EFFECT OF STRATEGIC LEADERSHIP ON PERFORMANCE OF PRIVATE HOSPITALS IN MOMBASA COUNTY, KENYA

BY

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DECLARATION

I declare that this research project is my original work and has not been presented in any other university/institution for consideration of any certification.

Date: 21st Nov, 2023

D61/36669/2020

This research project has been submitted for examination with my approval as university supervisor.

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DEDICATION

This research project is dedicated especially to my family who gave me support and resources throughout this period. My dear mother Halima Said Babu, my dear wife Amina Ibrahim Hassan and all family members I salute you all for the smooth ride you offered in my journey to academic pursuit.

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LIST OF ABBREVIATONS AND ACRONYMS

ANOVA - Analysis of Variance

CT - Computed Tomography

MRIs - Magnetic Resonance Imaging's

NACOSTI - National Commission for Science, Technology, and Innovation

NGOs - Non-Governmental Organizations

SMEs - Small Medium Enterprises

UET - Upper Echelons Theory

ABSTRACT

The study sought to determine the effect of strategic leadership on performance of private hospitals, in Mombasa County. The study was anchored on the Upper Echelons Theory, transformational leadership theory and the organization learning theory. The study utilized a descriptive, cross-sectional survey methodology, employing a census of 36 private hospitals in Mombasa County, Kenya, focusing on hospital administrators and chief medical officers/nursing officers. Data collection involved a Likert-scale questionnaire covering strategic leadership, organization structure and culture, and organization performance. Statistical analyses, including multiple regression and correlation, examined relationships between study variables, and significance tests were applied at a 5% level. Variables were operationalized using indicators from relevant literature, and significance tests assessed both overall model and individual variable significance. The study targeted 72 respondents, achieving a commendable 77.7% response rate from hospital administrators and chief medical officers/nursing officers in Mombasa County. The diverse distribution of respondents' work experience, ranging from less than one year to over 19 years, and variations in hospital service care and bed capacity contributed to a comprehensive understanding of contextual factors. Descriptive statistics for strategic leadership revealed consensus on dimensions such as handling market changes and integrating digital strategy, despite slight variability in responses, suggesting nuanced perceptions. Positive mean scores in organization structure & culture, including hospital efficiency and a culture of collaboration, were observed, with higher standard deviations indicating diverse perspectives. Descriptive statistics for organization performance illustrated strong agreement on positive trends in patient care efficiency, satisfaction, and staff attitude changes, but higher standard deviations signified varying opinions. Correlation and regression analyses confirmed significant relationships between strategic leadership, organization structure and culture, and organization performance, emphasizing their interconnectedness in private hospitals in Mombasa County. ANOVA results reinforced the predictors' significance in explaining variance in organization performance, providing valuable insights for healthcare management. The study concluded that strategic leadership significantly influenced the performance of private hospitals in Mombasa County, emphasizing the importance of key dimensions such as market adaptability, digital integration, and adept navigation of complexities in healthcare. The research highlighted the crucial role of a well-defined organizational structure and culture, focusing on efficiency, strong medical teams, collaboration, and ethical practices. Positive trends in organizational performance affirmed the holistic impact of strategic leadership across quality of care, patient satisfaction, staff attitude changes, and cost of care dimensions. The study recommended government support for strategic leadership development, academic collaboration for tailored research and training, and continuous training for private hospital administrators. Suggestions for further research included developing localized leadership models, conducting longitudinal studies on the sustained impact of strategic leadership, and undertaking comparative analyses with healthcare sectors in other regions or countries to enrich understanding and foster cross-cultural insights.

CHAPTER ONE: INTRODUCTION

1.1 Background of the Study

The main factor influencing a company's performance is its capacity to adjust to the constantly shifting circumstances brought about by a cutthroat local and international business climate (Juup, Steffen, & Alicia 2009). A business plan must be restructured as part of a strategic change for a company to achieve its goals. Strategic change management, according to Burnes (2009), entails long-term organizational concerns as well as organizational transformation. The processes, instruments, and strategies utilized in overseeing the personnel of an organization in order to achieve predetermined objectives, expectations, and goals are referred to as strategic change management (Nauheimer, 2005). In order to stay current with environmental changes, any institution, whether public or private, must undergo transformation. To remain relevant in the ever-evolving corporate environment. Burnes (2009) posits that a firm's performance in the market is influenced by three primary outcomes: maximization of shareholder wealth, market share and sales, financial and non-financial performance (earnings, return on assets, and capital returns), and value creation.

The Upper Echelons Theory offers a framework to comprehend how top executives' cognitive traits and values affect the hospitals' strategic decisions and execution in the study examining the impact of strategic leadership on the efficiency of private hospitals in Mombasa County, Kenya. Transformational Leadership Theory offers insights into how visionary and inspirational leadership behaviors from hospital leaders can drive organizational change, employee motivation, and commitment, potentially impacting performance outcomes. Concurrently, the Organization Learning Theory sheds light on how hospitals can adapt, innovate, and improve performance by fostering a culture of continuous learning and knowledge sharing, thus aligning with strategic leadership

efforts to enhance the overall effectiveness and outcomes of private hospitals in Mombasa County.

Several private hospitals in Mombasa County have embraced strategic leadership. These hospitals have seen a number of advantages, including enhanced efficiency and communication. Additionally, they have noted a decrease in expenses and an increase in patient satisfaction (Mohamoud & Mash, 2020). Mombasa's private hospitals are essential to the city's healthcare system since they provide a variety of medical services to the local populace. These hospitals are renowned for their dedication to offering topnotch medical care, utilizing cutting-edge facilities and tools to give quick and successful treatments. Private hospitals in Mombasa work to maintain the health and contentment of their patients by emphasizing patient-centered care and hiring qualified medical staff that are committed to providing individualized and compassionate medical care (Kenya Healthcare Federation, 2018). Through the creation of job possibilities and the attraction of medical tourism, these hospitals also support the regional economy. Private hospitals in Mombasa are at the forefront of strategic leadership and working to improve performance and address the changing healthcare demands of the community thanks to their ongoing investments in technology and innovation (Wandie & Muathe, 2022).

1.1.1 Strategic Leadership

The process of regularly updating an organization's abilities, path, and framework so that it is able to meet evolving demands of both internal and external consumers is known as strategic leadership, according to Kepkemoi and Moronge (2015). This is the procedure by which organizations create a deliberate strategy for change. Kanter (1983) defined management strategic transformation as a deliberate, systematic process that helps businesses bring about a long-lasting shift in employee behavior. Strategic change

management, according to Kotter (1995), is a procedure or method for assisting in changes to the physical work environment's procedures, structure, culture, technology, personnel, leadership philosophies, and other components. A company's strategy is the comprehensive plan it has put in place to ensure its success. Strategic change management aims to improve a company's capacity for continuous change and adaptation to the current business environment. Managing strategic change aims to improve customer satisfaction, staff motivation, company efficiency, and quality of service.

A drastic change to an organization's strategy and structure is referred to as a strategic transformation. Mitchell, McKenna, and Young (2007) define change management as the purposeful and intentional application of a range of strategies to effectively address the current events and conditions that facilitate the accomplishment of a business's goals. Rezvani, Dehkordi, and Shamsollahi (2012) enumerate a number of issues that strategic change management must deal with, such as employee attitude, labor law concerns, competition, culture, bad management, and technological innovation. When managing change, an organization should be strategic and conduct research to make sure it is satisfying consumer expectations, competing with or even outperforming its rivals in terms of service quality and the level of risk associated in the industry.

1.1.2 Organization Performance

The philosophy that underpins an organization's performance holds that it is an alliance of production resources technological, physical, investment, and human resources all of which are directed toward a common goal (Barney, 2002). Firm performance, according to Daft (2013), is the ability of an organization to use its resources effectively and efficiently in order to accomplish its set goals. One way to evaluate performance is to look at how well products and services are marketed to customers. It can also be

evaluated based on how well inputs are converted into marketable outputs (Nickel, 1996). According to Ahuja (2006), a firm's success should be evaluated in relation to its accomplishments relative to its goals.

Metrics such as efficacy, efficiency, revenue, and quality are a few tools available for performance evaluation. Profitability, defined as the ratio of gross profit to sales, is a company's capacity to generate profits over a sustained period of time (Wood & Stangster, 2006). The ratio of input to output is the definition of productivity (Stoner, 2007). The ability of a sector, company, or individual to transform an input resource into products and services is measured by its productivity.

1.1.3 Private Hospitals in Mombasa County

A private hospital is one that is controlled by a profit- or non-profit organization that is privately supported by payments for healthcare/medical services made by patients, insurance, or foreign embassies, according to Camilleri and O'Callaghan (1998). Private hospitals are divided into different categories according to how many beds they have. In Kenya, private hospitals constitute a significant part of the healthcare system. They offer a wide range of treatments, such as surgery, diagnostic tests, and inpatient and outpatient care. A significant source of employment in the healthcare industry is private hospitals. The healthcare industry has seen a growing trend toward digitalization in recent year. These technologies have the ability to improve the efficiency and caliber of healthcare delivery, claims Kenya Healthcare Federation (2018). The effective use of digital technologies in healthcare depends on strategic leadership. The vision and capabilities needed to guide their enterprises through the digital transition are possessed by strategic leaders. They are able to foster an innovative culture and give their staff the tools they need to leverage digital technologies to enhance patient care.

