M Qinn and M. Cochran (2002).

The qualitative research works well in the situation where there are different sorts of questions that need some answers. If the question is in the qualitative form, then the most appropriate answer is to use qualitative method. Qualitative methods are effective in identifying intangible factors, such as social norms, socio-economic status, gender roles and human experiences whose role in the research issue may not be readily apparent (Talja 1999, Mottier 2005).

Qualitative methods generally aim at understanding the experiences and attitudes of employees in an organisation. These methods aim to answer questions about the what, how or why of the phenomenon rather than questions for quantitative method for instance how many or how much. Therefore, qualitative method is very appropriate for investigation of performance and motivational challenges that affect service delivery in the Ministry of Health and Social Services.

N. Mack and C. Woodson (2008) state that qualitative research seeks to understand a given research problem or topic from the perspectives of the local population it involves. Furthermore, qualitative research methods are gaining popularity outside the traditional academic, social Sciences, particularly in the area of public health and international development research. This research also employed the quantitative approach. It is crucial for this study to employ qualitative methods in determining performance and motivational challenges that affect service delivery in MoHSS.

3.5 Research strategy

This section describes the research strategy that was followed in this study to reach the objective of the study. This includes the research method, target population and sampling strategies. The study employed mixed method research that combines qualitative and quantitative approaches. The semi structured questionnaire was designed to collect primary data from the representative samples. The sources of secondary data include desktop research. A review of relevant literature was conducted on service delivery, performance management and motivation using books and journal articles. Furthermore a review of the strategic plan, annual reports, research and investigation reports of the Ministry of Health and Social Services were conducted as well as a public service policies and legislation were reviewed

This study uses exploratory and descriptive research methods. Descriptive research is the common qualitative method used to study various topics in management and social science. The descriptive method is often used to for the study of a particular organization, industry or sector according to Saravoya (2010). Explorative research provides assistance in improving understandings of different functions of complex elements of different systems.

3.5.1 Population

For the purpose of this study, population refers to the group of people or objects that are being studied. This study focuses on the population of the middle management of the Ministry of Health and Social services. Middle management is targeted by this study as they play critical roles in planning, coordinating and implementing programmes and projects that are highly critical for improved service delivery.

3.5.2 Sampling

Sample refers to a small portion of the whole population that is chosen to be studied in order to save time and other resources. According to Polit et al (2001) sampling is the process of selecting a portion of the population to represent the entire population. A sample is a subset of the population by which a researcher selects participants of the study. Sampling is therefore a process of selecting a portion of the population in the research area which will be a representation of the whole population. The sample should represent the key characteristics of the population of the study. Key terms associated with sampling include sample frame, population, eligibility criteria and sampling design. A sample frame refers to the list of the elements in the population from which the sample is drawn. Sampling strategy is very important in the selection of the target group. A strategy is a plan set to ensure that the sample used in the research study represents the population from which the sample is drawn.

The major groups of sampling are the probability design and non probability sampling. Probability sampling includes some forms of random selections of elements of the study. This study used simple random sampling. Simple random sampling is a probability sampling that gives every element in the target population and each possible sample of a given size an equal opportunity of being selected. Furthermore, simple random sampling was selected for this study because of the following strengths. Advanced auxiliary information on the elements in the population is not required, each selection is independent of other selections and every possible combination of sampling units has an equal and independent chance of being selected. Furthermore, simple random sampling is generally easier than the other probability sampling procedures.

There are very important steps a researcher needs to consider in simple random sampling as follows. The target population needs to be defined, identifying the existing from the one of the target population or developing the new one, determining the sample size and randomly select the targeted number of the population elements. There are important approaches to selecting a sample for qualitative research. This includes convenience sample, judgment sample and theoretical sample

This study employs a convenience sample technique as it involves the selection of most accessible subjects. Convenience sample is the least costly to the researcher in terms of time, effort and money. According to M.Q. Patton (2002), samples in qualitative research are usually purposive. It means that participants that participate are selected because they are likely to generate useful data for the project. Therefore, sampling strategies should always be determined by the research project.

The senior and middle management of the Ministry of Health and Social services both at National and Regional levels were purposively sampled for this study. Senior and middle management are targeted by this study as they play critical roles in planning, coordinating and implementing programmes and projects crucial for improved service delivery. M.Q. Patton (2002) indicates that sample sizes are typically smaller in qualitative work. Therefore, this study chooses a small number of people from large workforce of the Mass.

The study has drawn from a small number of respondents from National level and from four regions of the country. These respondents include, Directors and Heads of Subdivisions such as Chief Control Officers, Chief Accountants, Chief Human Resource

Practitioners, Chief Health Program Administrators and others at the level of heads of subdivisions.

3.5.3 Sampling Size

The sample size constitutes of four Directorates at national level and five Regional Directorates. National directorates include Primary Health Care, Finance and Logistics, Human resource Management and General Services and Policy, Planning and Human Resources Development. These four national Directorates are selected from seven national directorates. The selected directorates were chosen because of the critical roles they play in terms of the research. The four regional directorates include Omusati, Ohangwena, Oshana and Kunene. The four regional directorates were selected from thirteen regional directorates. The four regional Directorates were selected because of the large population that these regions serve. The study has drawn respondents from national and regional directorates as depicted in the following tables below.

Table 1.1 Directorates sampled.

No	Directorates	Population	Sample
1	National Directorates	7	4
2	Regional Directorates	13	4
	Total	20	8

Table 1.2 Categories of Respondents at National Level

No	Category Description	Population	Sample
1	Chief Control Officers	4	2
2	Chief Accountants	2	1
3	Chief Human Resource Practitioners	2	1
4	Chief Health Program Administrators	4	2
	Total	12	6

Table 1.3 Regional Directorates Sampled.

No	The Regional Directorate	Population	Sample
1	Oshana	1	1
2	Ohangwena	1	1
3	Omusati	1	1
4	Kunene	1	1
	Total	4	4

Table 1.4 Categories of respondents at Regional Level

No	Category Description	Population	Sample
	Directors	4	3
	Chief Control Officer	4	4
	Chief Health Program Administrators	10	8
	Total	18	15

Table 1.5 Total Number of selected population and respondents sampled.

No	Respondents	Population	Sampled
1	National Level Directorate	12	6
2	Regional Level Directorates	18	15
	Total	30	21

3.6 Research instruments

This section presents the research instruments that were employed in this study to collect qualitative and quantitative data. The questionnaire was designed to collect both qualitative and quantitative data. The questionnaire is a data collection instrument mostly used in surveys. It is a systematic prepared form or document with a set of questions which are purposefully designed to obtain responses from respondents for the purpose of collecting data. It is a form of inquiry, document that contains systematically compiled

and well organised series of questions intended to solicit the information which provide insights into the nature of the problem under study.

Structured questionnaire was used to collect data required for this research purpose. Under the structured questionnaire, the respondents' choices are limited to the set of options provided. Structured questionnaire containing open and closed-ended questions were used to collect primary data. The items on the research instruments were structured to ensure accessibility of respondents and ensure that the data would fulfil the research objectives. The questionnaire comprised six sections. Section 1 consists of close ended questions related to personal details. Section 2 focuses on Skills and Experience, Section 3 focuses on Governance, Section 4, focuses on Performance Management, Section 5 focuses on Motivation and Section 6 focuses on aspects of quality service delivery. Respondents were asked to provide both qualitative and quantitative information on the aspects of service delivery, motivation and performance management. Quantitative information comprises of rating different aspects of performance management, motivation and service delivery according to a five level scale presented below.

- 5- Very high (excellent)
- 4- High (good)
- 3- Medium (satisfactory)
- 2- Low (poor)
- 1-Very low (very poor)

The Health and Social Services System review (2008) of the Ministry of Health and Social Services has pointed some of the challenges that affect staff performance and motivation at the time. I designed some questions covering some of the challenges

identified at the time to test whether these challenges still exist in the Ministry. The questions were designed for the respondents to simply agree or disagree with the statement by using 1-5 scale as follows.

5- Strongly agree

4- Agree

3- Neither disagree or agree

2 -Disagree

1- Strongly disagree

The last part of the questionnaire requires the respondents to make comments on issues of their choices that respondents viewed worth mentioning. Questionnaires were sent randomly to 6 middle management officials in the Ministry of Health and Social Services at National and fifteen senior and middle management officials from four Regional Directorates.

3.7 Data Collection

According to Saunders et al. (2009) the two most commonly used method of collecting primary data are questionnaires and interviews. The questionnaires are more reliable tools to effectively gather accurate information. Annabel (2006) stated that data from interviews are not objective as in the quantitative research. A good interview must explore the subjective knowledge, opinions and beliefs of an individual. This study applied mixed research approach and employed a questionnaire to collect data. According to Annabel (2006), questionnaires are optimal for collecting data on individual personal histories, perspectives, and experiences, particularly when sensitive topics are being explored.

3.8 Ethical considerations

Respondents were assured about the anonymity of their participation in this study and that their views would be treated with a high level of confidentiality. Apron (1989) stated that any kind of research study should be guided by the principles of respects for people, understanding of research benefits and application of justice. The principles of justice refer to an equal share and fairness. The crucial distinctive feature of these principles is the avoidance of exploitation and abuse of participants. Apron (1989) further stated that justice in qualitative research studies is demonstrated by recognizing the vulnerability of the participants and the contribution they make towards the research study. Therefore, in a qualitative research study ethical principles are honoured by informed consent of the participants. He considered that respect for people includes the recognition of rights for the participants to be informed about the study and the rights of the participants to withdraw from the study without penalty. Dresser (1998) indicates that the administration burden of ethical reviews and procedures is balanced with the protection of the participants.

It is therefore vital for everyone who conducts the research study to apply a high degree of ethical consideration. All researchers are responsible for ensuring that participants in the research study are well informed about the purpose of the study they are requested to take part in. The participants need to understand the risks they may face as a result of taking part in the research study. It is also important for the participants to have an understanding of the benefits of the research study to the public. Most authors expressed a need to consider ethical issues such as respect for human dignity, respect for anonymity and confidentiality, avoidance of harm, violation of privacy and concealing of crucial information. Participants in this research were requested to feel free from fear of

consequences and make independent decisions to take part in the research study. Respondents of this study were also informed in the letter that the information they provide will be treated with a high degree of confidentiality. According to Jean Michel Baer (2010), high ethical standards add to the quality of research and increases its social impacts. He further states that ethics promote the research integrity and align research to the social needs and expectations of the society. This study understands that high ethical standards increase public trust. It is also recognized that the quality of social interactions between researchers and participants may facilitate or inhibit access to information.

Agar (1996) suggests that research studies should be carried out with transparency, confidentiality and voluntary consent in mind. The structured questionnaire employed by this study was designed with ethical consideration in mind and the questionnaire does not make any provision of details of respondents.

3.9 Data Analysis and Interpretation

Twenty one (21) questionnaires were distributed to the sampled respondents. A total number of fourteen completed questionnaires were received and coded. Each questionnaire was scrutinized. A statistical analysis software SPSS was used to examine quantitative data. For the qualitative data, data were organized into categories. Devos (2005) refers to data analysis as the systematic organisation and synthesis of research data and the testing of research hypotheses. He further stated that data analysis gives meaning to the data collected.

Streubert and Carpenter (1995) refer to data analysis as a description of what came out of the investigation. The collected data were separated and coded. According to Jorgensen (1989) analysis is a breaking up, separating and dissembling of research

materials into pieces, parts, elements or units. With facts broken down into manageable pieces, the researcher sorts and shifts them to types, classes, processes and patterns. The purpose of the process is to reconstruct the data in a meaningful fashion.

Charmaz (1983) stated that disassembling and reassembling takes place through the process of coding. The codes serve to summarise synthesize and sort many observations and it becomes a fundamental element of analysis development. According to the Ground theory by Corbin and Straus (1990) open coding is the part that pertains specifically to the naming and categorizing of phenomena through close examination of the data. Therefore, in this study the received data were classified, categorized through the process of coding. Facts were broken down into manageable units. Since this study employed mixed research approach, both qualitative and quantitative data were categorized. Qualitative data are either in verbal or narrative format while quantitative data take numerical format. According to Bryman (2001) data interpretation involves the possible meaning of the data exploring themes and ensuring that adequate data has been collected to support the researchers' interpretation.

3.10 Summary

This chapter discussed the research methodology includes the research questions, research objectives, research design, research strategy, research method, research instruments, data collection, ethical consideration and data analysis.

CHAPTER 4: RESULTS

4.1 Introduction

This chapter presents the views of the respondents regarding factors that affect performance and motivation of employees in the ministry of Health and Social Services. The views are expressed in qualitative and quantitative formats as per questions on the questionnaires. To make interpretation easier, quantitative responses are presented in charts, tables and graphs. Qualitative responses provide explanations and substantiate quantitative ratings.

According to Bryman (2001) data interpretation involves the possible meaning of the data exploring themes and ensure that adequate data has been collected to support the researchers' interpretation. The focus of this study is on the factors affecting performance and motivation of employees in the ministry of Health and Social Services that contribute to low service delivery. The questionnaires focused on the aspects of Performance Management and Motivation such as governance and management, Human Resources, Financial resources, Procurement and Supplies, Assessments of Quality Service Delivery and Overall Impression on Service Quality.

