

**REWARDS AND THE PERFORMANCE OF HEALTH WORKERS AT MENGO
HOSPITAL, UGANDA**

BY

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DECLARATION

I, Ida Percy Nansinjo, declare that this is my original work, done by myself and has never been submitted to this institution or any other institution for any academic award.

Signature

Date

APPROVAL

This work has been done under our supervision and is submitted for examination with our approval.

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Signature.....Date...../...../.....

Mr. Lazarus Nabaho

DEDICATION

This dissertation is dedicated to my dear mother Mrs. Phibby Kyewalyanga, beloved husband, Dr. Kenneth Mutesasira and our Children; Jonathan Kris Mutesasira, Johanna Isabel Luyiga and Joelle Sanyu Tendo.

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LIST OF ABBREVIATIONS

1. HR Human Resource
2. SPSS Statistical Package for Social Sciences
3. VIE Valency-Instrumentality-Expectancy

ABSTRACT

The purpose of the study was to investigate the relationship between rewards and performance of health workers at Mengo Hospital, Uganda. The problem of the study was that poor performance of health workers has been documented but there is a lack of evidence on what actually works to improve the performance of health workers. The objectives of the study were, to find out the perceptions of health workers towards the reward system, to determine the relationship between financial rewards and the performance of health workers and to find out the relationship between non-financial rewards and the performance of health workers. A cross-sectional research design was used during the study. 376 respondents within Mengo Hospital were targeted. A sample size of 111 health workers and five top management members was drawn. The 111 respondents were selected using the simple random sampling method while the five top management members were purposively sampled. Questionnaire-based survey and interview methods were used to collect data from the respondents. Both descriptive and inferential statistics were used in data presentation. The study revealed that the health workers of Mengo Hospital are not satisfied with the reward system. Findings also reveal a significant positive relationship between financial rewards and the performance of health workers; and a moderate positive relationship between non-financial rewards and the performance of health workers. A regression analysis indicates that both financial and non-financial rewards play a major role in determining health worker performance. The findings of the study reveal that rewards affect the performance of health workers. The recommendation from this study is that Mengo Hospital should focus on developing a comprehensive reward system, tailoring it to the needs of the employees and communicating it effectively to the health workers so that they will know what is due to them.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

The performance of health workers is determined by the quality of care patients receive. Quality of patient care is very important in any hospital setting or medical facility because it preserves life and minimizes mortality (Dieleman, Gerretsen, & Van der Wilt, 2009). Inadequate health worker performance is a very widespread problem (Rowe, Savigny, Lanata & Victoria, 2008). Dieleman, et al (2009), state “inadequate performance of health workers leads to inappropriate healthcare which in turn contributes to poor health outcomes, as people do not use services or they are mistreated when they do”. Dieleman et al (2009) also note “problems related to poor health worker performance have been documented in various articles and reports but there is a dearth of evidence on what actually works to improve health worker performance”. According to the Annual sector performance report 2009/2010 by Uganda’s Ministry of Health, inadequate quality of health care is reflected in the high number of maternal deaths which occurred in general hospitals during the financial year 2009/2010. The midterm review report by Uganda’s Ministry of Health for the financial years 2010/11 to 2014/15 indicated that there is a shortage of health workers and those available perform below expectation. The same report highlights that the health workforce crisis in the country is characterized by inadequate numbers and skills mix to effectively respond to health needs, low retention and motivation, inadequate performance and high rates of absenteeism.

The study examined the relationship between rewards and the performance of health workers in Mengo Hospital. Rewards in the study were conceived as the independent variable while performance of health workers was the dependent variable. Rewards were measured in form of financial rewards and non-financial rewards, while performance of health workers was measured in form of level of timeliness in drug administration, documentation of all procedures, timeliness in conducting patient reviews and timeliness in making the necessary interventions and health education provision to all patients that the health workers come into contact with. The study also investigated the perceptions of health workers towards the reward system and looked at the effectiveness of the reward system, fairness in the distribution of rewards, performance based rewards and timeliness in rewarding of deserving employees.

This chapter presents the background to the study, statement of the problem, purpose of the study, objectives of the study, research questions, research hypotheses, significance of the study, justification of the study and the scope of the study.

1.2 Background to the Study

Under background to the study, the historical background, theoretical background, conceptual background and contextual background are presented.