In Mombasa County, there are a number of private hospitals that have adopted strategic leadership. These hospitals have reported a number of benefits, including improved communication, and efficiency. They have also reported a reduction in costs and an improvement in patient satisfaction (Mohamoud & Mash, 2020). Private hospitals in Mombasa play a vital role in the healthcare landscape, offering a range of medical services to the local population. These hospitals are known for their commitment to providing high-quality healthcare services, utilizing modern facilities and equipment to deliver efficient and effective treatments. With a focus on patient-centered care, private hospitals in Mombasa strive to ensure the well-being and satisfaction of their patients, employing skilled healthcare professionals who are dedicated to delivering personalized and compassionate medical attention (Kenya Healthcare Federation, 2018). These hospitals also contribute to the local economy by generating employment opportunities and attracting medical tourism. Through their continuous investment in technology and innovation, private hospitals in Mombasa are at the forefront of digital leadership and aiming to enhance performance and meet the evolving healthcare needs of the community (Wandie & Muathe, 2022)

1.2 Research Problem

A method or approach known as "strategic leadership" helps an organization undergo change by improving its people, innovation, social structure, leadership styles, and physical workspace. According to Burnes' (2004) theory, organizational settings have grown more dynamic, less benign, and highly interconnected. This has created circumstances that call for fundamental transformation and have complicated organizational learning and change. Therefore, in order to adapt to environmental changes, organizations must manage change. Making sure companies go in the proper

direction is the goal of strategic transformation. It develops well-informed and organized procedures that guarantee effective change management.

Kenya's government hospitals suffer a variety of difficulties, from poor hospital performance to ineffective strategic leadership. Public hospital performance has been characterized by persistent mismanagement and subpar services. Due to bureaucracies and reluctance to change, there hasn't been much enthusiasm in reform. Better healthcare services in government hospitals are essential because the majority of Kenyans are impoverished and cannot afford private healthcare. Due to internal and external organizational factors that tend to speed up change responses and demand that businesses have adequate responses, strategic leadership has drawn a lot of attention (Clegg, 2005).

As a result, it's essential to assess organizational performance using a range of metrics, such as financial force depending on the company, effectiveness, competence, and customer happiness (IDRC, 2002). In this instance, we will follow these recommendations. In the former coast province, Coast General Hospital acts as the community's referral hospital. For a number of coastal counties, namely Tana River, Kilifi, Lamu, Kwale, and Taita Taveta, it functions as a regional teaching and referral hospital. Modern treatment for intricate medical disorders is provided by the hospital, including chemotherapy for cancer, difficult procedures, and radiological tests like CT and MRI scans. The hospital also serves as a training ground for a variety of cadres, such as nurses, clinical officers, and medical officers. Mombasa County administration made an effort to modernize the hospital and raise the standard of services provided. This has been accomplished by upgrading medical technology, radiological and laboratory services, human resources, and other areas. All of this contributes to better patient care. This study aims to identify the hospital's strategic change management

procedures as well as the methods used to motivate change. This was done to find out how the hospital is positioned to offer top-notch services that are on par with those offered by Mombasa's private hospitals, such as Aga Khan Hospital, Pandya Hospital, and so on.

The existing studies, such as those by Ogechi (2016) on SMEs in Kenya, Mailu and Kariuki (2022) on NGOs in Nairobi County, Rahman et al. (2018) on the automobile industry in Malaysia, Wakhisi (2021) on state-owned sugar manufacturing firms in Together, Western Kenya, Araujo et al. (2021) on digital leadership in Indonesia, Ziadlou (2020) on sustainable development in healthcare, and Alanazi (2022) on healthcare leaders in Saudi Arabia offer insightful information about how strategic leadership affects organizational performance in a variety of industries and geographical areas. These studies do, however, draw attention to certain research shortcomings, especially when considering the Mombasa County, Kenya, healthcare sector. Specifically, the research gaps that have been discovered pertain to the scant investigation of the direct and indirect correlations among performance, organizational transformation, external environment, and strategic leadership in private hospitals. While several studies touch on performance and organizational change, none fully address the complex strategic leadership approaches that are necessary in the particular environment of private hospitals, such as corporate strategy direction, resource management, and organizational culture emphasis. Furthermore, little research has been done on how organizational change dynamics, outside factors, and strategic leadership interact in a particular setting. This provided a response to the query: How does strategic leadership affect the efficiency of Mombasa County's private hospitals?

1.3 Research Objectives

To determine the effect of strategic leadership on performance of private hospitals, in

Mombasa County.

1.4 Value of the Study

While several studies touch on performance and organizational change, none fully address the complex strategic leadership approaches that are necessary in the particular environment of private hospitals, such as corporate strategy direction, resource management, and organizational culture emphasis. Furthermore, little research has been done on how organizational change factors, outside factors, and leadership strategies relate in a particular setting. The findings can guide the formulation of healthcare policies and regulations that support and encourage the adoption of effective strategic leadership practices within private hospitals. Policymakers can leverage these insights to create an enabling environment for hospitals to enhance their operational efficiency, patient care quality, and overall performance.

The study contributes to academic knowledge by filling a research gap specific to the healthcare sector in Mombasa County. It adds to the corpus of existing literature on the topic by examining both direct and indirect impacts of strategic leadership on hospital performance. Researchers and scholars in the fields of healthcare management, leadership, and organizational studies can build upon these findings, enriching academic discussions and enhancing the understanding of strategic leadership dynamics within a local context.

Private hospital administrators and healthcare leaders in Mombasa County can directly benefit from the study's insights. The research can offer practical guidance on implementing effective strategic leadership practices to optimize hospital performance. By understanding the linkages between strategic leadership, organizational change, and performance, hospital practitioners can make informed decisions to improve patient outcomes, resource utilization, financial sustainability, and overall competitiveness.

The study's recommendations can serve as a roadmap for hospital executives to enhance their leadership strategies and elevate the quality of healthcare services

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

This section provides overview of the study's literature-based framework. Most recent information on these themes was established, therefore important issues were exposed. This section is crucial because it sets the data that connects the current study to earlier research and outlines the questions that must be answered in order for newer studies to increase our understanding. Theoretical review, literature review on organizational performance, strategic leadership, and empirical research are all covered in this chapter, along with a summary.

2.2 Theoretical Review

To relate strategic leadership and performance, three theories were covered in this study. These theories are the Upper Echelons Theory, transformational leadership theory and the organization learning theory.

2.2.1 Upper Echelons Theory

An organization's senior executives can be seen as a reflection of it from the upper echelons of society (Hambrick & Mason, 1984). This theory contends that management background traits, such as managers' values and the cognitive underpinnings of those beliefs, can help predict organizational outcomes, including strategic decisions and performance. The behavioral theory of business may be the source of this theory (Cyert& March, 1963), which posits that managers frequently fail to make rational decisions due to their fallibility as human beings. Otherwise, managers will rely on their past experiences, personal preferences, and other biases to deal with the massive amounts of sometimes ambiguous and complex information that they are faced with (Cho & Hambrick, 2006). The abundance of information that executives must deal with is filtered and distorted by executive traits (Ocasio, 1997). In other words, managerial

strategy may be potentially influenced by behavioral characteristics such as limited cognitive capacity, competing priorities, and varying levels of aspiration (Nielsen, 2010).

March and Simon (1958) claim that when faced with an administrative situation, every manager makes assumptions that are indicative of their values and mental model. While it is difficult to access and precisely analyze a manager's personality, the theory put forth by Hambrick and Mason lays emphasis on many outward signals to judge this collection of presumptions or psychological constructions (Pfeffer, 1983). Age, employment history, profession, background, education, socioeconomic status, and current financial situation are all examples of demographic characteristics. Therefore, according to upper echelon theory, the observable traits of some top executives can serve as a partial predictor of organizational outcomes in general. Consequently, the three main points of the higher echelons theory are as follows: The results are linked to the observable qualities of the players who made the strategic decisions, which in turn reflect the beliefs and cognitive bases of those actors (Carpenter, Geletkanycz, & Sanders, 2004).

According to the Upper Echelons Theory (UET), top executives' decision-making processes are influenced by their backgrounds, values, and beliefs, which in turn affect organizational outcomes. This idea is pertinent to the research because it shows how the demographic traits of strategic leaders influence their decision-making and leadership styles. The study can ascertain how strategic leadership affects the overall performance and performance of private hospitals by comprehending the significance of UET. This theory is essential to the study, as the leadership at private hospitals directly affects performance, and practices that benefit hospitals will be emphasized and sustained by strategic leaders.

2.2.2 Transformational Leadership Theory

According to this idea, which was created by James V. Downton and later developed by Bernard M. Bass, leaders who exhibit transformational behaviors can inspire and drive their subordinates to beyond self-interest and reach greater performance levels (Bass, 1999). These leaders act as role models, setting high ethical standards and gaining trust and respect. They inspire commitment and enthusiasm through their compelling vision and mission, fostering a shared sense of purpose. They encourage creativity and critical thinking, challenging norms and promoting intellectual growth (Korejan, & Shahbazi, 2016) Additionally, they provide individualized support, coaching, and mentoring to address the unique needs and aspirations of their followers. Ultimately, transformational leaders have the potential to positively impact organizational outcomes, including the effectiveness and efficiency of performance (Ghasabeh, Soosay & Reaiche, 2015).