4.2 Presentation and Interpretation of results

The results are presented according to the sections of the questionnaire that was employed to collect data from the respondents. The questionnaire consists of six sections and each section covers more than one question.

4.2.1 Section 1: Personal information

The pie chart below shows those that participated in the survey represented by gender. Out of all the respondents, 42.9% are female and 57.1% are male, this was performed to see if gender is equally represented in the survey and that the survey is not

based on gender. It can thus be seen that gender is well represented as there is only a slight difference.

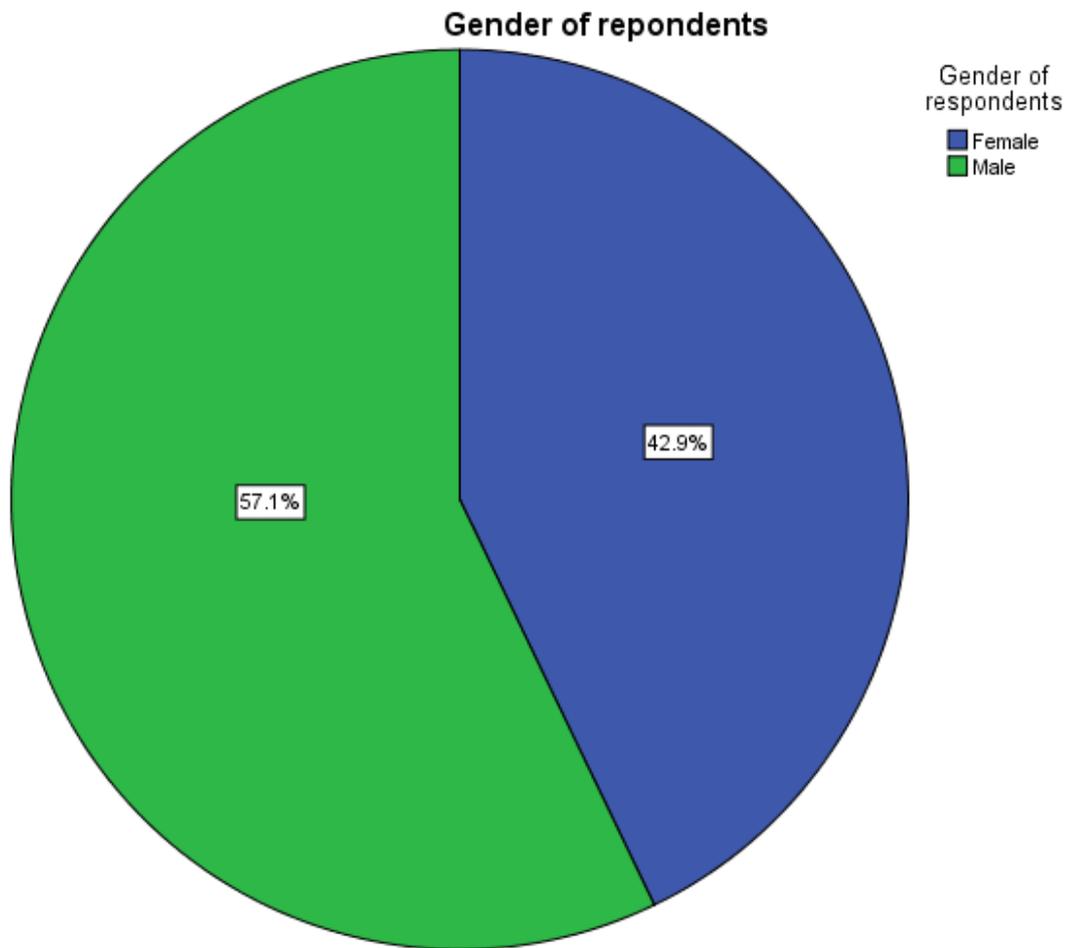


Figure 6. Gender of respondents

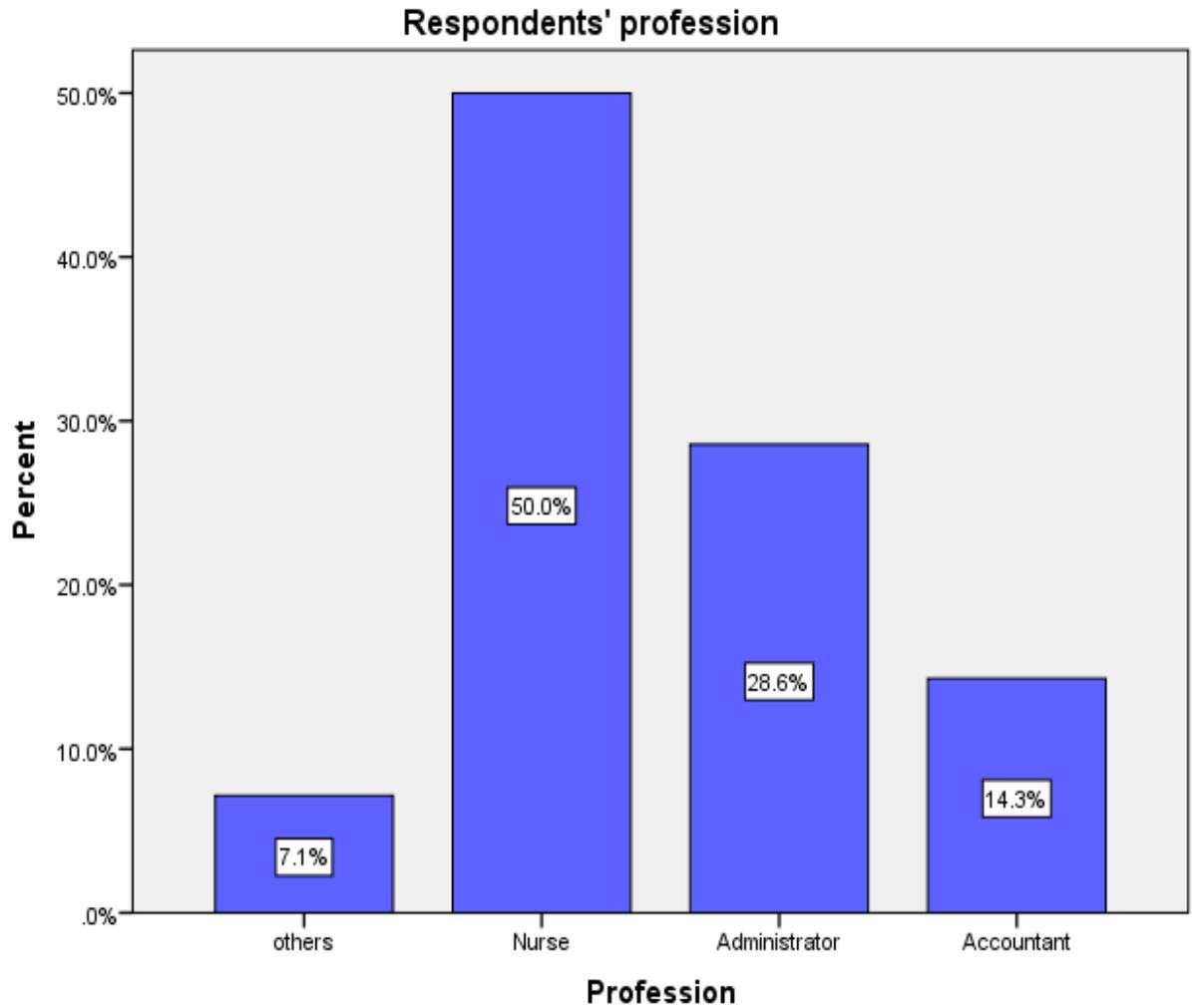


Figure.7 Respondents' profession

The table above shows the respondents' profession, this was only included to indicate that those ones interviewed are those that of middle and top management. Out of the respondents, half of them are nurses by profession, those that are administrators make up 28.6% and while the accountants make up 14.3%, however there were others from management fields and they comprised only 7.1%.

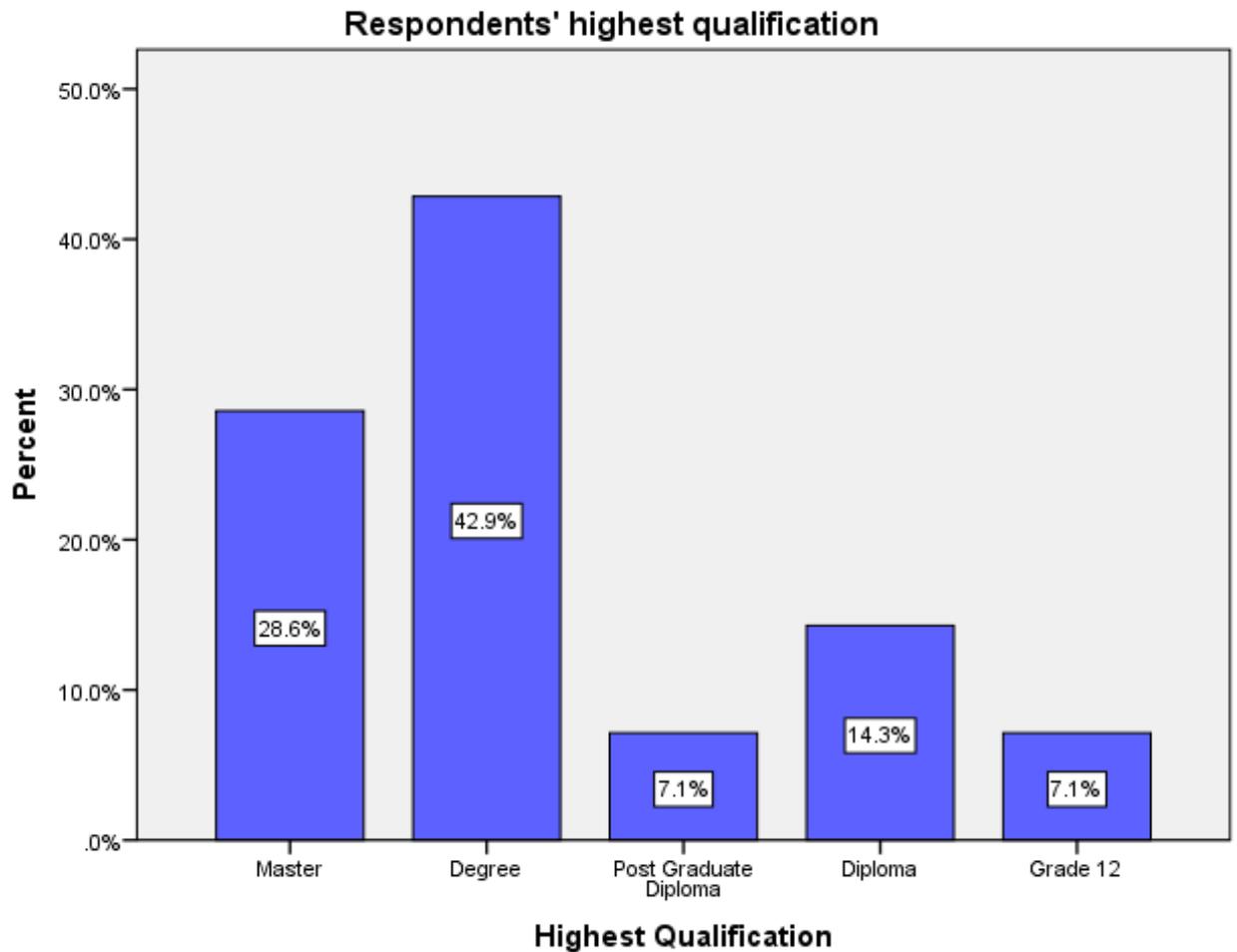


Figure 8. Respondents' highest qualifications

In order to see that the respondents are qualified or at least understand what they are being questioned about, the researcher asked their level of education by asking their highest qualification. Those with a degree makes up the largest portion with 42.9%, followed by those with masters constituting 28.6% those with diplomas make up 14.3% and then lastly those with post graduate diploma and those with grade 12 make up 7.1% respectively.