1.2.1 Historical Background

In the 1920s, Elton Mayo conducted experiments at the Hawthorne Works in Chicago, USA which were designed to study the effects of variations in working conditions on productivity (Bratton & Gold, 2007).

According to Bratton and Gold (2007), there was no clear relationship found between working conditions and productivity. As a result, the researchers developed concepts that might explain the factors affecting worker motivation and concluding that more than just economic incentive and the work environment motivated workers (Bratton & Gold, 2007).

The findings of those experiments have greatly contributed to organizational development in as far as human relations and motivation in the work place is concerned (Bratton & Gold, 2007). Bratton and Gold (2007) state that from these experiments, Mayo and his team concluded that there are several factors which affect an employee's productivity and these include; the need for recognition, security and a sense of belonging. He suggested that these are more important in determining workers' morale and therefore productivity than the physical conditions under which they work.

The study recognised that non-financial rewards such as recognition were also important in improving the productivity of the employees, (Bratton & Gold, 2007). Bratton and Gold (2007), note that Mayo's Hawthorne experiments emphasise the importance of meeting the social needs of the employees.

These social needs are in form of non-financial rewards. According to Bratton and Gold (2007), the Hawthorne findings did not disregard the importance of economic incentives but noted that

these are not enough and on top of these, there must be other factors such as recognition and social cohesion in order to improve the performance of workers.

According to Ivancevich (2010), the Hawthorne effect is as a result of the incorporation of non-financial rewards in the reward system of any organization. Ivancevich (2010) notes that making training available to improve skills, improve knowledge and help employees grow intellectually sends a signal to the employees that they are valued and the fact the company is perceived as showing an interest in its employees introduces the Hawthorne effect thus leading to improved productivity.

The studies pointed out the importance of social interaction and workgroups on output and job satisfaction (Ivancevich, 2010). Opportunities created by an organisation for their employees to interact freely and also operate in small work groups can be viewed as a form of non-financial reward that leads to improved productivity (Ivancevich, 2010). Beardwell and Holden (1998) emphasise that a sense of community and belonging as established by the Hawthorne experiments needed to be created and fostered by active managerial intervention through communication, participation and more attention to behavioural variables than simply the cash nexus and economic incentives of Fredrick Taylor.

1.2.2 Theoretical Background

The study utilised the Expectancy Theory which was developed by Vroom in 1964 and improved upon by Porter and Lawler in 1968 and its emphasis is on what an employee expects to receive from an organisation as a reward and the value of that reward to that employee but that also abilities as well as role perception are critical in employee performance. According to Armstrong (2009), the greater the value of a set of rewards and the probability of receiving those rewards, the greater the effort expended. If all other factors remain constant, it is more likely that the more effort an employee puts in, the more productive they are likely to be. Wilton (2013) noted that if an organisation has rewards that are valued by the employees, motivation is likely to occur therefore leading to increased productivity and therefore improved performance. A detailed discussion of this theory is given under the theoretical review under chapter two.

1.2.3 Conceptual Background

Rewards

Bratton and Gold (1994) define rewards as all forms of financial returns and tangible services employees receive as part of an employment relationship. Armstrong (2006) introduces the concept of total rewards and defines it as the combination of financial and non-financial rewards available to employees.

According to Armstrong (1999), reward is how people are rewarded in accordance with their value to the organisation. Byars and Rue (2008) define organisational rewards as all types of rewards both intrinsic and extrinsic that are received as a result of employment by the organisation. Bratton and Gold (2007) define rewards as all the monetary, non-monetary and psychological payments that an organisation provides for its employees in exchange for the work they perform.

Gilmore and Williams (2009) define rewards as interventions that are designed to meet the needs of individuals and can influence employee commitment and engagement. Wilton (2013), talks about other extrinsic motivational needs that can also be addressed through perks and benefits which he refers to as indirect pay. Wilton (2013), defines benefits as those things that are offered to all employees and are payments made in kind in addition to financial reward but which hold some financial and often status value.

According Mondy and Mondy (2010), indirect financial compensation also referred to as benefits consists of all financial rewards that are not included in the direct financial compensation. Armstrong (2006) defines benefits as elements of remuneration given in addition to the various forms of cash pay. Benefits therefore are a component of financial rewards since they have financial value attached to them. These definitions agree that in order for rewards to be meaningful and to produce the desired effect on the employee, they must have a totality perspective that is financial, non-financial, intrinsic and extrinsic. They also agree that the employment relationship must satisfy the employee through comprehensive reward for their effort.