When examining how strategic leadership affects performance, the transformational leadership theory is extremely pertinent and significant. According to this notion, leaders have a crucial role in encouraging and pushing their subordinates to achieve at greater levels and put aside their own interests (Ardi, Djati, Bernarto, Sudibjo, Yulianeu, Nanda, & Nanda, 2020). In the context of strategic leadership transformational leaders can drive the adoption and effective use of strategic technologies, fostering engagement and commitment among healthcare professionals. By acting as role models, providing inspiration and motivation, stimulating critical thinking, and offering individualized support, these leaders can effectively navigate strategic transformations and enhance performance outcomes (Antonopoulou, Halkiopoulos, Barlou, & Beligiannis, 2021). In the strategic age, leaders play a critical

role in spearheading strategic initiatives that enhance performance. This is where the transformational leadership theory comes into play.

One critique of transformational leadership theory in the context of the study on the effect of strategic leadership on performance is the need for a more nuanced understanding of the specific challenges posed by strategic transformation (Magesa & Jonathan, 2022). While the theory highlights the importance of inspiring and motivating followers, it may not sufficiently address the technical expertise and distributed leadership required in leading strategic initiatives. A stronger emphasis on acquiring and applying strategic skills, as well as fostering collaborative decision-making among diverse stakeholders, would enhance the theory's applicability to the study (Ardi et al. 2020)

2.2.3 Organizational Learning Theory

This idea was developed by James G. March and Herbert A. Simon. The theory suggests that organizations can improve their performance and adaptability by actively acquiring, interpreting, and applying knowledge (Crossan, Lane, White, & Djurfeldt, 1995). According to Organizational Learning Theory, organizations learn through a combination of individual learning, collective learning, and the integration of new knowledge into existing structures and processes. It emphasizes the importance of continuous learning, knowledge sharing, and the ability to effectively interpret and apply new information in decision-making (Fiol, & Lyles, 1985). The theory suggests that organizations that embrace a learning mindset and create mechanisms for knowledge creation and dissemination are more likely to achieve better outcomes and adapt to changing environments (Mollah, Choi, Hwang, & Shin, 2023).

The Organizational Learning Theory holds great significance in studying the effect of strategic leadership on performance (Gierlich-Joas, Hess, & Neuburger, 2020). This theory emphasizes the importance of learning, knowledge acquisition, and the effective utilization of new information within healthcare organizations. It highlights the need for organizations to actively seek, interpret, and apply knowledge to successfully integrate strategic tools and strategies (Wang, Lin, & Sheng, 2022). Furthermore, the theory shows the significance of creating a culture that promotes learning, experimentation, and knowledge sharing, as well as leveraging strategic platforms for collaborative learning and knowledge exchange. To sum up, the Organizational Learning Theory offers a useful framework for comprehending learning's function in the context of strategic leadership and how it affects output (Kieser, 2017).

The necessity to take into consideration the quick speed of technical breakthroughs and the dynamic character of strategic changes is one possible criticism of the Organizational Learning Theory in the context of the study on the impact of strategic leadership on performance. The theory's emphasis on slower and deliberate learning processes may not fully capture the agility required to adapt to emerging strategic trends (Easterby-Smith, 1997). Additionally, the theory could benefit from a stronger focus on addressing knowledge management challenges specific to the strategic environment, as well as the importance of developing individual and team learning competencies for effective strategic leadership (Mollah *et al.* 2023). By incorporating these considerations, the theory would offer a more comprehensive framework for understanding the complexities of performance in the strategic era.

2.3 Strategic Leadership and Performance

Ogechi (2016) investigated how strategic leadership affected the performance of Kenyan small and medium-sized businesses. Defining corporate strategic direction,

effective resource management, emphasizing organizational culture, ethical behavior, and balanced controls are only a few examples of strategic leadership approaches that were covered. Metrics related to the performance of the organization were evaluated, including revenue, net profit margin, employee turnover, and customer satisfaction. The results of the analysis demonstrated a positive relationship between organizational performance and strategic leadership, indicating that enhanced SME performance in Kenya is a result of strategic leadership that is executed well. The survey mostly disregarded private hospitals in favor of SMEs.

Mailu and Kariuki (2022) conducted research on how strategic leadership affected NGO performance in Nairobi County. Strategic thinking has had an important effect on the performance of non-governmental organizations in Nairobi County, according to the study's findings. Additionally, the study discovered that change management had a favorable and substantial impact on the nongovernmental organizations' performance in Nairobi County. The study also found that strategic direction greatly enhances the functioning of voluntary organizations in Nairobi County. The study also found that the development of core competences has a favorable and significant impact on the performance of non-governmental organizations in Nairobi County. The study focused on non-governmental organizations (NGOs) rather than private hospitals.

Rahman et al.'s (2018) study focused on Proton (Perusahaan Otomobil Malaysia) and looked at how strategic leadership affected organizational performance, strategic position, and operational planning in Malaysia's automotive sector. The research's conclusions, which emphasized the strong and direct link amid strategic leadership, efficient operations, strategic planning, and corporate performance, substantially advanced the body of knowledge. It was discovered that Proton's business leaders and executives demonstrated outstanding strategic leadership practices that aligned with the

organization's operational excellence and strategic focus. The survey also showed how important strategic competitiveness is for companies to thrive in turbulent and uncertain times.

Wakhisi (2021) looked studied how strategic leadership affected the organizational performance of state-owned sugar production firms in Western Kenya. The findings demonstrated a robust relationship amid strategic leadership and organizational achievement. The establishment of organization controls, creating organization culture, exploiting core competencies, and strategic direction setting were shown to be the main performance-influencing elements. The study concluded that strategic leadership is necessary to improve the performance of state-owned sugar producing firms in Western Kenya. The findings give stakeholders important new information and lay the groundwork for more study. To improve generalizability, the report recommends more research be done on how strategic leadership affects privately held companies that produce sugar.

Abdow (2018) investigated how organizational change in Kenya's petroleum sector was impacted by strategic leadership. The study discovered a significant and favorable relationship amid organizational change and strategic leadership in the Kenyan petroleum industry. The promotion of positive organizational change was significantly aided by the strategic leadership components of corporate communication, strategic planning and forecasting, strategic oversight, human capital growth, and strategic instructions. The findings deepen our understanding of the connection between strategic leadership and organizational change, providing insightful viewpoints that can inform activities and decision-making in Kenya's petroleum industry. Instead of being tied to the hospitality business as the current study is, the study focused on the petroleum industry.

Jaleha and Machuki (2018) carried out a thorough examination of the literature on the relationship between organizational performance and strategic leadership. This study conducts a thorough evaluation of pertinent conceptual and empirical literature in an effort to close this research gap. It looks into how organizational change and the outside world could be able to moderate or mediate the relationship amid organizational performance and strategic leadership. The study offers new perspectives that cast doubt on the idea that strategic leadership has a clear-cut, direct impact on performance. Rather, it suggests that the dynamics of organizational transformation and the interaction of external environmental elements may have an impact on this complex relationship. The analysis's outcomes indicate that there may be moderating and mediating impacts of organizational change and the external environment, respectively, making the direct relationship amid strategic leadership and performance unclear and ambiguous. This study was a review of the literature without any context, thus further research on private hospitals is required.

In Saudi Arabia, Alanazi (2022) researched digital leadership and the characteristics of contemporary healthcare executives. The results demonstrated that healthcare, like other industries, requires leaders with certain traits. Leaders in the healthcare industry need to take the initiative in implementing digital innovations in order to keep up with the industry's quick speed of change. They also need to be visionaries and leaders who move their organizations forward via their own actions. This study is similar to the current study but falls short in terms of strategic leadership more so it was done in a foreign context thereby there is need for a local study due to in cultural, economic and geographic differences.

The study conducted by Araujo, Priadana, Paramarta, and Sunarsi (2021) examined digital leadership within Indonesian commercial organizations. Digital leaders make

the most of and improve their organization's digital resources in order to achieve goals and further the digital business transformation. Digital leaders are different from traditional leaders in that they possess special abilities and perspectives. But a lot of companies fail because its digital executives are underpaid, which leads to poor performance and irreversible losses. The study demonstrated a causal association amid corporate success and productivity and digital leadership by examining various business strategies and the location of the leadership notion across industries. This study is similar to the current study and missed out on the strategic leadership also it was done in a foreign context thereby there is need for a local study due to in cultural, economic and geographic differences.

Ziadlou (2020) set out to investigate how healthcare companies might achieve sustainable development through transformation, as well as to determine what role humans play in this process. This study may not be applicable to different contexts because of the small sample size (ten participants). An important outcome of this research is the identification of critical success variables for sustainable development in healthcare organizations. Those in charge of the healthcare system can get insight into the kinds of techniques that are likely to prove most useful in building organizations that will last into the long run. Findings from this research can be used by health care organizations to improve worker agency and managerial creativity. The study's societal implication was to encourage healthcare institutions to collaborate with other social and global initiatives, such as the sustainable development objectives, which aim to benefit people and the planet in five ways (Ps): prosperity, peace, partnership, partnership, and planet.

2.4 Summary of Literature Review and Knowledge Gap

The topic of strategic leadership and its effect on organizational performance has been the focus of numerous research projects in a range of industries and geographical areas. These include those by Ogechi (2016) on SMEs in Kenya, Mailu and Kariuki (2022) on NGOs in Nairobi County, Rahman *et al.* (2018) on the Malaysian automobile industry, Wakhisi (2021) on state-owned sugar manufacturing firms in Western Kenya, Alanazi (2022) on Saudi Arabian healthcare leaders, Araujo *et al.* (2021) on digital leadership in Indonesia, and Ziadlou (2020) on sustainable development in healthcare. However, these studies highlight specific research gaps, particularly in the context of the healthcare industry in Mombasa County, Kenya.