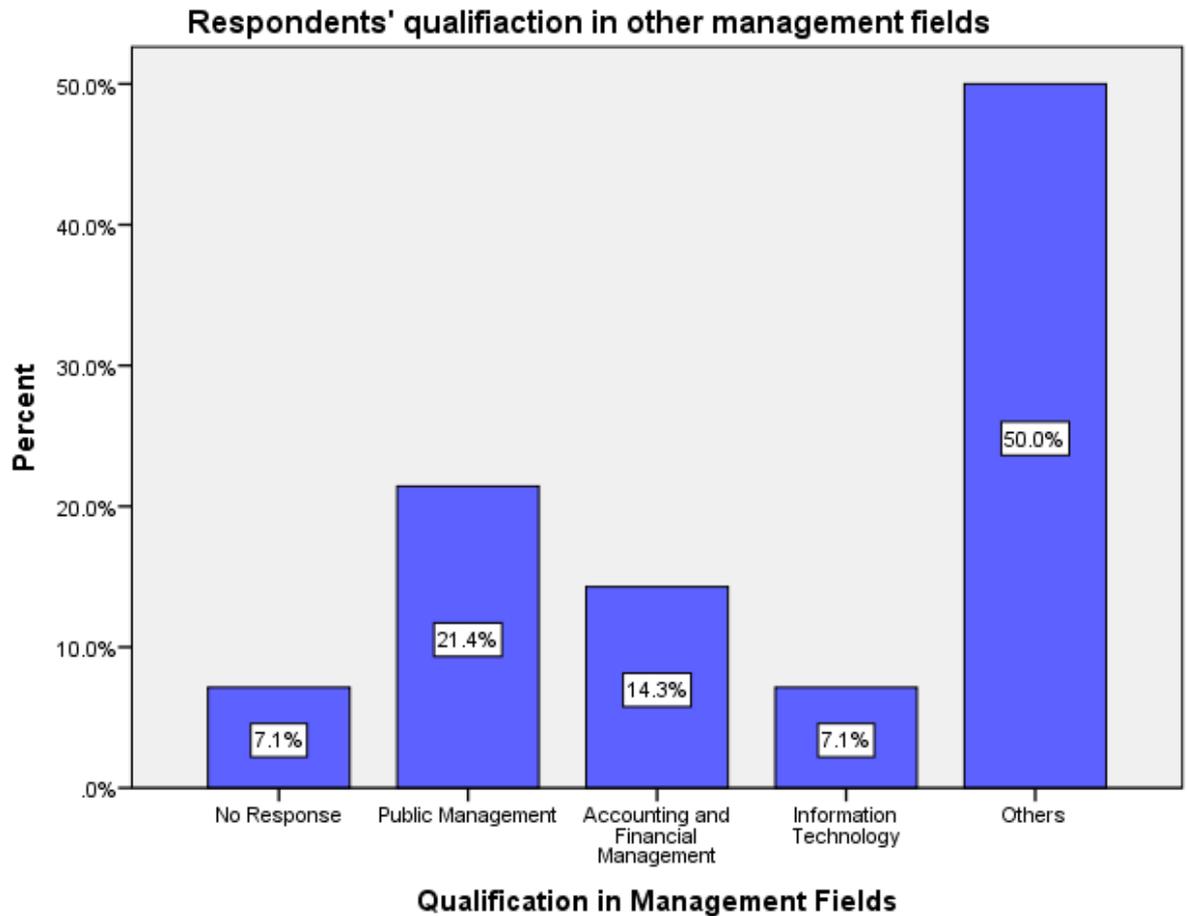


Figure 9. Respondents' qualifications in other management fields

Since the research concentrates on performance management, Service delivery, and other management questions, respondents had to be asked if they have qualifications in management fields. Those that have qualified in other management fields other than those provided make up 50 %, followed by those that have public management with 21.4%, then those with Accounting and financial management with 14.3% and then information technology with 7.1% however there was 7.1% of no response.

4.2.2 Section 2: Skills and experience

Respondents' years of experience in the field were also assessed just to know if respondents have experience of any sort to be in those positions. From the graph it can be seen that most of the respondents have at least 5 years work experience. Those that have 5-15 years of experience make up 50% those ones that have 16-25 years of experience make up 35.7%, while the remaining 14.3% are those that have 60 years and above of experience.

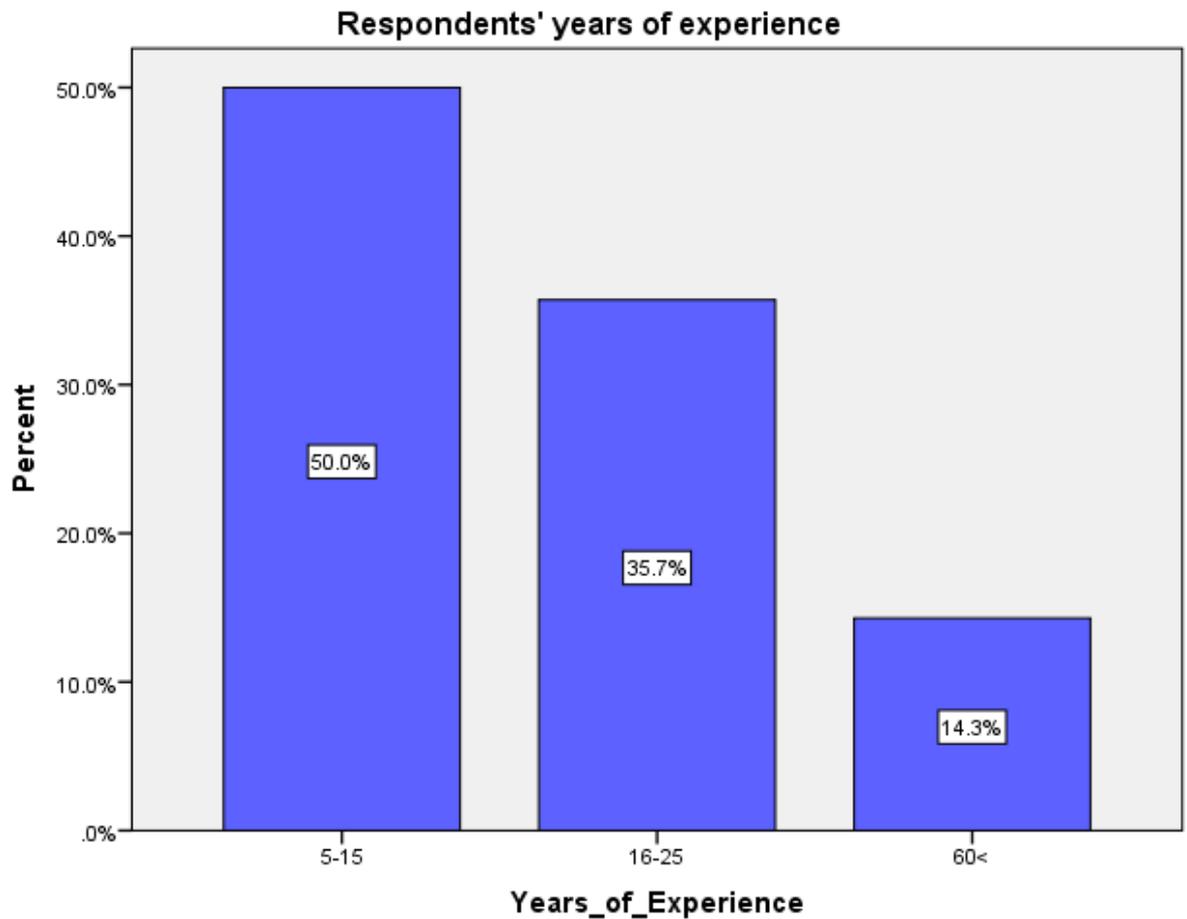


Figure 10. Respondents' years of experience

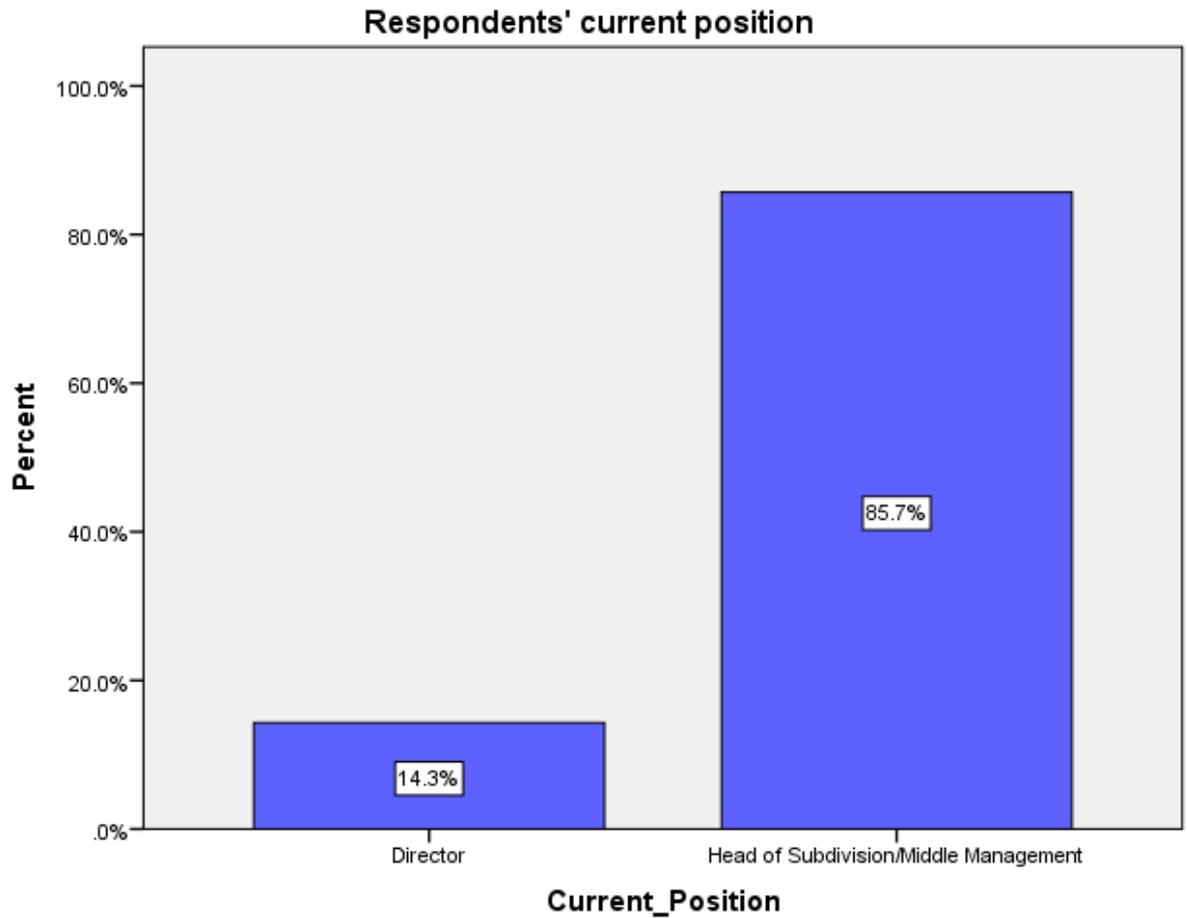


Figure .11 Respondents' current positions

Respondents were also asked to state their current position just to see if they are really in the middle or top management. Those ones that are in the head of Subdivision, Middle Management make up 85.7%, those ones that are directors make up 14.3%.

4.2.3 Section 3: Governance and Management

4.2.3.1 Governance And Management

Governance and management focused on the understanding of strategic elements of organisation such as Vision, Mission and Goals, Strategic Planning, Organisational Structure, Leadership Roles and Responsibilities, Policies and Procedures Capabilities

and Information Systems. Respondents were requested to rate the understanding of vision, mission and goal of the Ministry of Health and Social Services.

4.2.3.1.1 Understanding Of Vision, Mission And Goal

The vision, mission and goal were rated as 35, 7% Excellent, 35, 7% Good, 21.4% Poor and 7,1% Average. The results indicate that 35, 7% of the respondents rated the vision, mission and goals as Good and so is the same for the Excellent, and this means that more than half of the respondents said that they understand the vision, mission and goals of the ministry. However, 21.4% was rated as poor for the vision, mission and goals and a mere 7.1% for the average.

Table 4.1 Rating of vision, mission and goal of the ministry

Ratings	Frequency	Percent
Poor	3	21.4
Average	1	7.1
Good	5	35.7
Excellent	5	35.7
Total	14	100.0

4.2.3.1.2 Understanding Of Strategic Planning

Respondents were requested to rate the understanding of Strategic Planning of the Ministry of Health and Social Services. The Strategic Planning was rated as in descending order 28, 6% for Average, 28, 6% for Good, 21.4% for Excellent and 21,4% for Poor. The results indicate that only about half (50%) of the respondents really understand the strategic planning while the other half about 30% are not clear with the strategic planning and the remaining percentage have little or no understanding at all.

Table 4.2 Rating of understanding Strategic Planning of the ministry of Health and Social Services.

Ratings	Frequency	Percent
Poor	3	21.4
Average	4	28.6
Good	4	28.6
Excellent	3	21.4
Total	14	100.0

4.2.3.1.3 Organisational Structure

Respondents were requested to rate the Organisational Structure of the Ministry of Health and Social Services. In the table below the Organisational Structure was rated as 50, % Average, 28, % Poor, 14.3% Excellent and 7,1% Very Poor ranges them from the highest to the lowest percentages. The results point out that 50, % Average, means that people are not so keen about the existing organisational structure, It is also evident from the 28.6 % rated as poor and 7.1% rating it as very poor. Only 14.3% rated it as Excellent.