The working definition for the study will be from (Bratton & Gold, 2007) who define rewards as all monetary, non-monetary and psychological payments that an organisation provides for its employees in exchange for the work they perform. This definition is appropriate because it focuses on both the financial and non-financial rewards and that they must be for the work performed by the employee.

According to Armstrong (2012), reward makes a positive impact on performance when it contributes to the development of a high performance culture, one in which the values, norms and HR practices of an organization combine to create a climate in which the achievement of high levels of performance is a way of life.

Rewards can be both in financial terms and non-financial terms. The financial rewards used in this study include; salary, leave transport, responsibility allowance, gratuity meals and medical treatment. The non-financial rewards that were explored include; training opportunities, recognition and promotions.

Performance

Armstrong (2009) defines performance as the achievement of quantified objectives. Bates and Holton (as cited in Armstrong, 1999), define performance as a multi-dimensional construct, the measurement of which varies depending on a variety of factors. Kane (as cited in Armstrong, 1999), defines performance as something that the person leaves behind and that exists apart from the purpose.

Bernadin (2006) defines performance as the record of outcomes produced on specified job functions or activities during a specified time period. Campbell (as cited in Armstrong, 1999), believes that performance is behaviour and should be distinguished from outcomes because they can be contaminated by system factors. Byars and Rue (2008) define performance as the degree of accomplishment of tasks that make up an employee's job.

Gilmore and Williams (2009), define performance as the ability of individuals, groups and organizations to achieve something that is desirable and is intended as a consequence of their actions. All these definitions recognize the fact that in performance there must be results which can be used to measure the said performance. It is important to note however that a definition of performance is incomplete if it does not incorporate both behaviours and results. Focusing on either behaviours or results leaves that definition incomplete. In view of the discrepancies noted in the above definitions, the definition of performance adopted for this study is from Brumbach (as cited in Armstrong, 1999) who defined performance as behaviours that emanate from the performer and transform performance from abstraction to action. This definition is appropriate

because it takes into consideration both aspects of performance, that is, behaviours of the employees as well as the results they produce.

1.2.4 Contextual background

Mengo Hospital is located in Rubaga Division in Kampala City. Founded in 1897 by the late Dr. Sir Albert Ruskin Cook under the Church Missionary Society, the 118 year old institution is the oldest in East and Central Africa. It has a population of 636 employees categorized into Medical Officers, Specialists, Nurses, Midwives, Allied Health Workers, Top Management and support staff. It is one of the major Private Not For Profit hospitals in Kampala that greatly contributes to the provision of health services to the people of Uganda. The hospital provides both in-patient and outpatient services. The hospital handles a minimum of 1000 out patients a day and its in-patient capacity is 300 beds. Mengo Hospital has the mandate to provide medical care to all classes of people but especially to the poor and most vulnerable. In these tough economic times, with little or no financial support from the Government of Uganda, it has become a continuous challenge to meet both the needs of the employees and the patients in a satisfactory manner. This coupled with the fact that being Private Not For Profit, the Hospital cannot charge the patients highly in order to meet the needs of the employees whose state of mind greatly affects the way they perform their duties. Despite this challenge, the affordability of the services provided means that the numbers that would go to Mulago National Referral Hospital are significantly reduced otherwise Mulago Hospital would be overwhelmed and therefore overstretched. It has to compete for patients with other Private Not For Profit hospitals but also with purely private hospitals. It is quite challenging for the Hospital to fairly reward her employees so that their performance is not compromised.

1.3 Statement of the problem

The Mengo Hospital reward system comprises of both financial and non-financial rewards. The financial rewards include a salary paid at the end of every month, professional fees for specialists, leave transport allowance provided annually when an employee is proceeding for annual leave, gratuity is paid for two types of appointment; (those with fixed term contracts receive gratuity at the end of the contract term which is usually three (3) years and those on permanent terms of employment are entitled to receive gratuity after serving a minimum of five (5) years). A Christmas voucher is given to each staff during the month of December. The non-financial rewards put in place by Mengo Hospital include career development programmes whereby some members of staff

are sent for further training at the cost of the Hospital and the Hospital also continues to pay their salary, medical treatment is provided to a member of staff as well as the spouse and up to four (4) biological children of 24 years and below, meals are provided to staff when on duty and supervisors are encouraged to recognize their outstanding staff whenever an opportunity presents itself. Employees seem to perceive the reward system of Mengo Hospital as unfair which could be contributing to the levels at which they perform.