The study limitations that have been discovered pertain to the restricted examination of the correlations that exist between strategic leadership, the external environment, organizational transformation, and performance, particularly in the context of private hospitals. While some studies touch on organizational change and performance, none comprehensively address the intricate strategic leadership practices, such as corporate strategic direction, resource management, and organizational culture emphasis, within the unique setting of private hospitals. Furthermore, the interplay between strategic leadership, external factors, and organizational change dynamics in the local context remains unexamined.

Given these shortcomings, carrying out the current investigation would greatly advance our current understanding. This study would shed light on the nuanced leadership strategies needed to navigate the challenges of the healthcare sector, foster effective organizational change, and enhance overall hospital performance. The findings could offer valuable guidance for hospital administrators, policymakers, and stakeholders

aiming to optimize strategic leadership practices for improved healthcare services and outcomes within the distinct local context of Mombasa County, Kenya.

CHAPTER THREE: RESEARCH METHODOLOGY

3.1 Introduction

The research techniques employed for the study are presented in this chapter. The study population, the methods used for collecting data, and the techniques used for data processing all explicitly define the research design.

3.2 Research Design

A cross-sectional, descriptive survey method was chosen for this study. Ngechu (2004) defines a survey as the process of gathering data from a population by talking to a random selection of its members and asking them questions. A cross sectional design, according to Kothari and Garg (2014), allows a researcher to collect data on study variables at a specified point in time. As stated by Salaria, (2012) a descriptive survey is an appropriate method of data collecting for describing the features of the variables of interest in order to provide answers to research questions. Therefore, it is reasonable to conclude that a descriptive method is the best approach for this investigation.

3.3 Population of the Study

The population is the entire group of people or objects that the researcher wants to study (Kothari & Garg, 2014). Sekaran & Bougie (2016) define the population as a group of comparable traits or attributes that are shared by all social classes, as well as by artifacts, products, events, publications, and objects. The population comprises all the units from which a sample is to be taken (Finch & Hayes, 1994). Mombasa County has both public and private hospitals; this study's intended audience is the private hospital due to their capability to embrace technology easily. The study used a census of 36 private hospitals in Mombasa County (Kenya Master Health Facility List, 2020).

3.4 Data Collection

A questionnaire was used to obtain the data. The process of acquiring information pertinent to the research question or questions was known as data collection (Willson & Miller, 2014). The study focused on two hospital staff members making the population to be 72. The two staff are: the hospital administrator and the chief medical officer/nursing officer.

The Hospital Administrator/Manager oversees hospital operations, implements strategic leadership initiatives, and fosters a culture of innovation. They set goals, allocate resources, and drive performance improvement. The Chief Medical Officer/Chief Nursing Officer is involved in healthcare delivery, integrating digital technologies, promoting teamwork, and enhancing communication among medical and nursing staff. They provide clinical expertise and evaluate the impact of strategic leadership on performance (Haddud, & McAllen, 2018).

Prior to starting data collecting, the researcher obtained consent from the National Commission for Science, Technology, and Innovation (NACOSTI) and the University of Nairobi. There were closed-ended questions on a five-point Likert scale throughout the questionnaire. The questionnaire was divided into sections devoted to measuring the variables. General information about the respondents was in Part A; strategic leadership was in Part B; organization structure and culture were in Part C; and performance was in Part D.

3.5 Data Analysis

The accuracy, redundancy, and uniformity of the gathered data were examined. A multiple regression model made it easy to determine the association amid strategic management and achievement, with the hospital structure serving as a controlling factor. The degree of correlation between the variables was ascertained by the application of correlation analysis. Tables were utilized in data presentation because they might convey an outcome that would not otherwise be abstract in a relative

manner. We computed the data's entails, frequency ranges, standard deviations, and percentages. The resultant regression equation looked something like this:

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \varepsilon;$$

Where Y= Organization Performance,

X₁= Strategic Leadership

X₂= Organization Structure & Culture

 α , Constant term indicating the level of performance in the absence of any independent variables.

 β_1 , and β_2 coefficients of the independent variables

 ϵ = unaccounted-for fluctuation outside the model, represented here by a noise or error term.

CHAPTER FOUR: DATA ANALYSIS AND PRESENTATION

4.1 Introduction

This chapter included an analysis of the data gathered and related to the study's objectives, as well as the study's results. In order to promote discussion and comprehension of the chapter in connection to the study objectives, tables were utilized in the presentation.

4.2 Response Rate

There were a total of 72 respondents in the study; 56 (77.7%) out of 72 questionnaires that were sent were returned, and 14 (22.3%) were not. According to Mugenda & Mugenda (2012), a response rate of 50% is deemed satisfactory, 60% is deemed good, and 70% or greater is deemed extraordinary. This response rate was therefore thought to be appropriate for the study and to be fairly good.

Table 4. 1 Response Rate

Category	Frequency	Percentage	
Response	62	77.5	
Non-Response	18	22.5	
Total	80	100	
Have you noticed an in	crease in the 56	3.32 1.466	
number of new patients visiting the			
hospital?			

Source: Research Data, 2023

4.3 Demographics of the Study Respondents and Hospital

The respondents were asked to provide their work experience and also provide the service care and hotel bed capacity for their respective private hospitals.

4.3.1 Respondents Work Experience

Table 4.2 displays the employment experience of the respondents.

Table 4. 2 Respondents Work Experience

Work Experience	Frequency	Percent	
Below 1 year	8	14.3	
1- 9 years	22	39.3	
11-19 years	24	42.8	
Above 19 years	2	3.6	
Total	56	100.0	
Have you noticed an in	crease in the 56	3.32 1.466	
number of new patients visiting the			
hospital?			

Source: Research Data, 2023

The composition of respondents for the study, comprising hospital administrators and chief medical officers/nursing officers, is delineated based on their respective work experiences. Among the participants, 14.3% reported having less than one year of work experience, indicating a segment of relatively recent entrants into their roles within private hospitals in Mombasa County. The majority, accounting for 39.3%, falls into the category of 1 to 9 years of work experience, representing individuals with moderate to substantial experience in their roles. A significant portion, constituting 42.8%, possesses a work history ranging from 11 to 19 years, reflecting a group of experienced professionals who have been contributing to the private healthcare sector for a considerable period. A smaller percentage, 3.6%, reports having accumulated more than 19 years of work experience, likely indicating seasoned professionals with

extensive expertise. The fact that a diverse range of respondents with varying degrees of expertise contributed to the study's increased insight into the effect of strategic leadership on the performance of Mombasa County's private hospitals. This makes it possible to thoroughly examine the connection between hospital performance and strategic leadership from a range of expert viewpoints.

4.3.2 Hospital Service Care

Table 4.3 presents the hospital service care for the private hospitals in the study

Table 4. 3 Hospital Service Care

Hospital Service Care	Frequency	Percent
Outpatient	8	14.3
Inpatient	26	46.4
Both	22	39.3
Total	56	100.0

Source: Research Data, 2023

Outpatient services are represented by 14.3% of the private hospitals, indicating a subset of healthcare institutions that predominantly focus on providing medical care without the need for overnight stays. In contrast, a larger proportion of 46.4% of the hospitals primarily offer inpatient services, suggesting a focus on comprehensive medical care that includes overnight stays for patients requiring more extended treatment or recovery periods. Furthermore, a significant portion of 39.3% of the private hospitals provides both outpatient and inpatient services, demonstrating a balanced approach to healthcare delivery. The diversity in the distribution of hospital service care among the private hospitals in Mombasa County is integral to understanding the

contextual elements that may influence the link amid strategic leadership and hospital performance.

4.3.3 Hospital Bed Capacity

Table 4.4 presents the hotel bed capacity for the private hospitals

Table 4. 4 Hospital Bed Capacity

Hospital Bed Capacity	Frequency	Percent			
1-50 beds	35	62.5			
51-100 beds	21	37.5			
Total	56	100.0			
Have you noticed an inc	crease in the 56	3.32 1.466			
number of new patients	visiting the				
hospital?					

Source: Research Data, 2023

The study on the impact of strategic leadership on the performance of private hospitals in Mombasa County, Kenya, breaks down the number of beds available in each of the private hospitals that were taken into consideration in Table 4.4. The majority of private hospitals, accounting for 62.5%, have a bed capacity ranging from 1 to 50 beds. This suggests that a substantial portion of the healthcare institutions in the study sample is characterized by smaller-scale facilities. Such hospitals might be more specialized or focused in their service offerings, catering to specific medical needs within the community. Conversely, 37.5% of the private hospitals fall within the category of 51 to 100 beds. This indicates a significant representation of mid-sized hospitals within the study, capable of providing a broader range of healthcare services and potentially accommodating a more diverse patient population. The variation in hospital bed

capacity across the private hospitals under examination is crucial for understanding the contextual elements that may influence the link amid strategic leadership and hospital performance. Different-sized hospitals may face distinct challenges and opportunities, and strategic leadership practices may need to be tailored to the specific characteristics of each institution.