Table 4.3 Rating of Organizational Structure

Ratings	Frequency	Percent
Very Poor	1	7.1
Poor	4	28.6
Average	7	50.0
Excellent	2	14.3
Total	14	100.0

4.2.3.1.4 Leadership Style And Responsibilities

Respondents were requested to rate leadership style and responsibilities in the Ministry of Health and Social Services. The results in the table below indicate that in

total only 21.4% of the respondents rated the leadership style and responsibilities as good and excellent while on the other hand 57, 1 % rated it as Average and 21, 4% as poor.

Table 4.4 Rating of Leadership Style and Responsibilities

Ratings	Frequency	Percent
Poor	3	21.4
Average	8	57.1
Good	2	14.3
Excellent	1	7.1
Total	14	100.0

4.2.3.1.5 Policies And Procedures

Respondents were requested to rate Policies and Procedures in the Ministry of Health and Social Services. Table 4.5 shows that the Policies and Procedures was rated as 35, 7% Good, 28, 6% Excellent, 14.3% Average, 14.3% Very Poor and 7, 1% Poor. More than half of the respondents have rated the policies and procedures as good to excellent and about 21.4% rated them as poor to very poor. This then means that the high number of respondents do know and understand as well as support the ministry’s policies and procedures.

Table 4.5 Policies and Procedures

Ratings	Frequency	Percent
Very Poor	2	14.3
Poor	1	7.1
Average	2	14.3
Good	5	35.7
Excellent	4	28.6
Total	14	100.0

4.2.3.1.6 Capabilities (Knowledge And Skills)

Respondents were requested to rate their work capabilities in terms of skills and knowledge in the Ministry of Health and Social Services. Table 4.6 shows that the capabilities in terms of skills and knowledge were rated as 57.1% Good, 21, 4% poor, 14.3% average and 7.1% for excellent in ascending order. More than half of the respondents rated the capabilities in terms of skills and knowledge as good to excellent that constitute about 64.2% and the 21.4% as poor means that they lack knowledge and skills.

Table 4.6 Capabilities (work Knowledge and Skills)

Ratings	Frequency	Percent
Poor	3	21.4
Average	2	14.3
Good	8	57.1
Excellent	1	7.1
Total	14	100.0

Table 4.6 presents rating of Policies and Procedures of the ministry of Health and Social Service

4.2.3.1.7 Information Systems

Respondents were requested to rate information system in the Ministry of Health and Social Services. Table 4.7 shows that the information systems was rated as 42.9 % for Good, 35.7% for poor and 21.4% for Average ranging from the highest to the lowest. The 35.7 % that was rated as poor can suggest that at least a quarter of the respondents have poor understanding in the ministerial information systems, while 42.9% understand the operation of information systems in the ministry. Hence there might be a challenge as 21.4% also barely understand the information systems.

Table 4.7 General Information

Systems

Ratings	Frequency	Percent
Poor	5	35.7
Average	3	21.4
Good	6	42.9
Total	14	100.0

Table 4.7 presents the rating of information systems of the ministry of Health and Social Service

4.2.3.2. Human Resources

The questionnaire focused on human resource elements such as staffing adequacy, advocacy skills development, right skills at the right positions and human resources policies and procedures as variables.

4.2.3.2.1 Staffing Adequacy

Respondents were requested to rate staffing adequacy in the Ministry of Health and Social Services. The following table 4.8 shows that the staff adequacy was rated as 42.9 % for average as the highest, 28.6% for poor as the next and good and very poor coming last with the same percentage of 14.3. This then means that staff adequacy is of concern as only 14.3% of the respondents point that it is good while the remaining percentage are being sceptical about it.

Table 4.8 Staffing (Adequacy)

Ratings	Frequency	Percent
Very Poor	2	14.3
Poor	4	28.6
Average	6	42.9
Good	2	14.3
Total	14	100.0

Table 4.8 presents rating of staffing (adequacy) of the ministry of Health and Social Service

4.2.2.3.2 Advocacy for Skill Development

Respondents were requested to rate advocacy skills development in the Ministry of Health and Social Services. Table 4.9 below shows that the advocacy skills development was rated as 35.7 % for average as the highest, 28.6% for good as the next occupying the same spot with 28.6% for poor and very poor coming last with 7.1%. Only 28.6% of respondents rated advocacy skills development as good which is low so it means that a high number of people do not view advocacy skills development as existing in the ministry.

Table 4.9 Advocacy for Skills Development

Ratings	Frequency	Percent
Very Poor	1	7.1
Poor	4	28.6
Average	5	35.7
Good	4	28.6
Total	14	100.0

4.2.2.3.3 Right Skills At The Right Positions

Respondents were requested to rate right skills at the right positions in the Ministry of Health and Social Services. Table 4.9 below shows that the right skills at the right positions was rated with an average of 50%, poor with 28.6%, good with 14.3 and then 7.1% for very poor. A very low percentage of 14.3 indicates that the right people are in the right positions.

Table 4.10 Right skills at right position

Ratings	Frequency	Percent
Very Poor	1	7.1
Poor	4	28.6
Average	7	50.0
Good	2	14.3
Total	14	100.0

4.2.2.3.4 Human Resource Policies And Procedures

Respondents were requested to rate human resource policies and procedures in the Ministry of Health and Social Services. Table 4.11 below shows that the human resource policies and procedures were rated as 57.1% as good, 28.6% as poor and 14.3% for average. This then means that more than half of the respondents view human resource policies and procedures as average to good while 28.6% of the respondents view the human resource policies and procedures as poor.

Table 4.11 Human Resource Policies and Procedures

Ratings	Frequency	Percent
Poor	4	28.6
Average	2	14.3
Good	8	57.1
Total	14	100.0

4.2.3.3 Financial Resources

The questionnaire focused on financial resource elements such as resource mobilization, budgeting, budget control, expenditure and payment of creditors as variables.

4.2.3.3.1 Resource Mobilization

Respondents were requested to rate resource mobilization in the Ministry of Health and Social Services and the results are shown in Table 4.12 below. The resource mobilization was rated as 57.1% for good, 28.6% for poor and 14.3% for average. This

then means that more than half of the respondents view resource mobilization as good while, only 14.3% think that resource mobilization is poor in the ministry.

Table 4.12 Resource Mobilization

Ratings	Frequency	Percent
Poor	2	14.3
Average	4	28.6
Good	8	57.1
Total	14	100.0

4.2.3.3.2 Budgeting

Respondents were requested to rate, budgeting in the Ministry of Health and Social Services. Table 4.13 shows that budgeting was rated as 50 % for good, 21.4% for poor and Average respectively, and then 7.1% for excellent ranging them from the highest to the lowest percentage. Although 50% rated budgeting as good and & 7.1 % as excellent still more than 40% rated the budget as average to poor, this suggests that some respondents are lacking skills in budgeting.

Table 4.13 Budgeting

Ratings	Frequency	Percent
Poor	3	21.4
Average	3	21.4
Good	7	50.0
Excellent	1	7.1
Total	14	100.0

4.2.3.3.3 Budget Control

Respondents were requested to rate budget control of the Ministry of Health and Social Services. Table 4.14 below shows that budget control was rated as 35.7% for good, 35.7% for average and 28.6% for poor by the respondents. Even though more than

half of the respondents rated budget control as from average to good, 28.6% of poor rating is still an indication that budget control might be a challenge in the ministry.

Table 4.14 Budget Control

Ratings	Frequency	Percent
Poor	4	28.6
Average	5	35.7
Good	5	35.7
Total	14	100.0

4.2.3.3.4 Control Of Expenditure

The control of expenditure was rated as 57.1% for average, 21.4% for good and still 21.4% for Poor. The result in the table 4.15 below indicate that the 57.1% of average says that there is a high number of people that lack the skills in expenditure control as only 21.4% of the respondents rated the control of expenditure as good.

Table 4.15 Control of Expenditure

Ratings	Frequency	Percent
Poor	3	21.4
Average	8	57.1
Good	3	21.4
Total	14	100.0

4.2.3.3.5. Payment Of Creditors

Table 4.16 shows that payment of creditors was rated as 42.9% for good, 35.7% for average, 14.3% for very poor and 7.1% for Poor. These results then indicate that 42.9% of the respondents have skills and understanding on the importance of timely payments of creditors, although 21.4% of respondents seem to have fewer skills.

Table 4.16 Payment of Creditors

Ratings	Frequency	Percent
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Very Poor	2	14.3
Poor	1	7.1
Average	5	35.7
Good	6	42.9
Total	14	100.0

4.2.3.4. Procurement And Supplies

The questionnaire focused on procurement and supplies elements such as sourcing of supplies, contract management, distribution, inventory management and transport management.

4.2.3.4.1 Sourcing Of Supplies

Table 4.17 shows that the sourcing of supplies was rated as 50% for average, 28.6% for good and 21.4% for poor. This shows that the majority of the respondents view the source of supplies as good, however there are some respondents (21.4%) who view source of supplies as poor.

Table 4.17 Sourcing of Supplies

Ratings	Frequency	Percent
Poor	3	21.4
Average	7	50.0
Good	4	28.6
Total	14	100.0

4.2.3.4.2 Contract Management

Respondents were requested to rate contract management in the Ministry of Health and Social Services and the results are shown in table 4.17 below. Contract management was rated 42.9% as poor, 42.9% as average and 14.3% as good. This is a

clear indication that there is a lack of skills in managing contracts as 42.9% in poor is very high compared to the 14.3 ranked as good in contract management.

Table 4.18 Contract Management

Ratings	Frequency	Percent
Poor	6	42.9
Average	6	42.9
Good	2	14.3
Total	14	100.0

4.2.3.4.3 Distribution Of Supplies

Respondents were requested to rate distribution of supplies in the Ministry of Health and Social Services. In the table 4.19 below, it can be seen that distribution of supplies was rated as 35.7% for good, 35.7% for average, 14.3% for poor and 14.3% for very poor. Even though 35.7% chose good as their response there is clear evidence that 28.6% of the respondents viewed distribution of supplies as poor to very poor; this is then to say that supplies are either not distributed fairly or not distributed at all.

Table 4.19 Distribution of Supplies

Ratings	Frequency	Percent
Very Poor	2	14.3
Poor	2	14.3
Average	5	35.7
Good	5	35.7
Total	14	100.0

4.2.3.4.4 Management Of Inventory

Table 4.20 shows that the management of inventory was rated as 42.9 % for average, 28.6% for good, 21.4% for poor and 7.1% as very poor, ranging them from the

highest to the lowest percentage. Most of the respondents view management of inventory as an overall average as can be concluded that 28.6% for good and 28.5% for poor to very poor are in the same range making it almost equal.

Table 4.20 Management of Inventory

Ratings	Frequency	Percent
Very Poor	1	7.1
Poor	3	21.4
Average	6	42.9
Good	4	28.6
Total	14	100.0

4.2.3.4.5 Management Of Transport

Table 4.21 below shows how transport of supplies is managed in the ministry of health and social services. Transport of supplies was rated as 35.7 for good, 35.7% for average, 21.4% for poor and 7.1% for excellent. Since 42.8% of respondent rated transport management as good to excellent then it can be concluded that overall transport management in the ministry is satisfactory.

Table 4.21 Transport management

Ratings	Frequency	Percent
Poor	3	21.4
Average	5	35.7
Good	5	35.7
Excellent	1	7.1
Total	14	100.0

4.2.4 Section 4: Performance Management

Performance management focused on the elements of performance, such as team objectives, the success of employees, participation of employees in the processes, low and high performance of employees, existing of personal development plans, reward

system, promotions and monitoring and evaluation in the ministry of Health and Social Services. Respondents were requested to indicate their level of agreement or disagreement with the given statements in performance management.

4.2.4.1 Team Objectives

Table 4.22 shows how respondents reacted to the statement “Team objectives do not exist”. Table 4.22 shows how respondents reacted to the statement of team objectives and this is how it was rated as 42.9 % for average, 28.6% for good, 21.4% for poor and 7.1% as very poor, arranging them from the highest to the lowest percentage. Most of the respondents view management of inventory as an overall average as can be concluded that 28.6% for good and 28.5% for poor to very poor are in the same range making it almost equal.

Table 4.22 Team objectives do not exist

Level of Agreement	Frequency	Percent
	1	7.1
Strongly Disagree	4	28.6
Disagree	2	14.3
Neither Disagree or Agree	2	14.3
Agree	3	21.4
Strongly Agree	2	14.3
Total	14	100.0

4.2.4.2 Successes Recorded

Table 4.22 shows how respondents reacted to the statement “Successes are rarely recorded”. Table 4.22 shows how respondents reacted to the statement of success recording and this is how it was rated with 28.6 % for Agree, 28.6% for Strongly disagree, 21.4% for Disagree and 21.4% for Neither disagree or agree, arranging them from the highest to the lowest percentage. Half of the respondents do not agree with statement that success are rarely recorded, this simply means that the success are partially recorded while the remaining % agree or are being doubtful about it.

Table 4.23 Success is rarely recorded

Level of agreement	Frequency	Percent
Strongly Disagree	4	28.6
Disagree	3	21.4
Neither Disagree or Agree	3	21.4
Agree	4	28.6
Total	14	100.0

4.2.4.3 Participation by Employees Not At Required Level

Respondents were requested to evaluate the participation by the employees in the process is not at the required level in the Ministry of Health and Social Services. The participation by employees not at required level was rated as in descending order 28, 6% for Strongly Disagree, 28, 6% for Neither Disagree or Agree, 28.6% for Agree and 14.3% for Strongly Agree. The results are simply stating that 57.2% do not agree with the statement, and only 42.9% are in agreement that the participation by employees in the process is the required level.