Despite these initiatives, little is known about whether the rewards given by the Hospital have an impact on the performance of health workers. There are several pointers as observed in several management committee meetings (5th January 2010, 12th January 2010, 27th April 2010, 4th December 2013 and 27th November 2014) that quite a number of health workers are not performing their duties as they should. The issues highlighted include laxity of clinicians, reporting late for duty, disappearing from duty, prescription of drugs over the telephone without reviewing the patients, sleeping while on duty and many others. Several disciplinary actions such as warnings, terminations and suspensions among others have been taken against the offending individuals but they seem to have no impact. Unless something is done about the problem at hand, lives will continue to be put at risk, the reputation of the Hospital will suffer, the risk of litigation against the Hospital would increase, the number of patients who visit the Hospital would reduce and therefore sustainability will become difficult which might result into loss of jobs. There was no documentation on rewards and performance of health workers in Mengo Hospital which created a need for the study.

1.4 General Objective of the study

The study was intended to establish the relationship between rewards and performance of health workers.

1.5 Specific objectives of the study

The specific objectives of the study are:-

- a) To find out the perceptions of the health workers towards the reward system.
- b) To determine the relationship between financial rewards and the performance of health workers.

c) To find out the relationship between non-financial rewards and the performance of health workers.

1.6 Research Questions

a) What are the perceptions of health workers of about the rewards that they receive?

b) What is the relationship between financial rewards and the performance of health workers?

C) What is the relationship between non-financial rewards and the performance of health workers?

1.7 Hypotheses of the study

a) Health workers are satisfied with the rewards that they receive.

b) There is a strong positive relationship between financial rewards and the performance of health workers.

c) Non-financial rewards significantly influence the performance of health workers.

1.8 Conceptual Framework

The figure below shows the conceptual framework and attempts to show how the independent variable affects the dependent variable.

Independent Variable (IV)

Rewards

1) Financial Rewards

-Salary

-Leave Transport Allowance

-Responsibility allowance

-Medical treatment

-Meals

Dependent Variable (DV)

Performance of health workers

- Timeliness in drug administration
- Timeliness in conducting patient reviews
- Documentation of all procedures
- Timeliness in



Figure 1: *The relationship between rewards and performance of health workers. Adapted with modifications from Lalam (2013)*

The conceptual framework above illustrates how the independent variable affects the dependent variable. The framework attempts to show several factors that could determine the level at which Mengo Hospital health workers perform. Armstrong (2009), states that rewarding people fairly, equitably and consistently in accordance with their value to the organization is the concern of reward management. This implies that people should be rewarded according to their performance, in other words, the organization should be seen to attach value to the input of individual employees. Armstrong (1997) states that employee rewards are aimed at conveying the right message about what is important. He continues to note that employee rewards support the attainment of the organization's strategic and short term objectives by ensuring that it has the right skills, competences, commitment and a well-motivated workforce who will assist the organization improve its performance. Bratton and Gold (2007) note that reward practices stimulate a debate among academics and organizational leaders on the role that reward plays in achieving such substantive employee behaviours as task performance, flexibility, quality and commitment. This study has provided some answers regarding the impact of financial and non-financial rewards on the performance of health workers.

1.9 Significance of the study

Lewis et al (2003) noted for example a reward such as a weekend trip to exotic places may spur one person to greater performance especially for senior people more than a cash bonus yet the same may not be said for a junior person. This means that there is no one size fits all when it comes to employee rewards.

The study was therefore intended to throw light on what employees view as important to them so that the Hospital Management can focus on those as opposed to “rewarding” people in an unguided manner which will not be appreciated by the employees hence wastage of resources.

1.10 Justification of the study

Several authors have written about reward management and performance. Focus has been a lot on factories and other industries (Udiji 2013, Njanja et al 2013, Ajila & Abiola, 2004). Some studies have also been done about the health sector but none has come up with clear and implementable recommendations that can improve the performance of health workers and therefore quality of care (Lutwama 2011, Dielman et al. 2009). The fact that sufficient literature exists about the poor performance of health workers but there is lack of evidence on what actually works to improve health worker performance (Dieleman et al. 2009) created a need for the study. This study was intended to explore whether rewards influence the performance of health workers and to what extent and it was hoped that it would reveal the issues that are critical to Mengo Hospital health workers in order to improve the quality of care for the patients.