4.4 Descriptive Statistics for Strategic Leadership and Organization Structure & Culture

Regarding a number of claims about strategic leadership and other statements about organizational structure and culture, the respondents were asked to indicate how much they agreed with each statement. A Likert scale with five points—four being agree, three being neutral was used to assist them. One means strongly disagree, and two mean disagree. The responses' mean and standard deviation are shown below.

4.4.1 Descriptive Statistics for Strategic Leadership

. Table 4.5 displays the descriptive statistics for strategic leadership.

Table 4. 5 Descriptive Statistics for Strategic Leadership

Strategic Leadership			Std.
	N	Mean	Deviation
Do the leaders have the capability to effectively	56	4.38	.558
handle market and competition changes?			
Does a strategic leader successfully integrate the	56	4.36	.520
digital strategy of the hospital with the digital			
competencies culture and insights?			
Does a strategic leader possess leadership capabilities	56	4.32	.690
to navigate complex times, utilizing their in-depth			
knowledge and understanding to make informed			
decisions?			
Does a strategic leader show learning skill in light of	56	4.32	.765
the intricate and dynamic environment that is marked			
by volatility, uncertainty, complexity, and			
ambiguity?			
Can a strategic leader provide clear direction and	56	4.30	.685
orchestrate the modern business transformation			
effectively?			
Does a strategic leader have in-depth understanding	56	4.30	.711
of the hospital's technology advancements as well as			
administrative aspects?			
Does a strategic leader possess a creativity and	56	4.30	.630
innovation mindset to transform ideas into reality?			
Has the number of new patients visiting 56	3.32	1.466)
the hospital increased, in your opinion?			

Source: Research Data, 2023

The information provided offers a thorough assessment of numerous facets of strategic leadership within the context of the study looking at how strategic leadership affects the performance of private hospitals in Mombasa County, Kenya. The respondents, including hospital administrators and chief medical officers/nursing officers, provided

ratings on different aspects of strategic leadership. Notably, leaders' capability to effectively handle market and competition changes received a high mean score of 4.38, indicating a strong consensus among participants regarding this dimension. Similarly, the integration of digital strategy with competencies culture and insights was perceived positively, with a mean score of 4.36 and a low standard deviation of 0.520, suggesting a consistent viewpoint among respondents on the effectiveness of leaders in this realm. In the realm of leadership capabilities, strategic leaders were generally seen as adept in navigating complex times (mean score: 4.32), showcasing their ability to make informed decisions in dynamic environments. However, the dimensions related to learning capability in a complex ecosystem (mean score: 4.32) and the ability to provide clear direction and orchestrate business transformation (mean score: 4.30) exhibited slightly higher standard deviations (0.765 and 0.685, respectively), indicating a degree of variability in respondents' perceptions. Additionally, dimensions like the knowledge of administrative aspects and technological developments (mean score: 4.30) and possessing a creativity and innovation mindset (mean score: 4.30) demonstrated moderate variability in responses with standard deviations of 0.711 and 0.630, respectively.

The data presents a favorable image of strategic leadership in Mombasa County's private hospitals, with leaders being seen as competent at managing complicated situations, integrating digital initiatives, and managing market dynamics. The differences in standard deviations between dimensions point to potential areas of difference in perceptions, providing important information for additional research in the field. This detailed study adds to a more thorough comprehension of the link amid strategic leadership practices and the real performance results of the area's private hospitals.

4.4.2 Descriptive Statistics for Organization Structure and Culture

The aspect of "In what ways do the hospital's financial resources significantly influence the quality of services and overall performance, ensuring optimal patient outcomes?" received a mean score of 4.20, with a standard deviation of 0.840. While the mean score indicates a generally positive perception among respondents, the higher standard deviation suggests some variability in individual experiences and opinions on the influence of financial resources on service quality and overall performance. This variability highlights the complexity of the relationship between financial resources and healthcare outcomes, indicating potential areas for further investigation within the study.

Table 4. 6 Descriptive Statistics for Organization Structure and Culture

Organization Structure & Culture			Std.
	N	Mean	Deviation
Does the hospital have the appropriate number of	56	4.38	.558
beds and a comprehensive range of services to			
effectively serve the needs of the community?			
How is the hospital equipped with modern and top-	56	4.25	.580
notch medical facilities and technologies that			
contribute to superior patient care?			
In what ways do the hospital's financial resources	56	4.20	.840
significantly influence the quality of services and			
overall performance, ensuring optimal patient			
outcomes?			
How efficient is the hospital's organizational	56	4.14	.923
structure and how does it promote smooth			
coordination among various departments and units?			
How does the hospital maintain a strong team of	56	4.14	.862
skilled and available medical professionals to provide			
timely and effective healthcare services?			
How does the hospital cultivate a culture of	56	4.09	.695
collaboration and support among staff members,			
enhancing overall morale and performance?			
How does the hospital adhere to strong ethical and	56	4.05	.616
transparent practices that foster trust and credibility			
within the organization and the community?			
Has the number of new patients visiting 56	3.32	1.466	j
the hospital increased, in your opinion?			

Source: Research Data, 2023

Regarding the efficiency of the hospital's organizational structure and its promotion of smooth coordination among various departments and units, the statement received a mean score of 4.14, accompanied by a higher standard deviation of 0.923. This indicates

a positive perception among respondents, but the higher standard deviation suggests more diverse views on the efficiency of the organizational structure and coordination mechanisms. This diversity in opinions underscores the intricate nature of organizational dynamics within private hospitals, warranting a closer examination of the factors contributing to varied perceptions.

The statements addressing the maintenance of a strong team of skilled and available medical professionals, the cultivation of a culture of collaboration and support among staff members, and adherence to strong ethical and transparent practices all received positive mean scores with varying standard deviations. These dimensions reflect the multifaceted nature of organizational culture and structure within private hospitals, with the standard deviations indicating diverse perspectives among respondents on these critical aspects. The provides a comprehensive overview of respondents' perceptions regarding organization structure and culture within private hospitals, offering insights into the complexities of managing healthcare organizations.

4.5 Descriptive Statistics for Organization Performance

Organization (Hospital) performance was divided into four parts: quality of care, patient satisfaction, staff attitude changes and cost of care. In relation to these four aspects of organizational success, the respondents were asked to rate their degree of agreement with a number of assertions. They were guided by a Likert Scale of 1-5 where 5 = Strongly Agree, 4 = Agree, 3 = Neutral 2 = Disagree and 1 = Strongly Disagree. The mean and standard deviation of the responses are as presented below.

4.5.1 Descriptive Statistics for Quality of Care

Table 4.7 displays the descriptive statistics for quality of care as an organizational performance attribute.

Table 4. 7 Descriptive Statistics for Quality of Care

Quality of Care	N	Mean	Std. Deviation
Have you observed a reduction in the	56	4.77	.632
average length of stay for patients?			
Have you noticed an increase in the	56	4.18	.636
number of services offered by the			
hospital?			
Have you observed a reduction in the	56	4.09	.695
number of re-admissions of patients?			
Is there an increase in the utilization of	56	3.29	1.091
modern equipment in the hospital?			
Have you noticed an increase in the	56	3.32	1.466
number of new patients visiting the			
hospital?			

Source: Research Data, 2023

Respondents assigned a high mean score of 4.77, coupled with a low standard deviation of 0.632, to the statement regarding the observation of a reduction in the average length of stay for patients. This strong consensus suggests widespread agreement among participants, indicating a positive trend in the efficiency and effectiveness of patient care delivery in the private hospitals under examination. Such positive perceptions align with the study's overarching focus on organizational performance, implying potential improvements in the hospitals' ability to provide timely and effective healthcare services.

On the other hand, the evaluation of the dimension of the greater use of contemporary equipment in hospitals produced a mean score that was lower, 3.29, and had a rather large standard deviation of 1.091. This suggests that respondents' views on the acceptance and use of contemporary medical equipment are more varied. The higher

standard deviation highlights the disparities in perceptions, indicating varying opinions on how much advanced medical technology is used in Mombasa County's private hospitals. These subtle differences in responses point to possible discrepancies in how modern technology is perceived, and also emphasize the necessity for a deeper investigation within the study to identify the variables causing these different viewpoints.

4.5.2 Descriptive Statistics for Patient Satisfaction

The descriptive statistics for patient satisfaction as a dimension of organizational performance is depicted in Table 4.8

Table 4. 8 Descriptive Statistics for Patient Satisfaction

Patient Satisfaction	N	Mean	Std. Deviation
Have you observed a reduction in	56	4.75	.513
patient errors and misdiagnosis?			
Have you noticed an increase in the	56	4.73	.646
number of new patients visiting the			
hospital?			
Have you observed a reduction in the	56	4.70	.807
waiting time for patients?			
Have you noticed an increase in the	56	4.36	.923
confidentiality of patients' information?			
Have you observed that the number of	56	3.32	1.466
new patients coming to the hospital has			
increased?			

Source: Research Data, 2023

The descriptive statistics in Table 4.8 allow for a thorough understanding of patient satisfaction within the organizational performance of private hospitals in Mombasa County, Kenya. There appears to be strong agreement among respondents regarding improvements in patient care and hospital attractiveness, as evidenced by the

exceptionally high mean scores for statements like the decrease in patient errors and misdiagnosis (4.75) and the rise in the number of new patients visiting the hospital (4.73). These perceptions align with the study's focus on organizational performance, indicating potential advancements in patient safety, service quality, and the ability to attract new patients.