Table 4.24 Participation by employees in the process is not the required level

Level of Agreement	Frequency	Percent
Strongly Disagree	4	28.6
Neither Disagree or Agree	4	28.6
Agree	4	28.6
Strongly Agree	2	14.3
Total	14	100.0

4.2.4.4 Low Performance Is Highlighted But No Development Support Is Defined

Respondents were requested to evaluate whether low performance is recorded but no development support is defined to address it in the Ministry of Health and Social Services. The low performance is highlighted but no development is initiated was rated as in descending order 35, 7% for Agree, 21.4, % for Strongly Agree, 21.4% for Strongly Disagree, 14.3% for Disagree and 7.1% for Neither Disagree or Agree. The results are simply stating that 57.10% agree with the statement, and only 35.7% are not in agreement with the statement.

Table 4.25 Low performance is recorded but no development Support is defined

Level of Agreement	Frequency	Percent
Strongly Disagree	3	21.4
Disagree	2	14.3
Neither Disagree or Agree	1	7.1
Agree	5	35.7
Strongly Agree	3	21.4
Total	14	100.0

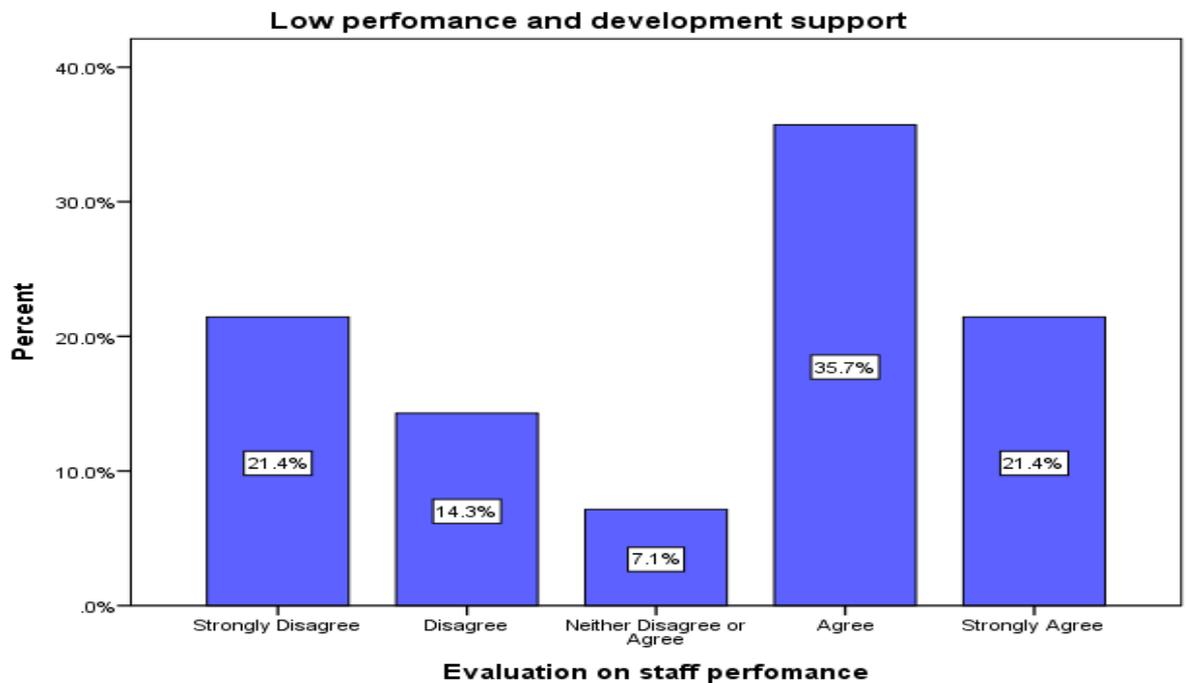


Figure .12 Low performance and development support

4.2.4.5 High Performing Staff Are Not Easily Identified And Rewarded

Respondents were requested to evaluate whether high performing staff are not easily identified and rewarded in the Ministry of Health and Social Services. The statement was rated in descending order as 35, 7% for Agree, 28.6, % for Strongly Agree, 21.4% for Neither Disagree or Agree, 14.3% for Disagree. The results simply state that

64.30% of the respondents agree with the statement, and only 14.3% are not in agreement with the statement.

Table 4.26 High performing staff is not easily identified and rewarded

Level of Agreement	Frequency	Percent
Disagree	2	14.3
Neither Disagree or Agree	3	21.4
Agree	5	35.7
Strongly Agree	4	28.6
Total	14	100.0

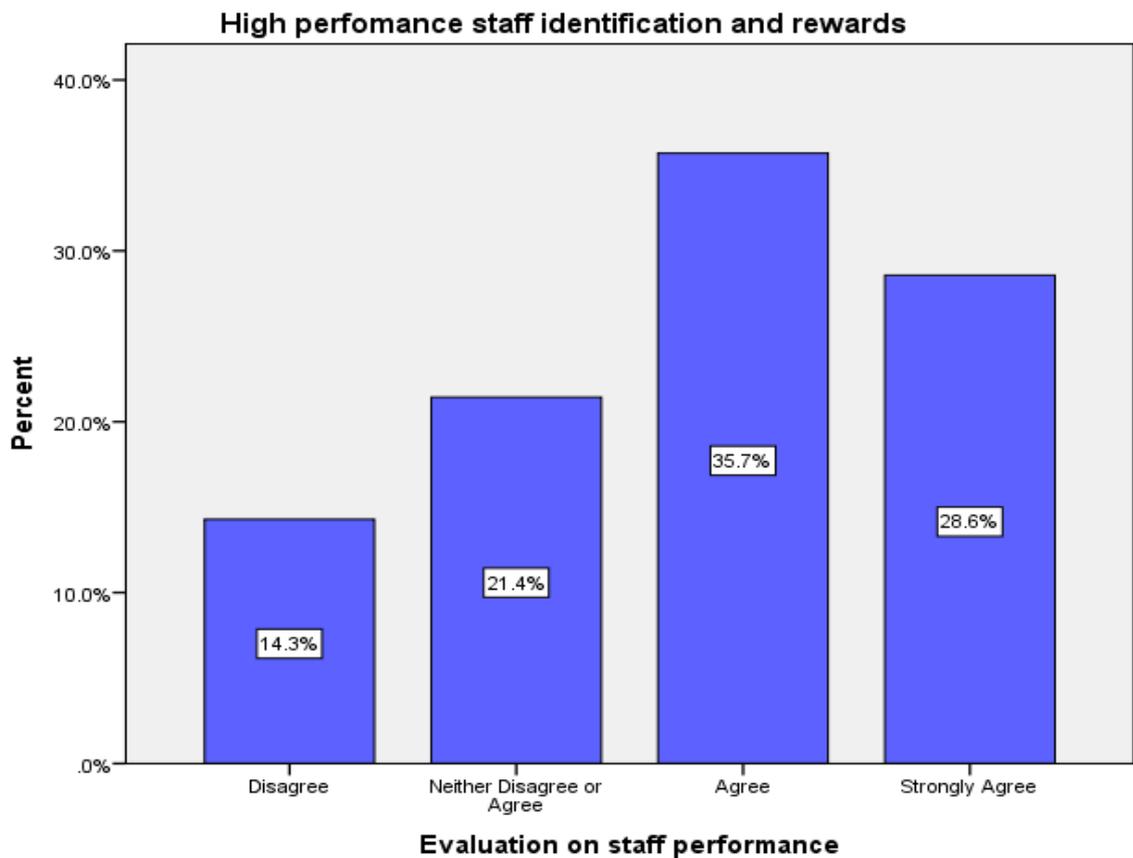


Figure .13 Identifacation and reward of high performance

4.2.4.6 Personal Development Plans Do Not Exist

Respondents were requested to evaluate whether personal development plans do not exist in the Ministry of Health and Social Services. The statement “personal development plans do not exist” was rated in descending order as 28, 6% for Strongly Disagree, 28, 6% for Disagree, 21.4% for Strongly Agree, 14.3% for Agree and 7.2% for Neither Agree or Disagree. According to the results it is evident that more than half of the respondents do not agree with the statement that personal development plans do not exist and only about 30% agree with the statement.

Table 4.27 Personal Development Plans do not exist

Level of Agreement	Frequency	Percent
Strongly Disagree	4	28.6
Disagree	4	28.6
Neither Disagree or Agree	1	7.1
Agree	2	14.3
Strongly Agree	3	21.4
Total	14	100.0

4.2.4.7 The Reward System is not linked to the performance

Respondents were requested to evaluate whether the reward system is linked to the performance in the Ministry of Health and Social Service; It was then rated by the respondents as follows: 50% for Neither Agree nor Disagree, 28, 6% for Agree and 21.4% for Strongly Agree. This simply means that exactly 50% of the respondents do agree and strongly agree that the reward system in the ministry is linked to the performance of staff, however the other half of the respondents are being neutral about the reward system and staff performance linkage.

Table 4.28 The reward system is not linked to the performance

Level of Agreement	Frequency	Percent
Neither Disagree or Agree	7	50.0
Agree	4	28.6
Strongly Agree	3	21.4
Total	14	100.0

4.2.4.8 Promotion Is Not Linked To The Performance

Respondents were requested to evaluate if promotion is linked to the performance in the Ministry of Health and Social Service and the results are presented and explained below. Those that neither agree or disagree made up 35.7%, followed by those ones that agreed constituting about 28.6%, those that Strongly agreed made up 21.4% finally those that strongly disagreed made up a mere 14.3%. It can be seen that at least 50% of the respondent think that promotion is not linked to performance at all in the ministry. 35.7% neither agreed nor disagreed with the statement and the remaining percentage thinks that people are promoted because of their performance.

Table 4.29 Promotion is not linked to the performance

Level of Agreement	Frequency	Percent
Strongly Disagree	2	14.3
Neither Disagree or Agree	5	35.7
Agree	4	28.6
Strongly Agree	3	21.4
Total	14	100.0

4.2.4.9 Monitoring And Evaluation Do Not Exist

Respondents were requested to evaluate on a scale of one to five whether monitoring and evaluation does not exist in the Ministry of Health and Social Services. The statement “monitoring and evaluation do not exist” was rated in descending order as 35.7% for neither Neither Disagree nor Agree, 21.4% for Agree, 21.4% for Disagree and 21.4% for Strongly Disagree. Monitoring and evaluation do in fact exist as only 21.4% agree with the statement that M&E does not exist and the majority of the respondents says that it does exist, however 35.7% are being neutral regarding the monitoring and evaluation process in the ministry.

Table 4.30 Monitoring and evaluation do not exist

Level of Agreement	Frequency	Percent
Strongly Disagree	3	21.4
Disagree	3	21.4
Neither Disagree or Agree	5	35.7
Agree	3	21.4
Total	14	100.0

4.2.5 Section 5: MOTIVATION

Motivation focused on the elements such as Employees not being motivated by the work they do. The reward system, leadership style, and the organisational culture does not motivate employees and lastly the workload did not motivate employees.

4.2.5.1 Employees Not Motivated By The Work They Do

Table 4.31 shows how respondents reacted to the statement “employees are not motivated by the work they do” and this is how it was rated as 42.9 % for Disagree, 28.6% for Agree, 21.4% for Neither Disagree or Agree and 7.1% for Strongly Agree, arranging them from the highest to the lowest percentage. Some of the respondents disagreed with the statement that employees are motivated by the work they do. It can also be concluded that 35.7% Agree to strongly agree while the remaining percentage are impartial about it.

Table 4.31 Employees are not motivated by the work

Level of Agreement	Frequency	Percent
Disagree	6	42.9
Neither Disagree or Agree	3	21.4
Agree	4	28.6
Strongly Agree	1	7.1
Total	14	100.0

4.2.5.2 The Reward System Does Not Motivate Employees

Table 4.32 shows how respondents reacted to the statement “the reward system does not motivate employees” it was rated as 35.7 % for Disagree, 28.6% for Agree, 21.4% for Neither Disagree or Agree and 14.3% for Strongly Agree, ranging them from the highest to the lowest percentage. Even if 21.4% of the respondents didn’t agree or disagree with the statement, 42.9% do agree that the employees are not motivated by the reward system in the ministry, however 35.7% do not agree and actually think that somehow the employees are motivated to work hard or put in more effort by the ministry’s reward system.

Table 4.32 The reward system does not motivate employees

Level of Agreement	Frequency	Percent
Disagree	5	35.7
Neither Disagree or Agree	3	21.4
Agree	4	28.6
Strongly Agree	2	14.3
Total	14	100.0

4.2.5.3 Leadership Style In MOHSS Do Not Motivate The Employees

Respondents were requested on a scale of five to evaluate whether leadership style in MoHSS motivates the employees. The statement “leadership style in MoHSS do not motivate the employees” was rated in descending order as 35.7% for Neither Disagree nor Agree, 35.7% for Agree, 14.3% for Strongly Agree, and 7.1% for Disagree and Strongly Disagree respectively. The majority of the respondents do agree that the ministry’s leadership style does not motivate the employees while the 35.7% are being sceptical about it as they are neither agree nor disagree.