1.11 Scope of the study

The scope of the study will cover the content scope, time scope, geographical scope and also looks at the operational definitions.

1.11.1 Content Scope

The study investigated the relationship between rewards and the performance of health workers in Mengo Hospital. The rewards that were investigated included financial and non-financial rewards. The financial rewards investigated included salary, leave transport allowance, responsibility allowance, meals, sick pay, gratuity and medical treatment; the non- financial rewards included training opportunities, recognition, and promotions. Performance of health workers was measured in form of timeliness in drug administration, documentation of all procedures, timeliness in making

the necessary interventions, timeliness in conducting patient reviews and provision of health education. These performance measurements that were selected fairly cut across all medical disciplines. It had been generally observed though that not all staff adhered to them at all times.

1.11.2 Time Scope

The study looked at a period of six years of 2009 to 2014 because this is a fairly recent period with the likelihood that information availability and accessibility would be easier.

1.11.3 Geographical Scope

The study was an institutional study which took place in Mengo Hospital, Rubaga Division, Kampala, Uganda.

1.11.4 Operational definitions

Reward is defined as “all monetary, non-monetary and psychological payments that an organisation provides for its employees in exchange for the work that they perform”.

Performance refers to “behaviours that emanate from the performer and transform performance from abstraction to action”.

Health Worker refers to “a person whose job is to protect and improve the health of their communities”

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter reviewed related literature concerning rewards, reward management and employee performance as well as theories that have been developed in an attempt to explain the influence of rewards on employee performance. The literature review concentrated mainly on books that were written by different scholars on the subject of rewards and performance as well as different studies that have been carried out in the area of rewards and performance of employees in the workplace.

2.2 Theoretical review.

The study was guided by the Expectancy Theory.

Armstrong (2006), states that this theory was developed originally by Vroom in 1964 in the valency-instrumentality-expectancy (VIE). Armstrong (2006), continues to state that valency stands for value, instrumentality stands for the belief that if one does one thing it will lead to another and expectancy is the probability that action or effort will lead to an outcome.

Armstrong (2006), also states that (Porter & Lawler 1968) developed this theory into a model suggesting that two factors determine the effort people put into their jobs and these include the value of rewards to individuals in so far as they satisfy their needs for security, social esteem, autonomy and self-actualisation, and the probability that rewards depend on effort as perceived by individuals.

Armstrong (2009) notes that, the greater the value of a set of rewards and the higher the probability of receiving each of these rewards depends upon effort, therefore the greater the effort that will be expended in a given situation. Wilton (2013), emphasises the Expectancy theory position that motivation can only occur if an organization has rewards that are valued by the employees.

Armstrong (2009) reiterates Porter and Lawler's position that mere effort is not enough, it has to be effective effort in order to produce the desired performance and that the ability of the individuals in terms of intelligence, knowledge, skills and achievement as well as role perceptions are critical in determining how well an individual will perform their duties.

Armstrong (2012) notes that this theory is generally accepted as the leading theory on motivation and it is an important basis for explaining what motivates people to work. He continues to emphasise that it is important in making decisions on the design and management of contingent pay schemes and it is also used to measure the effectiveness of such schemes.

Armstrong (2012) however, says that evidence on the validity of the expectancy theory is very mixed which means that there are other factors which could influence employee performance other than those highlighted by the theory. Armstrong (2012) continues to note that the expectancy theory does not offer a universal explanation to employee performance because of individual differences in the approach to decision making, the circumstances in which a particular scheme operates and the impact of social forces on an individual.

Rue and Byars (1993), state that the expectancy theory is overly rational and that humans do not act as rationally as the theory assumes. Rue and Byars (1993) continue to say that the theory ignores impulsive and expressive behaviour.

Pinder (2008) emphasises that the expectancy theory assumes a high degree of rationality among employees yet people have limited cognitive capacities and that much of human behaviour is habitual and subconscious. Pinder (2008) states that, the model was developed by Lawler and Porter, basing on data collected from only managers and ignoring other categories of individuals whose information would have been relevant to the development of the model and also that the propositions which were tested were derived from their model cross-sectionally rather than over time and that such a practice causes over estimates of the validity of the model being tested. Pinder (2008) also highlights that pay was used as the focus and emphasis was upon positive consequences rather than both positive and negative consequences such as fatigue, demotions or various forms of punishment.