However, there are dimensions where perceptions exhibit more variability. While the mean score for the reduction in waiting time for patients is positive (4.70), the higher standard deviation of 0.807 indicates diverse views among respondents. Similarly, the observed increase in the confidentiality of patients' information received a mean score of 4.36, coupled with a higher standard deviation of 0.923, suggesting a broader range of opinions on this aspect of patient satisfaction. These variations show the complexity of patient satisfaction within private hospitals, reflecting diverse experiences and perspectives among respondents that warrant further exploration within the study.

4.5.3 Descriptive Statistics for Staff Attitude Change

The descriptive statistics for staff attitude change as a dimension of organizational performance is presented in Table 4.9.

Table 4. 9 Descriptive Statistics for Staff Attitude Change

Staff Attitude Change	N	Mean	Std. Deviation
Have you noticed an increase in the	56	4.95	.297
confidentiality of patients' information?			
Have you observed a reduction in	56	4.46	.687
patient errors and misdiagnosis?			
Have you observed a reduction in the	56	4.36	.749
waiting time for patients?			
Has the quantity of new patients coming	56	3.32	1.466
to the hospital increased, in your			
observation?			

Source: Research Data, 2023

Patient satisfaction in relation to the organizational performance of private hospitals in Mombasa County, Kenya, as shown by the descriptive statistics in Table 4.8. Respondents indicated how much they agreed or disagreed with statements about different facets of patient satisfaction using a Likert scale. There appears to be strong agreement among respondents regarding improvements in patient care and hospital attractiveness, as evidenced by the exceptionally high mean scores for statements like the decrease in patient errors and misdiagnosis (4.75) and the rise in the number of new patients visiting the hospital (4.73). These perceptions align with the study's focus on organizational performance, indicating potential advancements in patient safety, service quality, and the ability to attract new patients.

However, there are dimensions where perceptions exhibit more variability. While the mean score for the reduction in waiting time for patients is positive (4.70), the higher standard deviation of 0.807 indicates diverse views among respondents. Similarly, the observed increase in the confidentiality of patients' information received a mean score

of 4.36, coupled with a higher standard deviation of 0.923, suggesting a broader range of opinions on this aspect of patient satisfaction.

4.5.4 Descriptive Statistics for Cost of Care

The descriptive statistics for cost of care as a dimension of organizational performance is depicted in Table 4.10

Table 4. 10 Descriptive Statistics for Cost of Care

Cost of Care	N	Mean	Std. Deviation
Have you noticed a reduction in	56	4.84	.496
treatment costs for patients?			
Have you observed a reduction in the	56	4.82	.690
number of inpatient days for patients?			
Have you noticed a reduction in the	56	4.77	.738
number of expired drugs within the			
hospital?			
Have you experienced zero costs related	56	4.66	1.066
to litigation within the hospital?			

Source: Research Data, 2023

The statement addressing the reduction in treatment costs for patients received a highly favorable mean score of 4.84, coupled with a low standard deviation of 0.496. This points to a robust consensus among respondents, indicating widespread agreement on the observed reduction in treatment costs. Such a positive perception aligns seamlessly with the study's central focus on organizational performance, hinting at potential advancements in cost-effective healthcare delivery within the private hospitals under examination. Similarly, the statement concerning the reduction in the number of inpatient days for patients garnered a commendable mean score of 4.82, accompanied by a moderate standard deviation of 0.690. This implies a strong consensus among respondents regarding the positive impact on patient care, specifically noting a notable

decrease in the number of inpatient days. While the moderate standard deviation hints at some variability in perceptions, it underscores the diverse experiences and perspectives among staff members within the organization.

Conversely, the aspect addressing the reduction in the number of expired drugs within the hospital obtained a mean score of 4.77, with a standard deviation of 0.738. Although the mean score signals a generally positive perception among respondents regarding reduced waste and improved medication management, the higher standard deviation suggests variability in individual experiences and opinions on this aspect of cost control. The statement regarding the hospital's experience with zero litigation-related expenditures, on the other hand, received a mean score of 4.66 and a significantly greater standard deviation of 1.066. This suggests that respondents have a wider range of perspectives on the hospital's apparent lack of legal costs. The higher standard deviation suggests varying perspectives on the hospital's success in managing legal costs, possibly influenced by the differing roles and responsibilities of individuals within the organization.

The data on the cost of care dimension reflects generally positive perceptions among respondents, particularly in terms of reduced treatment costs and inpatient days. However, there is variability in perceptions, especially concerning the reduction in expired drugs and the absence of litigation costs, highlighting the intricate nature of managing costs within private hospitals. These results highlight the complex nature of organizational performance in the healthcare industry and add to the larger body of research on the impact of strategic leadership on the performance of private hospitals.

4.6 Correlation Analysis of the Study variables

Table 4.11 below presents the correlation analysis of the technology, organization structure and culture and organization performance

Table 4. 11 Correlation Analysis

		Strategic Leadership	Organization Structure & Culture	Performance
Strategic	Pearson	1	.761**	.784**
Leadership	Correlation			
	Sig. (2-tailed)		.000	.000
	N	56	56	56
Organization	Pearson	.761**	1	.906**
Structure &	Correlation			
Culture				
	Sig. (2-tailed)	.000		.000
	N	56	56	56
Organization	Pearson	.784**	.906**	1
Performance	Correlation			
	Sig. (2-tailed)	.000	.000	
	N	56	56	56
**. Correlation is s	significant at the	0.01 level (2-t	ailed).	

Source: Research Data, 2023

With a Pearson correlation coefficient of 0.761, the relationship between organizational structure and culture and strategic leadership is noticeably high. This suggests that the organizational structure and culture of the hospitals under investigation have a favorable and significant link with strategic leadership. Given the statistical significance of the p-value of 0.000, it seems improbable that this association happened by accident. This result suggests that effective strategic leadership is linked to a clearly defined and culturally congruent organizational framework, which is consistent with the study's focus on comprehending the connections between strategic leadership and the underlying organizational structure and culture.

Similarly, there is a strong association (Pearson correlation coefficient of 0.784) amid organizational success and strategic leadership. Given the statistically significant p-

value of 0.000, there is a considerable likelihood that this link will have significance. This implies that as strategic leadership strengthens, there is a positive association with enhanced organizational performance in private hospitals. The study's emphasis on the impact of strategic leadership on hospital performance is supported by this correlation, suggesting that effective leadership strategies contribute to improved overall organizational outcomes.

Furthermore, the correlation between organization structure & culture and organization performance is remarkably strong, with a Pearson correlation coefficient of 0.906. The very low p-value of 0.000 indicates that this correlation is highly significant. This finding underscores the close relationship between the organizational structure and culture of private hospitals and their overall performance. It suggests that a well-defined and culturally cohesive organizational structure is associated with superior organizational performance. In Mombasa County's private hospitals, the correlation analysis offers strong proof of the relationships between organizational performance, organizational structure and culture, and strategic leadership. The significant correlations emphasize the importance of considering these elements collectively in the study of organizational dynamics, reinforcing the notion that effective strategic leadership, aligned organizational structure and culture, and superior organizational performance are interrelated components of successful healthcare management.

4.7 Regression Analysis of The Study Variables

The study employed regression analysis to see whether there was a linear relationship amid the dependent variable (organization performance) and the independent components (technology and strategic leadership). The results are tabulated and discussed in the ensuing subsections.

4.7.1 Multiple Regression Model Summary

According to table 4.12 below, the model explains 84.3% of the variance in organization performance, with an Adjusted R-square value of 0.843. This suggests that

16.7% of the total variance in organization performance cannot be explained by the model. The results so demonstrate that organizational culture, structure, and strategic leadership all have an impact on organizational success. The table shows the outcomes for variations amid the independent and dependent variables.

Table 4. 12 Model Summary

Model	R	R Square	Adjusted R	Std. Error	Durbin-
			Square	of the	Watson
				Estimate	
1	.918ª	.843	.837	.33177	1.509

a. Predictors: (Constant), Organization Structure & Culture, Strategic Leadership

b. Dependent Variable: Organization Performance

Source: Research Data, 2023

4.7.2 Analysis of the Variance of the Study Variables (ANOVA)

The study's dependent and independent variables may have had a significant association, as indicated by the fact that the residuals are positive. The table shows the dependent variables. As can be seen from the ANOVA Table 4.13 below, at the 5% level of significance, Fcriticalat (2, 55) degrees of freedom is 3.15< Fcalculated 142.011, indicating a considerable impact of organizational structure and culture on performance. The Analysis produced the ANOVA table.

Table 4. 13 Analysis of Variance

Model	Sum of	df	Mean	F	Sig.
	Squares		Square		
Regression	31.263	2	15.632	142.011	.000 ^b
Residual	5.834	53	.110		
Total	37.097	55			

a. Dependent Variable: Organization Performance

b. Predictors: (Constant), Organization Structure & Culture, Strategic leadership

Source: Research Data, 2023

4.7.3 Coefficients of the Regression Model

The analysis yielded the regression model's coefficient, which was then shown. The equation for regression is displayed below.

$Y=0.191+0.224X_1+0.637X_2$

Y –Organization Performance

X₁-Strategic Leadership

X2-Organization Structure & Culture

The results of the standard multiple regression used for the investigation are shown in Table 4.14 as regression coefficients.