Table 4.33 Leadership style in MoHSS does not motivate the employees

Level of Agreement	Frequency	Percent
Strongly Disagree	1	7.1
Disagree	1	7.1
Neither Disagree or Agree	5	35.7
Agree	5	35.7
Strongly Agree	2	14.3
Total	14	100.0

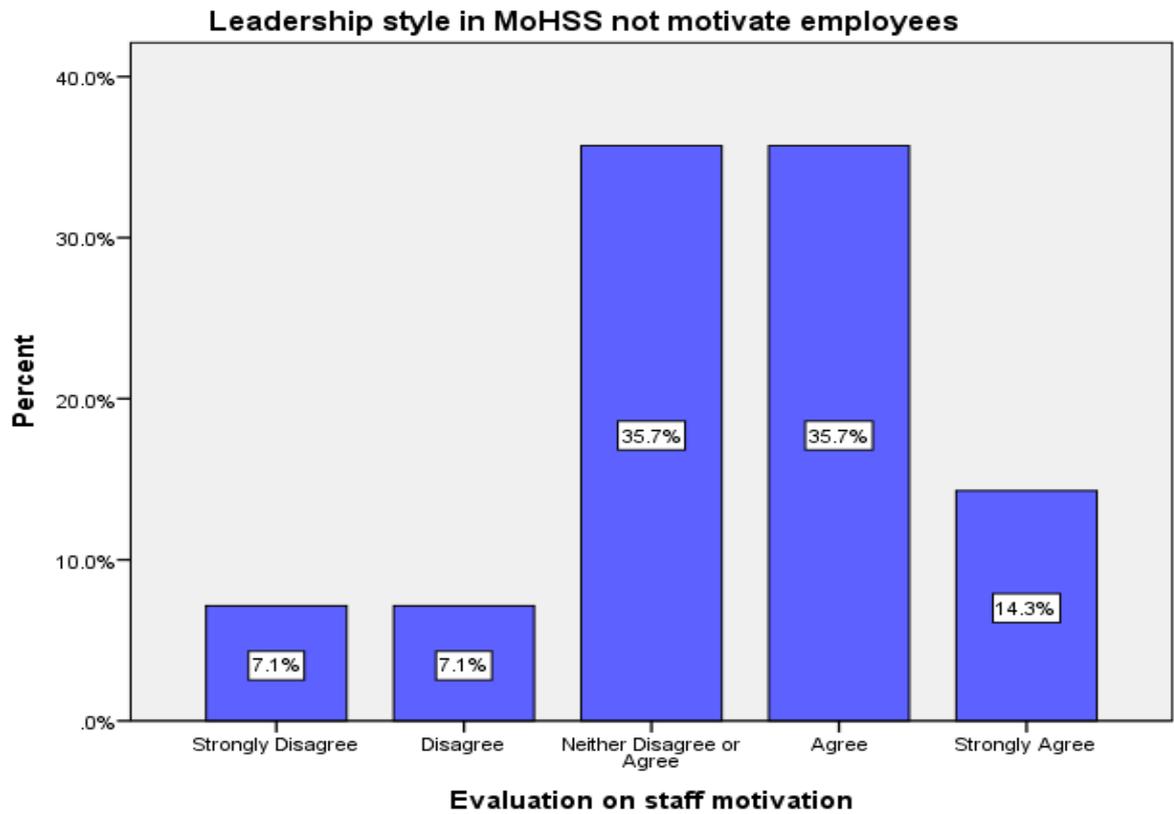


Figure 14. Leadership style in MoHSS does not motivate the employees

4.2.5.4 Organisational Culture Does Not Motivate Employees

Respondents were requested to evaluate if employees are motivated by the organisational culture in the Ministry of Health and Social Service and the results are presented and explained below. Those that Agree make up 50%, followed by those ones that neither disagree or agree constituting 21.4% of those that Disagree finally those that strongly agree make up a mere 7.1%. It can be seen that more than half of the respondents do agree that the employees are not motivated by the ministerial organisational culture.

Table 4. 34 Organisational culture does not motivate employees

Level of Agreement	Frequency	Percent
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Disagree	3	21.4
Neither Disagree or Agree	3	21.4
Agree	7	50.0
Strongly Agree	1	7.1
Total	14	100.0

Figure 15. Organisational culture does not motivate employees



4.2.5.5 Organisational Structure Does Not Motivate Employees

Table 4.35 shows how respondents reacted to the statement “Organisational structure in MoHSS does not motivate the employees” it was then rated as it’s presented in the table below. Even if 35.7% of the respondents agree with the statement, still 42.9% disagree that the employees are not motivated by the organisational structure ministry. However, 21.4% remained neutral.

Table 4.35 Organisational structure in MoHSS does not motivate the employees

Level of Agreement	Frequency	Percent
Disagree	6	42.9
Neither Disagree or Agree	3	21.4
Agree	4	28.6
Strongly Agree	1	7.1
Total	14	100.0

4.2.5.6 The Workload Does Not Motivate Employees

Table 4.36 shows how respondents reacted to the statement “The workload does not motivate the employees” it was then rated as it’s presented in the table below. 57.2% agree with the statement, confirming that the amount of work that the employees do, does not in any way motivate them. Moreover, 28.6% totally disagree and thinks that the employees are motivated by the workload that they do, however the remaining 14.3% neither disagree nor agree.

Table 4.36 The workload does not motivate employees

Level of Agreement	Frequency	Percent
Disagree	4	28.6
Neither Disagree or Agree	2	14.3
Agree	4	28.6
Strongly Agree	4	28.6
Total	14	100.0

4.2.6 Section 6: Evaluation of quality of service delivery

Quality of service delivery focused on the elements of service delivery, such as Access of overall services, Responsiveness to client needs, Communication style and information provision, Competence in overall service delivery, Humaneness in dealing with clients, Empowerment of staff development, Reliability of overall service delivery, Equity in service delivery, Conditions of physical facilities and Conditions and functional equipment in the ministry of Health and Social Services. Respondents were requested to

indicate their level of agreement or disagreement with the given statements in quality of service delivery.

4.2.6.1 Access To Overall Services

Respondents reacted to the statement “Access of overall services,” it was then rated as it’s presented in the table below. The results show that 57.1% of the respondents rated the access to the overall services as good to excellent, 28.6% rated it as average, while the remaining 14.2% rated it as poor to very poor. This can simply be translated that in the ministry of health and social services overall services are very accessible.

Table 4.37 Access to overall services

Ratings	Frequency	Percent
Very Poor	1	7.1
Poor	1	7.1
Average	4	28.6
Good	7	50.0
Excellent	1	7.1
Total	14	100.0

4.2.6.2 Responsiveness To Client Needs

Table 4.38 shows that responsiveness to client needs was rated as 57.1% for good, 35.7% for Average and 7.1% as Excellent, ranging them from the highest to the lowest percentage. Most of the respondents rated the ministry’s responsiveness to client’s needs good to excellent as it's represented by 64.2%, while the remaining percentage rated it as average. Additionally, none of the respondents rated it as poor or very poor.

Table 4.38 Responsiveness to client need

Ratings	Frequency	Percent
Average	5	35.7
Good	8	57.1
Excellent	1	7.1
Total	14	100.0

4.2.6.3 Communication Style And Information Provision

Respondents were requested to rate communication style and information provision in the Ministry of Health and Social Services. In Table 4.39 below, it can be seen that communication style and information provision was rated as 57.1% for good, 21.4% for average and 21.4% for poor. From the results it can be concluded that more than half of the respondents said that the communication style and information provision in the ministry is good, there are however those that rated it as average, the same number as those that rated it as poor with 21.4% respectively.

Table 4.39 Communication style and information provision

Ratings	Frequency	Percent
Poor	3	21.4
Average	3	21.4
Good	8	57.1
Total	14	100.0

4.2.6.4 Competence In Overall Service Delivery

The following table 4.40 shows that competence in the overall service delivery was rated as 57.1% for good, 35.7% for Average and 7.1% as Poor, ranging them from the highest to the lowest percentage. Most of the respondents rated the ministry’s competence in the overall service delivery as good. Although 7.1% rated it as poor is low compared to those that rated it good and to the ones that opted to be neutral.

Table 4.40 Competence in overall service delivery

Ratings	Frequency	Percent
Poor	1	7.1
Average	5	35.7
Good	8	57.1
Total	14	100.0

4.2.6.5 Humaneness In Dealing With Clients

Respondents reacted to the statement “Humaneness in dealing with clients,” it was then rated as it’s presented in the table below. 50% of the respondents rated the humaneness in dealing with the client as poor, 28.6% rated it as average and only 21.4% rated it as good. This is then a clear indication that customer service in the ministry is a major problem as it is evidently represented by half of the respondents. Those that opted to remain neutral are just as high as compared to the 21.4% that rated the customer service as good.

Table 4.41 Humaneness in dealing with clients

Ratings	Frequency	Percent
Poor	7	50.0
Average	4	28.6
Good	3	21.4
Total	14	100.0

4.2.6.6 Empowerment Of Staff Development

Respondents were requested to rate empowerment of staff development in the Ministry of Health and Social Services. It can thus be seen in the table below that empowerment of staff development was rated as 42.9% for good, 35.7% for poor and 21.4% for average. From the results it can be concluded that just as there is a high respondent rate of 42.9% in those that rated the statement “empowerment of staff development” as good there are just as high as those who rated it poor and this can be said that overall the respondents would then rate this as average.

Table 4.42 Empowerment of staff development

Ratings	Frequency	Percent
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Poor	5	35.7
Average	3	21.4
Good	6	42.9
Total	14	100.0

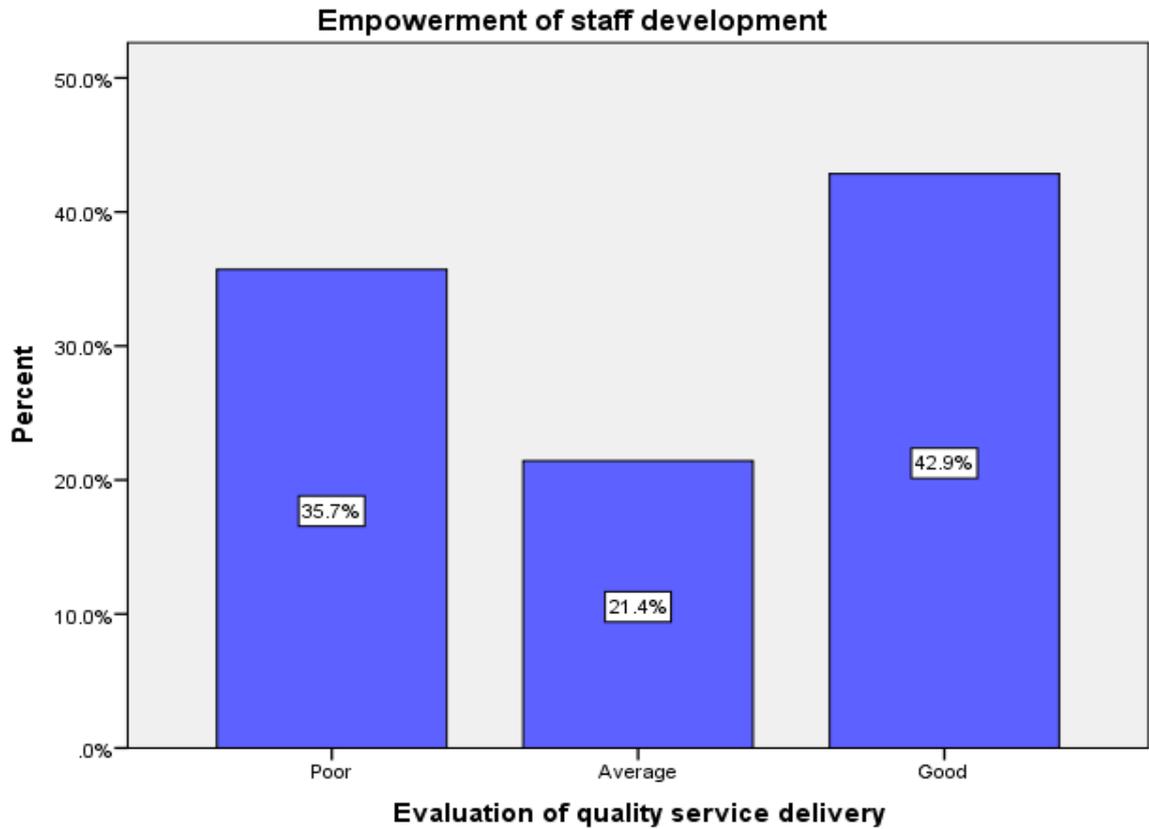


Figure .16 Empowerment of staff development

4.2.6.7 Reliability Of Overall Service Delivery

Table 4.43 shows that competence in the overall service delivery was rated as 57.1% for good, 35.7% for Average and 7.1% as Poor, ranging them from the highest to the lowest percentage. Most of the respondents rated the ministry’s reliability of service delivery as good, meaning that the level of reliability in the ministry of health and social services is good, although 7.1% rated it as poor is low compared to those that rated it good and to the ones that opted to be neutral.