This was found to be a relevant theory to be used in the study as it attempts to explain the relationship between rewards and performance of employees. Its merits outweigh its demerits and since it attempts to explain the impact of rewards on performance, it was therefore a relevant theory for this particular study.

2.3 Financial Rewards and Performance of Health Workers

Mondy and Mondy (2010) define financial compensation (financial rewards) as pay that a person receives in form of wages, salaries, commissions and bonuses. Armstrong (2012) defines financial rewards as all rewards that have a monetary value and add up to total remuneration and they include base pay, pay contingent on performance, contribution, competency or skill, pay related to service, financial recognition schemes, and benefits such as pensions, sick pay and health insurance.

Decenzo and Robbins (2003) define financial rewards as those rewards that may enhance an employee's financial well-being directly and they include wages, bonuses, profit sharing among others. Wilton (2013) defines financial rewards as pay/earnings. Armstrong, (2012), notes that financial rewards should be used to recognize achievement. He emphasises that that they can also be used to highlight key performance areas, to indicate the behaviours that are valued and generally

to emphasise the importance of high performance. It is therefore generally agreed that financial rewards aim at improving an employee's wellbeing with the hope that this will translate into better performance.

The free enterprise system is based on the premise that rewards should depend on performance, (Byars & Rue, 2008). The primary organizational variable used to reward employees and reinforce performance is pay, (Byars & Rue, 2008). Money motivates behaviour when it rewards people in relation to their performance or contributions, when it is perceived as being fair and equitable, and when it provides rewards that employees truly value, (Bernardin, 2006).

Vroom (1970), the proponent of the Expectancy Theory states that, if an employee believes that a particular action will be followed by a particular outcome, their behaviour is likely to be affected negatively or positively. This means that if an employee believes that a certain level of performance will attract a certain reward and that reward is of value to that particular employee, he or she is likely to improve performance. Likewise if an employee believes that their behaviour will not be rewarded then performance will remain at the same level or it will drop. The expectancy theory suggests that there is a positive relationship between rewards valued by the employee and employee performance. This implies that the employer must understand which employees are motivated by which type of rewards in order to appropriately reward all employees.

Armstrong (1997), states that financial rewards can motivate and are a major means of ensuring that organisations achieve corporate objectives by motivating people to join the organisation, stay with it and deliver sustained levels of performance. This is true in the sense that before an employee joins an organisation, these are the elements that attract them to join the organisation and they form part of what keeps them in that organisation.

Njanja et al (2013) studied the 'Effect of Reward on Employee Performance' in a Power and Lighting Company in Nakuru, Kenya. The reward focused on by the study was cash bonuses only. The total target population was 84 including management and employees. A census study was used. Data was analyzed using the Statistical Package for Social Sciences (SPSS) and Chi-Square was used to establish the degree of the relationship between the two variables. The major findings of the study indicated that there is no significant relationship between cash bonuses and employee performance. The focusing on only one aspect of rewards means that all the other aspects of

rewards need to be studied in order to establish their relationship with the performance of employees. The researchers recommended for other components of rewards to be studied and establish their relationship to performance of employees. Including management in the study that focused on cash bonuses and employee performance had to bring out the findings it did because by the time an employee is part of the management, the pay is already higher than the rest of the employees and therefore, cash bonuses may not necessarily improve their performance, instead they could be motivated by other rewards other than money. In other words, the study population may not have been suitable for this particular study.

Ajila and Abiola (2004) investigated the 'influence of rewards on workers' performance, and focused their study on the employees of Central Bank of Nigeria, Abuja. The study split the rewards into intrinsic and extrinsic rewards with intrinsic rewards including such things as recognition, praise, responsibility, self-esteem among others and extrinsic rewards being pay. Using the simple random sampling method gave all elements of the study population an equal chance of being selected and therefore reduced bias during sample selection. The researchers however do not state the population size in order for one to determine whether the sample selected was representative of the population or not. The findings of the study were that there is a significant relationship between extrinsic rewards and workers' performance but there is no significant relationship between intrinsic rewards and workers' performance. This finding is kind of surprising given that emphasis has been made by literature about the importance of non-financial rewards in improving employee motivation and therefore performance. However, this finding is in line with (Lewis et al's, 2003) assertion that different people will rate the same reward differently depending on where they are, at a given point in time. According to this study, extrinsic factors which are mainly pay related were found to play a significant role in the performance of employees. This is in agreement with the findings of the study where financial rewards were found to play a significant role in the performance of health workers