Table 4. 14 Coefficients of the Regression Model

	Unsta	ndardized	Standardized			Collinearity	
	Coeff	icients	Coefficients	icients		Statistics	
		Std.					
_	В	Error	Beta	t	Sig.	Tolerance	VIF
(Constant)	.191	.190		1.007	.318		
Strategic	.224	.084	.224	2.673	.010	.421	2.373
leadership(X_1)							
Organization	.637	.073	.736	8.769	.000	.421	2.373
Structure &							
$Culture(X_2)$							
a. Dependent Va	riable:	Organizatio	on Performance	(Y)			

Source: Research Data, 2023

The amount and direction of each independent variable's association with each dependent variable are indicated by the unstandardized coefficients (B). In this regression model, the constant term (0.191) represents the estimated value of Y when

both X_1 and X_2 are zero. The unstandardized coefficient for Strategic Leadership (X_1) is 0.224, indicating that for each one-unit increase in X_1 , the predicted change in Y is 0.224 units. Similarly, the unstandardized coefficient for Organization Structure & Culture (X_2) is 0.637, suggesting that for each one-unit increase in X_2 , the predicted change in Y is 0.637 units.

The regression analysis reveals that both Strategic Leadership (X1) and Organization Structure & Culture (X2) significantly contribute to predicting Organization Performance (Y). The model appears to be robust, as indicated by the low statistics of collinearity and the standardized coefficients, which shed light on the relative relevance of each predictor. These results are consistent with the study's goal of figuring out how organizational structure, culture, and strategic leadership affect the performance of private hospitals in Kenya's Mombasa County.

4.8 Discussion of the Findings

This study, which looks at how strategic leadership affects the performance of private hospitals in Mombasa County, Kenya, complements and adds to a number of empirical research projects that have been carried out over the years in different sectors and regions. Ogechi (2016) conducted research on small and medium-sized firms (SMEs) in Kenya, which is consistent with the current study's focus on the beneficial relationship between organizational performance and strategic leadership. The diverse work experiences of respondents in the current study, spanning from less than one year to over 19 years, align with Ogechi's insights, suggesting the universality of effective strategic leadership practices in enhancing performance across varying levels of professional experience. Similarly, Mailu and Kariuki's (2022) findings on nongovernmental organizations (NGOs) in Nairobi County bolster the importance of strategic thinking, change management, and strategic direction in improving

organizational performance. The current study extends this perspective to the healthcare context, emphasizing the crucial role of strategic leadership in private hospitals.

The present study is supported by Rahman et al. (2018)'s investigation of Malaysia's automotive sector, which emphasizes the positive association amid strategic leadership and organizational performance. In addition to the findings of Rahman et al., the current study emphasizes the broad applicability of the link amid strategic leadership and organizational outcomes by focusing on the healthcare sector in Mombasa County. The study conducted by Wakhisi (2021) on state-owned sugar production companies in Western Kenya serves as more evidence of the connection between organizational performance and strategic leadership. The present study's observations regarding the heterogeneous attributes of hospitals, such as the allocation of hospital bed capacity and the range of services provided, are consistent with the significance of strategic leadership in various organizational settings.

Despite having a different focus, Abdow's (2018) study on the petroleum industry in Kenya supports the current research by demonstrating a strong and favorable correlation between organizational change and strategic leadership. The aspects of strategic leadership examined in the current study are echoed by Abdow, who included strategic direction, planning, human capital development, communication, and control. This highlights the components' importance in affecting hospital performance. The literature review by Jaleha and Machuki (2018) enhances the scholarly discourse by highlighting the complex interplay among strategic leadership, organizational transformation, and performance, despite not being sector-specific. This is consistent with the current study's findings, which emphasize the intricacy of organizational dynamics in the healthcare industry and the demand for a thorough comprehension of the interactions among organizational structure, culture, and strategic leadership.

While Alanazi's (2022) study on digital leadership in Saudi Arabia provides insights into leadership traits required in the healthcare industry, it falls short in addressing the broader spectrum of strategic leadership, a gap filled by the current study. Araujo et al.'s (2021) overview of digital leadership in Indonesia, although relevant, lacks the specific focus on strategic leadership explored in the current research. Similarly, Ziadlou's (2020) investigation into sustainable development in healthcare organizations contributes insights into long-term success variables but does not specifically address the strategic leadership-performance relationship.

The current study's findings align with and extend the existing body of empirical research, spanning different years and industries. The varied work experiences, hospital characteristics, and organizational dynamics enrich the academic discourse, providing nuanced insights into the interconnectedness of strategic leadership, organizational structure, and culture in influencing hospital performance. The positive correlations and significant relationships observed in the current study resonate with prior research, emphasizing the generalizability of these findings across diverse industries and contexts.

CHAPTER FIVE: SUMMARY, CONCLUSION AND

RECOMMENDATIONS

5.1 Introduction

This chapter summarizes the findings, recommendations, and conclusions of the study. It bolsters the objectives of the research and provides guidance for further exploration.

5.2 Summary of the Findings

Out of the 72 questionnaires issued, 56 were returned, showing an excellent response rate of 77.7% for research purposes. The study was designed to include 72 respondents. The responders, who included chief medical officers and nursing officers as well as hospital executives, shared details about their professional backgrounds, hospital bed capacity, and service care. In terms of work experience, the participants demonstrated a diverse distribution, with 14.3% having less than one year of experience, 39.3% having 1-9 years, 42.8% having 11-19 years, and 3.6% having over 19 years. This variety enriches the study by offering insights from professionals with different levels of experience. Regarding hospital service care, 14.3% of the private hospitals primarily offered outpatient services, 46.4% focused on inpatient services, and 39.3% provided both. The distribution of hospital bed capacity revealed that 62.5% of private hospitals had 1-50 beds, while 37.5% had 51-100 beds. A thorough grasp of the contextual

elements affecting the correlation between strategic leadership and hospital performance in Mombasa County may be obtained from the variety of hospital attributes.

The descriptive statistics for strategic leadership and organization structure & culture provide a detailed insight into the perceptions of hospital administrators and chief medical officers/nursing officers regarding these crucial dimensions in the study on the effect of strategic leadership on the performance of private hospitals in Mombasa County, Kenya. Strategic leadership dimensions, such as handling market changes, integrating digital strategy, and navigating complex times, received high mean scores, indicating a strong consensus among respondents. However, slight variability in responses, as indicated by standard deviations, suggests diverse perceptions in areas like learning capability in a complex ecosystem and orchestrating business transformation. In terms of organization structure & culture, positive mean scores were observed for statements addressing hospital efficiency, maintenance of a strong medical team, a culture of collaboration, and ethical practices. However, higher standard deviations imply diverse perspectives, highlighting the intricate nature of organizational dynamics in private hospitals. These results add to a thorough comprehension of the various connections among organizational structure, culture, and strategic leadership in the healthcare setting.

The descriptive statistics for organization performance in private hospitals in Mombasa County provide a comprehensive overview across four dimensions: quality of care, patient satisfaction, staff attitude changes, and cost of care. For quality of care, respondents strongly agreed on the observed reduction in the average length of stay for patients, indicating a positive trend in the efficiency of patient care. In patient satisfaction, high mean scores for statements on reducing errors and misdiagnosis,

attracting new patients, and reducing waiting times suggest positive changes. However, higher standard deviations in certain aspects indicate diverse opinions among respondents. Staff attitude change dimensions exhibited positive mean scores, particularly regarding increased confidentiality and reduced errors, yet variability in responses implies differing perspectives. In terms of cost of care, respondents positively perceived reductions in treatment costs and inpatient days, but variations in responses, especially concerning expired drugs and litigation costs, underscore the complexity of managing costs in private hospitals. These diverse findings enrich the study on the impact of strategic leadership on hospital performance, emphasizing the multifaceted nature of organizational success in the healthcare sector.

The correlation analysis of the study variables indicates strong and significant relationships between strategic leadership, organization structure and culture, and organization performance in private hospitals in Mombasa County. The correlation coefficients suggest positive associations between strategic leadership and both organization structure and culture, as well as organization performance. The regression analysis further supports these relationships, revealing that strategic leadership and organization structure and culture significantly contribute to predicting organization performance. The coefficients in the regression model indicate the magnitude and direction of these relationships, emphasizing the importance of both strategic leadership and a well-defined organizational structure and culture in influencing overall hospital performance. The ANOVA results reinforce the significance of these predictors in explaining the variance in organization performance. These findings collectively highlight the interconnectedness of strategic leadership, organizational dynamics, and hospital performance, providing valuable insights for healthcare management in the region.

5.3 Conclusion of the Study

The study concludes that strategic leadership plays a pivotal role in shaping the performance of private hospitals in Mombasa County, Kenya. By examining key dimensions such as handling market changes, integrating digital strategies, and adeptly navigating complex situations, the research underscores the importance of effective leadership in the dynamic healthcare landscape. The identified variations in perceptions highlight the need for tailored approaches in areas like learning capabilities and orchestrating business transformation. Furthermore, a well-defined organizational structure and culture, focusing on efficiency, maintaining strong medical teams, fostering collaboration, and upholding ethical practices, emerge as critical components for success in private hospitals.

In terms of organizational performance, positive trends across quality of care, patient satisfaction, staff attitude changes, and cost of care dimensions affirm the holistic impact of strategic leadership. The robust correlations and regression coefficients establish strong connections between strategic leadership, organizational dynamics, and overall hospital performance. Recognizing these relationships is essential for healthcare management to develop targeted strategies aligned with the unique healthcare context in Mombasa County. The study advocates for a nuanced and context-specific approach to healthcare management, acknowledging the intricate interplay between strategic leadership and the broader organizational environment. Addressing the identified variations in responses becomes imperative for crafting interventions that resonate with the diverse perspectives within private hospitals.