Table 4.43 Reliability of overall service delivery

Ratings	Frequency	Percent
Poor	1	7.1
Average	5	35.7
Good	8	57.1
Total	14	100.0

4.2.6.8 Equity Of Overall Service Delivery

Respondents reacted to the statement “equity of overall service delivery,” it was then rated as it’s presented in the table below. The results show that 50% of the respondents rated equity of overall service delivery as good, 42.9% rated it as average and only 7.1% rated it as poor. This simply means that since the majority of the respondents gave their responses as average and good. This is good, as it means that there is indeed fairness in the ministry when it comes to service delivery.

Table 4.44 Equity of overall service delivery

Ratings	Frequency	Percent
Very Poor	1	7.1
Average	6	42.9
Good	7	50.0
Total	14	100.0

4.2.6.9 Condition Of Physical Facilities

Respondents were requested to rate the condition of physical facilities in the Ministry of Health and Social Services. It can thus be seen in the table below that those that rated the conditions as average makes up 42.9%, while those that rated it good and

poor have the same 28.6% respectively. From the results it can be concluded that just as there is a high respondent rate in those that rated the condition of physical facilities in the ministry as good there are just as high as those who rated it poor, causing it to be rated average and that is how the high percentage of respondents chose to rate it as average.

Table 4.45 Conditions of physical facilities

Ratings	Frequency	Percent
Poor	4	28.6
Average	6	42.9
Good	4	28.6
Total	14	100.0

4.2.6.10 Condition And Function Of Equipment

Table 4.46 shows that the conditions and functions of Equipments was rated as 50% for good, 35.7% for Average and 14.2% as Poor, arranging them from the highest to the lowest percentage. While there are respondents that rated the conditions and function of equipment as poor, there is a high percentage of those that rated it average and a few that rated it as good. They are leaning more from average to good and hence the condition and function of the equipment average to good.

Table 4.46 Condition and function of equipment

Ratings	Frequency	Percent
Poor	2	14.3
Average	5	35.7
Good	7	50.0
Total	14	100.0

Chapter 5: Discussions

5.1 Introduction

The respondents provided valuable information on factors affecting staff performance and motivation in the Ministry of Health and Social Services. The data were obtained through the structured questionnaires. The discussion of the information below is focused on the respondents' reactions to questions about sections of the questionnaire.

5.2 Section1: Personal information

The majority of the respondents were male employees with 57.1% and the females were represented by 42.9%. This implies that the majority of people employed in Senior and Middle management are male. Nurses dominated the positions at Senior and Middle management with 50%, while the administration and finance or accounting was represented by 28.6% and 14.3% respectively. This implies the majority who occupies Senior and Middle management are not trained in Business, Public Management or Financial Management. As a result, it can be concluded that nurses have not received advanced training in the areas of Management. Even though the Degrees dominated the areas of Qualifications, 42, 9% of these qualifications are in nursing management. It can be concluded that nurses occupy most of the Senior and Middle Management positions in the Ministry of Health and Social Services. There is a general lack of skills in the areas of Business Management, Financial Management, Human Resource management and Public Management. This can be translated into lack of skills in understanding budgeting and budget control issues, contract management and other resource managements. Nursing should be viewed as Primary and Core activity of the Ministry of Health and Social

Services, while the Ministry also needs well trained human resources in different fields of studies to drive support activities. If secondary activities are not properly looked after by well trained staff, there is a possibility of low planning which may lead to low service delivery. When wrong people are appointed in the organisation, the performance of the organisation can be deteriorated stated (Doherty & Horne, 2004).

5.3 Section2: Skills and Experience

The majority of respondents have between 5-15 years of work experience as reflected by 50% of respondents. Work experience is very vital for high performance and effective service delivery. The majority of respondents occupies middle management positions are nurses as revealed by 85,7%. Only 14.3 % of the respondents occupy Senior Positions are from other fields of studies. Since the majority of respondents who occupy middle management positions are from the nursing profession, there is a possibility that the work experience gained by the majority is on nursing services rather than on resources management. Effective resource management is very important for efficient service delivery. The received data indicate that there are no positions of Deputy Directors at regional level of the Ministry of Health and Social Services. This implies that the Director at regional level is the immediate supervisor of many staff members of middle level management. On one hand, this situation puts more supervision workload on the Director to supervise many staff members at middle management level and on the other hand there is limited opportunity for career advancement. This implies that some staff members are not motivated to advance their careers. Demotivated employees cannot perform to their best level of abilities and therefore can affect proper service delivery. (Gibson, Ivanceich & Donnelly,1996) argue that motivation is considered as the main

determinant for increased performance. Therefore, the more employees are motivated, the higher the productivity of an organisation.

5.4 Section 3: Governance and management

Vision, Mission and Goals are clearly set in the strategic plan of the ministry as reflected 71.40% of respondents. The vision, mission and goals serve as a road map of the organisation. The objectives of individual employees are aligned with the overall goals of the organisation and leads to organisational high performance.

The organisational structure of the ministry is the area of concern as indicated by the high number of respondents. Organisational structure was rated 50% for average, 28% for poor, 14,3% for very poor and only 14.3% for excellent. Well designed organisational structure can accommodate a sufficient number of positions required by organisation to properly deliver the service. If the organisational structure is not properly designed, it creates few positions that can lead to high workload and eventual demotivated the employees.

Respondents rated Leadership style of the Ministry of Health and Social Services at 57,1% for average and 21.4% in poor. This implies that the leadership style in the Ministry is not good for high performance. Leadership style is very vital for high performance, but defective leadership style can demotivate employees and decrease performance. Staff adequacy is a challenge in the Ministry as indicated in combination of responses, that is, 71.5% of average and poor. This implies that there is a need to improve the staff adequacy in the ministry. When employees are overloaded with work, motivation is diminished and productivity declines argued (Atchison, 2003).

Atchison (2003) further stated that low staff adequacy can lead to high workload that can result in work stress, burnout and depression. Work stress, burnout and depression decrease the level of employees' performance and affect service delivery.

Respondents revealed that there is a mismatch of the right skills with positions. This was reflected earlier that the majority of respondents who occupy administrative middle management positions are nurses. Only 14.3% of respondents rated right skills at right positions as good. If people with the right skills are not employed in the right positions, then it can be concluded that skills are not used to the best advantage of the Ministry. The respondents revealed that the Ministry has good policies, but there are shortages of skills for budget control and contract management. Poor budget control can lead to overspending or underspending of financial resources. Lack of skills of contract management can delay the timely acquisitions of supplies, services and equipment. The Ministry has an efficient system of distribution of supplies, inventory management and transport management as reflected by the majority of respondents. According to WHO (2001) core inputs that are very much necessary for health service delivery include financial resources, competent health care workers, adequate physical facilities and functional equipment, essential medicines and supplies, current guidelines and operating policies

5.5 Section 4: Performance Management

It is encouraging that team objectives exist in the Ministry of Health and Social Services as reflected by the majority of the respondents. Team objectives, increase common understanding of organisational goal and its achievement. Successes are not properly documented in the Ministry as reflected by the respondents. Recording of

successes of employees is very important for identification of staff for promotion. The high number of respondents indicated that employees do not fully participate in the planning processes. Employee's participation in the processes enhances process ownership by employees and increase high performance in the organisation. Lower performance is noted in the Ministry of Health and Social Services as was confirmed by 57.10% of the respondents. Furthermore, performance management does not put in place development support to improve the situation. Low performance leads to poor service delivery.

High performing staff members are not easily identified and rewarded in the Ministry as confirmed by 64.30% of the respondents. If the organisation does not recognise high performing staff members, they can be demotivated and resort to low performance. Individual low performance can affect service delivery in the organisation. The reward system in the Ministry of Health and Social Services is not linked to the performance as revealed by 50% of the respondents. There was no respondent who supported that the reward system is linked to the performance. The well designed reward system encourages employees to fully perform at the best level of their abilities. The high performance of individual employees enhances service delivery by the organisation.

Staff promotions in the Ministry of Health and Social Services are not linked to the high performance. This was confirmed by 50% of the respondents. If promotions are not linked to high performance, low performing staff can be promoted and low performance can be sustained. Sustained low performance may lead to deteriorating service delivery. Monitoring and Evaluation of activities, programs and projects is very important for any organisation. Monitoring and Evaluation exist in the Ministry but not

all supervisors understand this system as revealed by 42.80%. Therefore the Ministry needs to ensure that all supervisors have an understanding the operation of monitoring and evaluation system. Monitoring implies consistently measuring performance and consistently providing feedback to employees and work groups on their progress toward reaching the right goals according to (Hakala,2008).

5.6 Section 5: Motivation

The majority of the respondents are motivated by the work they do. Nonetheless there is a significant number of employees that are not motivated by the work as reflected by 35.7% of the respondents. According to Re'em (2011) job performance is typically viewed as particularly determined by the motivation of the employee to work hard. Individual motivation can contribute to the high performance of the organisation. And individual performance is vital for service delivery.

Reward System of the MoHSS does not motivate employees as indicated by 42.9% of the respondents as oppose to 35.7%. The remaining percentages of respondents indicate that they are not clear whether the reward system motivates them or not. If employees are not motivated by the reward system, they can be motivated to leave the organisation. A well designed reward system serves as a retention strategy for high performing staff members.

The majority of respondents are not impressed and motivated by Leadership Style in the MoHSS as indicated by 50% of the respondents. Only 14.20% of the respondents are impressed by the existing leadership style in the MoHSS. Leadership style is a vital ingredient of high performance of the organisation. Managers with good leadership style motivate their subordinates to perform beyond their abilities. The organisational culture

in the MoHSS does not motivate employees as confirmed by 57.1% of the respondents. Organisational culture allows and motivates employees to share high performance values. Organisational culture increases staff motivation in the organisation leads to improved service delivery.

The majority of the respondents has confirmed that the organisational structure of the MoHSS motivates them to perform. Yet, there is a significant number of respondents represented by 35.7% who felt that they are not being motivated by the organisational structure of the MoHSS. The organisational structure does not make provisions of the positions of Deputy Directors at Regional level. This situation can impose a high level of supervision on the Directors to supervise a large number of subordinates at middle level management. A well designed organisational structure allows for smooth flow of information and instructions between supervisors and subordinates. Instant feedback to employees motivates employees to adjust their performances.

The workload in the MoHSS does not motivate employees as revealed by 57.2% of the respondents. High workload if not properly managed, can be stressful and leads to high incidence of absenteeism of employees. Absenteeism leads to low performance and affects service delivery. Lack of motivation can cause a high staff turnover, absenteeism, low service and high operating costs stated (Atchison,2003).

5.7 Section 6: Evaluation Of Quality Of Service Delivery

The respondents gave a good picture of the MoHSS in terms of Accessibility of services by clients, Responsiveness to client needs and Communication style and information system competency. This can be attributed to the high number of degree holders that dominated information in the area of Qualifications. Nevertheless, dealing

with clients is poor in the Ministry as reflected by 50% of respondents. This situation can be translated into poor customer services. Many customers link poor customer service to poor performance.

Empowerment of Staff Development exists in the MoHSS. It can be translated that the Ministry allows employees to pursue a different field of studies of their choice and at their own costs. Reliability of service delivery was rated good by the majority of the respondents. Equity of service delivery was rated good by the majority of the respondents. The main contributing factors uniform provision of Primary Health Care (PHC) services in the all regions of the country. The majority of the respondents indicated that the condition of physical facilities is good. This can be attributed to the ongoing constructions of new clinics and improvements to the existing facilities to accommodate the provision of new services. Further investigation reveals that the condition of equipment in the Ministry is in the satisfactory state. According to WHO (2001) various factors can reduce service delivery access, including the presence of geographical and transport barriers, lack of financial resources and lack of cultural appropriateness. Good condition of the physical facilities and equipment creates good atmosphere for high performance.

5.8 Conclusion

Different factors that can affect performance and motivation of employees in the Ministry of Health and Social Services were discussed. Identified factors affecting performance and motivation of employees in the MoHSS include Organisational Culture, Leadership Style, Staff adequacy, Reward System, Mismatch of qualifications and positions, Poor Budget Control, Lack of Skills in Contract Management.

the study was to identify some of the international best practices in the performance management and motivation of employees of organizations. The best practices in the performance management and motivation of employees of organizations were identified and discussed under literature review.

The main objective of the study was to identify factors affecting performance and motivation of employees in the Ministry of Health and Social Services in Namibia. The factors identified include organizational structure, staff adequacy, low performance, lack of recognizing high performing staff, reward system, promotions system, leadership style, organisational culture, workload and customer service. A detailed discussion of these factors is described below in order to satisfy objective two of this study.