Lalam (2013) investigated rewards and performance using a case of Caritas Gulu Archdiocese, Uganda. The findings of the study indicated that there is a moderate positive relationship between non-monetary rewards and performance and a very low positive relationship between monetary rewards and performance. The purposive sampling method that was used to select the respondents has a very high risk of bias and the researcher does not indicate how this was managed. The

possibility that there was bias in the selection of the respondents reduces the credibility of the findings. However, having observed that the total population of study was 60, and considering that the sample was 52 would minimize the errors and therefore increase the generalisability of the findings. The findings of this on the relationship between monetary and rewards and performance is in agreement with Herzberg's two factor theory of motivation but this may also depend very much on the environment and organization where the study was conducted. In an organization where staff are well paid, financial rewards may not be held in high regard by the employees, however, in an institution where employees are struggling to make ends meet, financial rewards may be highly valued. The findings of the study are contrary to Lalam's (2013) findings as they show a strong positive relationship between financial rewards and the performance of health workers.

Frontera (as cited in Lalam, 2013), noted that financial incentives alone are not enough to motivate employees, however, if employees feel that their inputs such as effort, commitment, loyalty, trust and enthusiasm to the organization are fairly rewarded by outputs such as financial and non-financial benefits, they remain motivated and continue to provide inputs towards higher performance.

Yamoah (2013) undertook an exploratory study on the relationship between rewards and Job Performance of teachers in Public Schools in Ghana. A case of the West Africa Senior High School within the Adenta Metropolitan area of Greater Accra Region of Ghana was selected and a sample of fifty (50) was selected by the researcher using the purposive sampling technique. The findings of the study were that there is a significant relationship between teachers' rewards and their job performance. It is questionable however, how representative a sample of 50 is to the general population of teachers considering that the total population out of which the sample was selected is not given. The sample appears to be too small and therefore not representative enough of the entire population of teachers. Using purely purposive sampling for such study means that issues of bias are highly probable and could not be avoided which puts doubt on the credibility of the findings. The other weakness of this study is that it does not specify which type of rewards influence performance and to what extent. Generalizing that all rewards spur employee performance may be misleading. The study would have been more comprehensive if it clearly

stipulated what motivates teachers and therefore leads to better performance and to what extent it improves performance.

Atuhairwe (2006) carried out a study on the effects of rewards on performance of employees in organizations and used a case of Compassion International-Uganda. The study findings were that pay and recognition were the most influential rewards that spurred employees to greater performance. This study revealed that a combination of financial rewards (pay) and non-financial rewards (recognition) are both crucial in influencing employee performance. This finding was in agreement with the findings of the study conducted among Mengo Hospital health workers which indicated that financial rewards play a crucial role in the performance of health workers as an increase in financial rewards leads to a corresponding increase in performance.

2.4 Non-Financial Rewards and Employee Performance

Mondy and Mondy (2010), define non-financial compensation (rewards) as the satisfaction that a person receives from the job itself or from the psychological and or physical environment in which the person works. According to Armstrong (2009), non-financial rewards are those rewards that do not involve any direct payments and often arise from the work itself. Armstrong (2012), defines non-financial rewards as those that focus on the needs people have to varying degrees for recognition, achievement, responsibility, autonomy, influence and personal growth. Decenzo and Robbins (2003) define non-financial rewards as things that do not necessarily increase an employee's financial position but they make an employee's life on the job more attractive. Wilton (2013) defines non-financial rewards as the psychological rewards that stem from the work itself such as the work environment, recognition, and promotions among others. Non-financial rewards include everything in a work environment that enhances a worker's sense of self-respect and esteem by others (Cascio, 1998). These definitions agree that non-financial compensation is about giving employees other things other than money which is important in motivating them and therefore improving their performance. For organisations to successfully motivate their employees and therefore improve performance, a component of non-financial rewards must be incorporated into the reward system.