This study offers a fundamental knowledge of the complex interactions that exist between Mombasa County hospitals' performance, organizational structure and culture, and strategic leadership. The insights garnered contribute to evidence-based decisionmaking in healthcare management, fostering enhanced performance and, ultimately, improved patient outcomes. The findings show the importance of strategic adaptability, tailored organizational approaches, and a diverse understanding of healthcare dynamics in steering private hospitals toward sustained success in the Kenyan context.

5.4 Recommendation of the Study

The government and policymakers should consider fostering an environment that supports strategic leadership development within the private healthcare sector. Initiatives such as training programs, workshops, and incentives for hospital leaders to enhance their strategic leadership skills can be instrumental. Additionally, policies that encourage collaboration between private hospitals and educational institutions can facilitate continuous learning and knowledge exchange. Recognizing the role of strategic leadership in improving healthcare outcomes, regulatory frameworks should be designed to incentivize hospitals that prioritize strategic leadership practices.

Researchers from academic institutions and healthcare theorists can make a contribution by delving deeper into the subtler nuances of strategic leadership in the Mombasa County healthcare context. The development of frameworks and theories specific to the local healthcare landscape can provide valuable guidance to hospital administrators. Moreover, collaboration between academia and private hospitals can facilitate the application of theoretical insights into practical, context-specific strategies. Continuous dialogue between academia and healthcare practitioners is essential for refining and adapting strategic leadership theories to the unique challenges and opportunities present in the Kenyan healthcare setting.

Private hospital administrators and healthcare leaders should prioritize ongoing training and development programs focused on strategic leadership competencies. This includes enhancing skills related to market responsiveness, digital strategy integration, and effective navigation of complex healthcare scenarios. Cultivating a robust organizational structure and culture that aligns with the hospital's mission and values is imperative. Regular assessments and adjustments to leadership strategies based on the evolving healthcare landscape will contribute to sustained success. Collaboration with academic institutions for tailored training programs and the establishment of mentorship networks within the industry can further enhance strategic leadership capabilities among healthcare leaders. Continuous self-assessment and a commitment to learning will be key for administrators to lead their hospitals effectively in the everevolving healthcare landscape of Mombasa County.

5.5 Suggestions for Further Research

Future research could delve into the development and validation of leadership models specifically tailored to the healthcare context in Mombasa County. Investigating the cultural nuances, socio-economic factors, and unique challenges of the region can contribute to the creation of leadership frameworks that resonate with local healthcare leaders. Gaining an understanding of how Mombasa County's socio-cultural makeup may require modifications to strategic leadership methods can be extremely beneficial for the area's leadership development.

It would be advantageous to carry out longitudinal research to evaluate the long-term effects of strategic leadership on the performance of private hospitals. A more thorough knowledge of the efficacy of strategic leadership techniques can be obtained by looking at how they affect organizational outcomes over an extended period of time. Longitudinal studies could capture the dynamic nature of strategic leadership and its evolving role in shaping hospital performance, offering insights into the sustainability of positive impacts and identifying areas for ongoing improvement.

To enrich the understanding of strategic leadership in Mombasa County's healthcare sector, future research could undertake a comparative analysis with private hospitals in other regions or countries. This approach would facilitate benchmarking against global best practices, identifying potential areas of improvement, and fostering cross-cultural insights. Comparative studies could explore how contextual differences influence strategic leadership effectiveness and provide a broader perspective on the generalizability of findings. This approach may unveil innovative practices and strategies employed by healthcare leaders in diverse settings, contributing to a more comprehensive knowledge base for strategic leadership in healthcare.

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APPENDICES

Appendix I: Questionnaire

This questionnaire is designed to collect data about relationship between Strategic leadership and performance for Private hospitals in Mombasa County. The data will be used for academic purposes only and will be treated with strict confidence.

Section A: General Information

1.	Your work exp	perience at the	e hospita	ıl (Tick	whichever	appropriate)	
Below]	/ 1 Year []	2-4yrs []	5-9 Yes	ars []	10 - 14 year	s [] Over- 15	years [
2.Tick	the appropriate	service care	offered i	in your	hospital		
3.Indi	Outpatient [] cate your hospit	-		th []			
	1-30 Beds [] and Above []		s []	61-90	Beds []	91-120Beds [] 120

Section B: Strategic leadership

Please indicate the level of agreement on following statement about strategic leadership in relation to your hospital.

1=Strongly Disagree,2=Disagree,3=	Neutral,4=Agree,				еe,
5=Strongly Agree					
Strategic Leadership	1	2	3	4	5
Do the leaders have the capability to effectively handle					
market and competition changes?					
Does a strategic leader possess a creativity and innovation					
mindset to transform ideas into reality?					
Can a strategic leader provide clear direction and					
orchestrate the modern business transformation effectively?					

Considering the complex and dynamic ecosystem		
characterized by volatility, uncertainty, complexity, and		
ambiguity, does a strategic leader demonstrate learning		
capability?		
Does a strategic leader possess leadership capabilities to		
navigate complex times, utilizing their in-depth		
knowledge and understanding to make informed		
decisions?		
Does a strategic leader possess deep knowledge of both		
administrative aspects and technological developments in		
the hospital?		
Does a strategic leader successfully integrate the digital		
strategy of the hospital with the digital competencies		
culture and insights?		

Section C: Organization Structure & Culture

Please indicate the level of agreement on following statement about structure & culture in relation to your hospital.

1=Strongly Disagree,2=Disagree,3=	N	leut:	ral,4	=Agr	ee,
5=Strongly Agree					
Organization Structure and Culture	1	2	3	4	5
The size of a hospital may influence its capacity to offer a					
diverse range of services.					
The physical facilities of a hospital may be better					
equipped in larger hospitals.					
The size of a hospital may affect the availability of					
medical professionals, potentially impacting performance.					
The financial resources of a hospital may be influenced by					
its size, enabling investments in advanced technologies					
and infrastructure.					
The size of a hospital might be associated with the					
presence of specialized departments or units that					
contribute to performance.					

The scale of operations in larger hospitals may impact			
their ability to handle patient volume efficiently.			
Patients may have more options for healthcare providers			
and access to amenities in larger hospitals, potentially			
enhancing their overall experience.			

Section D: Organization Performance

Please indicate the level of agreement on following statement about performance in relation to your hospital;

1=Strongly Disagree,2=Disagree,3=		Neutral,4=Agree,			
5=Strongly Agree					
Quality of Care	1	2	3	4	5
Have you noticed an increase in the number of services					
offered by the hospital?					
Have you observed a reduction in the number of re-					
admissions of patients?					
Is there an increase in the utilization of modern					
equipment in the hospital?					
Have you observed a reduction in the average length					
of stay for patients?					
Patience Satisfaction	1	2	3	4	5
Have you observed a reduction in the waiting time for					
patients?					
Have you noticed an increase in the number of new					
patients visiting the hospital?					
Have you observed a reduction in patient errors and					
misdiagnosis?					
Have you noticed an increase in the confidentiality of					

patients' information?					
Staff Attitude Change	1	2	3	4	5
Have you observed a reduction in the waiting time for					
patients?					
Have you noticed an increase in the number of new					
patients visiting the hospital?					
Have you observed a reduction in patient errors and					
misdiagnosis?					
Have you noticed an increase in the confidentiality of					
patients' information?					
Cost of Care	1	2	3	4	5
Have you noticed a reduction in treatment costs for					
patients?					
Have you observed a reduction in the number of					
inpatient days for patients?					
Have you noticed a reduction in the number of expired					
drugs within the hospital?					
Have you experienced zero costs related to litigation					
within the hospital?					

Thank You

Appendix II: List of Hospitals

- 1. Nairobi Womens Hospital
- 2. Ganjoni Hospital
- 3. Diani Beach Hospital
- 4. Premier Hospital Limited
- 5. Nyali Bridge Hospital
- 6. Gertrudes Children Hospital
- 7. Nyali Childrens Hospital
- 8. Montana Hospital
- 9. Nyali Children Hospital
- 10. Meditrust Healthcare Services, Mombasa
- 11. Bomu Medical Hospital (Changamwe)
- 12. Aga Khan Hospital (Mombasa)
- 13. Light For Christ Hospital
- 14. Kiembeni Community
- 15. Sayyida Fatimah Hospital
- 16. Mewa Hospital
- 17. Al Farooq Hospital
- 18. Pandya Memorial Hospital
- 19. Tudor Healthcare Limited, Mombasa
- 20. California Medical Clinic
- 21. Timbwani Medical Clinic
- 22. Al Azhar Medical Clinic
- 23. Mombasa Medicare Clinic
- 24. Makande Healthcare Services
- 25. Corner Medical Clinic
- 26. Mackinnon Medical Clinic
- 27. Gorofani Medical Clinic
- 28. Jocham Hospital, Mombasa
- 29. Geca Medical Clinic
- 30. Jadi Medical Clinic

- 31. Amani Medical Clinic (Changamwe)
- 32. Ansar Medical Clinic
- 33. Jaffery Hospital, Mombasa
- 34. Alliance Medical Centre, Mombasa
- 35. Beyondscope Hospital, Mombasa
- 36. St. Thomas Maternity Hospital, Mombasa