6.2.1 Organisational Structure

Some of the respondents are not satisfied with the organisational structure of the Ministry of Health and Social Services. Although the organisational structure was rated as 50, % Average, it was rated 28, % Poor and 7,1% Very Poor (Table 4.3). Organisational structure should be designed in such a way to encourage the willing participation of its members and effective organisational performance argues (Kalyani, 2006).

6.2.2 Staff adequacy

Only 14.3% of the respondents indicate that staffing adequacy in the Ministry of Health and Social Services is good. The evidence from the study indicates that 42.9% (Table 4.8) of the respondents rated staff adequacy as poor. Assumptions therefore can be made that staff adequacy affects performance of employees and contributes to low service delivery. When employees are overloaded with work, motivation is diminished and productivity declines argued (Atchison, 2003).

6.2.3 Low performance

The majority of the respondents were not satisfied with the way low performance is handled in the Ministry. Low performance is noted in the Ministry but there is a challenge with the development support as reflected by 57.10% (Table 4.25) of the respondents. Respondents indicated that there is no development support defined to address low performance. Low performance can directly impact on low service delivery. Allowing poor performance to continue unchecked may result in the departure of these high performers who get impatient with the lack poor performance management stated (Saravanja,2010)

6.2.4 Recognizing high performing staff

High performing employees are not recognized and rewarded as indicated by 64.3% (Table 4.26) of the respondents. There are no incentives to reward top performers. It can be concluded that the reward system of the Ministry is a challenge and the Ministry needs to address it. Hakala (2008) argued that in an effective organisation, the rewards are properly set to reward top performers. Silberman (2003) noted that an effective performance management program can increase productivity and morale in the organization and help to retain valued high performers.

6.2.5 The Reward System

The reward system in the Ministry is a challenge that can affect individual performance. The reward system is not linked to the performance as reflected by 50% (Table 4.28) of the respondents. Armstrong (2004) argues that a good reward system

considers both financial and non-financial rewards that managers can employ to reward to good performance .

6.2.6 Promotions system

The majority of respondents are not satisfied with the promotion system in the Ministry. Promotion is not linked to the performance as indicated by 50% (Table 4.29) of respondents. Therefore it can be concluded that even low performing employees can secure opportunities for promotions. Barney (1991) argued that one of the key functions of the promotions system is to select those individuals that can make greatest contributions to the organisational performance.

6.2.7 Leadership Style

The majority of the respondents are not motivated by the leadership style in MoHSS. This was proved by 50% (Table 4.33) of the respondents. Furthermore 35.7% of the respondents fall in the category of neither agree or disagree. Therefore it can be concluded that leadership style of the Ministry is a challenge and contributes to low service delivery. Leadership is particularly crucial in influencing staff performance, which eventually leads to effective service delivery in the organisation, (Sanger,2008).

6.2.8 Organisational culture

The employees are not motivated by the organisational culture of the Ministry of Health and Social Service as supported by evidence of 57.1% (Table 4.34) of respondents. It is clear that organisational culture in the Ministry is a challenge and it needs to be properly addressed. Kalyani (2006) stated that organisational culture impacts significantly on an organisation, its employees' behaviours and motivation. Motivated employees can increase organisational performance.

6.2.9 Workload

The employees of the Ministry are not motivated by workload. This is supported by 57.2% (Table 4.35) of the respondents. It can be concluded that workload in the Ministry is a challenge that affect the performance of employees and contributes to low service delivery by the Ministry.

When employees are overloaded with work, motivation is diminished and productivity declines argued (Atchison,2003).

6.2.10 Customer service

Customer service is a challenge in the Ministry of Health and Social Services. Dealing with customers is poor as indicated by 50% (Table 4.41) of respondents. Agbor (2011) argues that Customer satisfaction is based on the level of service quality that is provided by the organisation.

6.3 Recommendations

This part seeks to address factors identified in this study. The suggestions made here aim to improve service delivery in the Ministry of Health and Social Services in Namibia

6.3.1 Organisational Structure

The study recommends the Ministry to put in place the organisational structure that can enhance proper demarcation of area of responsibilities, accommodates sufficient number of posts and strength communication channels. Organisational structure encourages the willing participation of its members and effective organisational performance

6.2.2 Staff adequacy

When employees are overloaded with work, motivation is diminished and productivity declined. Therefore this study recommends the Ministry to develop and implement strategies that can strengthen staff motivation. Staff adequacy is crucial for organisational performance.

6.2.3 Low performance

The Ministry of Health and Social Services needs to consider the implementation of monitoring and evaluation of programmes, projects and activities to improve service delivery. Low performance should be immediately identified, noted and addressed

6.2.4 Recognizing of high performing staff.

The study recommends that the Ministry design and implement a system that can recognise and reward high performing employees. In an effective organisation, the rewards are properly designed to reward top performers to increase their level of performances. High level of performance contributes to the improved service delivery.

6.2.5 The Reward System

The study recommends the Ministry to design and implement the reward system that can sustain performance. A good reward system considers both financial and non-financial rewards that managers can employ to reward good performance .

6.2.6 Promotions system

The study recommends the Ministry to develop and implement intervention strategy that will link promotions to the performance. The promotions system should select those individuals that can make greatest contributions to the organisational performance.

6.2.7 Leadership Style

The study recommends the Ministry to develop and execute strategy that will improve leadership style. Leadership is particularly crucial in influencing staff performance, which eventually leads to effective service delivery in the Ministry.

6.2.8 Organisational culture

The study recommends the Ministry to develop strategies to strengthen organisational culture.

Organisational culture impacts significantly on an organisation, its employees' behaviours and motivation. Therefore improvement in organisational culture will contribute to individual performance and raised the level of service delivery in the Ministry.

6.2.9 Workload

When employees are overloaded with work, motivation is diminished and productivity declines. Therefore the study recommends the Ministry to develop strategies to reduce workload on the employees. One way to reduce workload is to revisit and change the organisational structure to accommodate sufficient number of posts. The other possible solution is to develop retention strategy.

6.2.10 Customer service

The study recommends the Ministry develop and implement strategies that can improve customer satisfaction. Customer satisfaction will enhance the image of the Ministry and will restore public trust on service delivery of the Ministry.

6.4 Limitations of the study

The process of collecting questionnaires posed challenges as some of the respondents failed to return the questionnaires on the agreed time. The researcher spent a lot of valuable time on requesting the respondents to return the questionnaires.

6.5 Further Researches

This study focused on the employees on the middle management of the Ministry and did not cover the opinions of the employees at operational level. The employees at operational level deal with customers on daily basis and may have different performance and motivational challenges that affecting service delivery in the Ministry. Therefore further researches can focus on employees of the Ministry at operational level. Furthermore this study focused only on few regions namely Kunene, Ohangwena, Oshana, Omusati and national level. Wider further researches can be conducted in the rest of the regions. A customers satisfaction survey can also be conducted to determine the quality of health service delivery in the country.

6.6 Contributions to the knowledge developed

It is my hope and trust that this study will help the Ministry of Health and Social Services to improve its service delivery. Improved service delivery by the Ministry of Health and Social Services will restore its public trust and boost public confidence.

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APPENDIX A

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08 August 2013

Dear Sir/ Madam

Questionnaire: Research on Performance and motivational challenges of staff that affect service delivery in the Ministry of Health and Social Services. My name is **Isak Hamwaanyena** and I am conducting **mini** research on performance management with Polytechnic of Namibia as part of my study on the Masters of International Business (MIB) Programme.

The purpose the study is to identify staff performance and motivational challenges that affect effective service delivery in the Ministry of Health and Social Services. The aim is to develop potential solutions to the identified challenges. This study focuses on the senior and middle management officials, both at national and regional levels

I have identified you as one of the experts and your experience and opinion would greatly benefit the results of this study. I trust and hope that you will be able to find almost 20 minutes in your time schedule to complete the attached questionnaire. Your anonymity and that of your colleagues will be respected and the information from the interview will be treated with confidentiality. I would appreciate if you return the questionnaire at your earliest convenience by emailing to ihamwaanyena@mgecw.gov.na

Your assistance and cooperation will be much valued.

Best Regards

Isak Hamwaanyena

APPENDIX B

Questionnaire

This questionnaire seeks to identify staff performance and motivational challenges that affect service delivery in the Ministry of Health and Social Services in Namibia. The questionnaire is divided into six (6) sections and you are kindly requested to complete all questions in each section.

SECTION 1: Personal information

This section of the questionnaire refers to Personal information. The information will allow the researcher to compare groups of respondents. Please provide answers to the following questions. Read all answers first before you embark upon choosing the appropriate box and circling the selected number.

1. Please tell us your age category

24 -30 years	1
31- 40 years	2
41- 50 years	3
51-60 years	4
61 years and above	5

2. Please tell us your gender.

Female	1
Male	2

3. Please tell us your profession.

Doctor	1
Nurse	2
Pharmacist	3
Social Worker	4
Administrator	5
Accountant	6
Human Resource Practitioner	7
Economist	8
Development Planner	9

Others(write it)	10
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4. Please tell us your highest Qualification.

PhD	1
Master	2
Degree	3
Post Graduate Diploma	4
Diploma	5
Grade 12	6

5. Please tell us your qualification in other fields of Management.

Business Management	1
Public Management	2
Economics	3
Human Resource Management	4
Accounting and Financial Management	5
Information Technology	6
Others(Write it)	7

Section 2: Skills and Experiences

This section of the questionnaire aims to gather information on the level of competencies in terms of skills, experiences and capabilities of those in the positions of managing performance in the Ministry. Please answer the following questions by crossing x on the relevant block

0-4 years	1
5- 15 years	2
16-25 years	3
26- 35 years	4
36- 45 Years	5
46-60 years	6
60- years and above	7

2.1 Please tell us your current position.

Permanent Secretary	1
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Deputy Permanent Secretary	2
Under Secretary	3
Director	4
Deputy Director	5
Head of Subdivision / Middle Management	6

Section 3: Governance and Management.

Indicate against each statement your evaluation on Governance and Management in the MoHSS by placing an appropriate tick against the number that reflects your understanding as shown in the key below.

Please indicate your answer using 1-5 scale

Number	Description
1	Very poor
2	Poor
3	Average
4	Good
5	Excellent

No	3.1 Governance and Management	1	2	3	4	5
1	Vision, Mission and Goals					
2	Strategic Planning					
3	Organizational Structure					
4	Leadership Roles and Responsibilities					
5	Policies and Procedures					
6	Capabilities (Knowledge and Skills)					
7	Information Systems					
	3.2 Human Resources					
1	1. Staffing (adequacy)					
2	2. Advocacy Skills development					
3	3.Right skills at right positions					
4	4. Human Resources Policies and Procedures					

	3.3 Financial Resources					
1	Resource Mobilization					
2	Budgeting					
3	Budget Control					
4	Control of Expenditure					
5	Payment of Creditors					
	3. 4Procurement and Supplies					
1	Sourcing of supplies					
2	Contract Management					
3	Distribution of supplies					
4	Management of Inventory					
5	Management of Transport					

Section 4: Performance Management

1. Please indicate your evaluation on Staff Performance in the MoHSS by ticking the appropriate number below.

Number	Description
1	Strongly Disagree
2	Disagree
3	Neither disagree or agree
4	Agree
5	Strongly Agree

No	Statement	1	2	3	4	5
1	Team objectives do not exist.					
2	Successes are rarely recorded.					
3	Participation by employees in the process is not at the required level.					
4	Low performance is highlighted, but no development Support is					

	defined.					
5	High performing staff are not easily identified and rewarded					
6	Personal Development Plans do not exist.					
7	The reward system is not linked to the performance.					
8	Promotion is not linked to the performance.					
9	Monitoring and evaluation do not exist.					

Section 5: Motivation

1. Please indicate your evaluation on staff motivation in the MoHSS by ticking the appropriate number below.

Number	Description
1	Strongly Disagree
2	Disagree
3	Neither disagree or agree
4	Agree
5	Strongly Agree

No	Statement	1	2	3	4	5
1	Employees are not motivated by the work they do.					
2	The reward system does not motivate employees.					
3	Leadership style in the MoHSS do not motivated employees.					
4	Organisational culture does not motivate employees					
5	Organisational structure in MoHSS does not motivate employees.					
6	The workload does not motivate employees					

Section 6: Evaluation of quality of service delivery

1. Please indicate your evaluation on the **QUALITY** of services provided by the MoHSS by ticking the appropriate number below.

Number	Description
1	Very Poor

2	Poor
3	Neither Poor Nor Good
4	Good
5	Very Good

No	Statement	1	2	3	4	5
1	Access to overall services					
2	Responsiveness to client needs.					
3	Communication style and information provision					
4	Competence in overall service delivery					
5	Humaneness in dealing with clients					
6	Empowerment of staff development.					
7	Reliability of overall service delivery.					
8	Equity of overall service delivery					
9	Conditions of physical facilities.					
10	Condition and functional of equipment					

ADDITIONAL COMMENT ON HOW YOUR MINISTRY COULD IMPROVE ITS SERVICE DELIVERY?

Thank you for taking part in this research study. Your effort is highly appreciated