Non-financial rewards are important in any organization. They are desirable extras that are at the disposal of the organization and they do not directly increase the employee's financial position but

make the job more attractive (Decenzo& Robbins, 2003). Decenzo and Robbins, (2003), note that different individuals are motivated by different non- financial rewards and getting the right non-financial reward for each individual employee increases performance to the organisation. Money is a powerful tool to capture the minds and hearts of workers and to maximize their productivity but the impact of non-financial rewards should not be underestimated (Cascio, 1998). Armstrong (1997) states that non-financial rewards are powerful motivators in themselves but can work even more effectively, if they are combined with financial rewards. Although (Decenzo & Robbins 2003), states that non-financial rewards do not directly increase the employees' financial position, it is important to note that some non-financial rewards such as promotions directly put an employee in a higher position where they earn more thus directly increasing their financial position.

The job itself such as job tasks, challenging and interesting job, praise and recognition are among the non-financial rewards that improve performance in organizations, (Laakso as cited in Lalam, 2013). Bellantin *et al*, (as cited in Lalam, 2013) noted that the purpose of non-financial incentives is to reward employees for performance through opportunities such as flexible work hours, training, pleasant work environment and sabbatical. Non-financial rewards such as advancement, autonomy, civilized treatment, employer commitment, work environment, exposure to senior people, praise, support, challenge, trust reliable organization and assignments remain the most important motivators of employee performance, (Beardwell et al, 2007).

Uduji (2013) carried out a study on how Non-Financial rewards could lead to Exceptional Performance of the Marketing Executives in the Banking Industry in Nigeria. The researcher did not clarify how the data was analyzed but he states that he used the Friedman Test Statistics to test the hypothesis that 'A variety of factors including job enrichment, recognition, promotion, encouragement and praise do not motivate Marketing Executives for exceptional performance in the banking industry in Nigeria'. The statistics of the study indicate that generally, there is a positive relationship between non-financial rewards and the performance of Marketing Executives in the banking industry in Nigeria. This is in agreement with a lot of literature as well as Herzberg's theory of motivation which identifies the non-financial rewards studied as satisfiers/motivators. The non-financial rewards explored by the study showed a positive relationship between them and the performance of Marketing Executives and this is in agreement with the findings of the study

as a positive but moderate relationship was discovered between non-financial rewards and the performance of health workers in Mengo Hospital, Uganda.

2.5 Summary of Literature Review

The literature review revealed that both financial and non-financial rewards are essential in improving the performance of employees in any organisation. However, the degree to which they are essential varies from organization to organization and from cadre to cadre. The need to create a balance between financial and non-financial rewards and tailoring it to the different cadres of staff cannot be overemphasised if performance of employees in any institution is to improve. The review also revealed that that no conclusion has been reached by all the studies carried out on reward and performance as to which reward mechanism is most important in influencing performance. As Dieleman et al (2009) stated, problems related to the poor performance of health workers have been documented, yet there is no sufficient evidence on what actually works to improve health worker performance. This therefore created the need for this study to be carried out among the health workers of Mengo Hospital. The study findings revealed that both financial and non-financial rewards play a very significant role in the performance of health workers.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

In this chapter, the approaches that were used to get information on the research problem are explained. It includes the research design, study population, sample size and selection, sampling techniques and procedures, data collection methods, data collection instruments, procedure of data collection, data analysis, measurement of variables and ethical considerations. It also states the problems that were encountered in the study.

3.2 Research Design

Amin (2005) defines a research design as the plan for carrying out a research project. Saunders et al (2012) state that a research design is the general plan of how one will go about answering their research questions. During this study, a cross-sectional research design was used. According to Babbie (2007), a cross-sectional study involves observations of a sample, or cross section, of a population or phenomenon that are made at one point in time. Data was collected from the selected sample at one point in time. This design was used to conduct the study because it is simple to use and is the least costly alternative (Neuman, 2011). The cross-sectional research design was the best for this kind of study because the study had to be completed within a short time so as to qualify for the award of a Master of Management Studies degree which must be completed within one academic year, (Ariko as cited in Biganja, 2013). Saunders et al (2012), add that because most academic courses are time constrained, cross-sectional studies are the most appropriate. The

quantitative data collection method was the main method used in the study although it was supplemented by the qualitative data collection method.

3.3 Study Population

A study population is the complete collection of all the elements that are of interest in a particular investigation (Amin, 2005). It is to this population that inferences from the study are to be made (Amin, 2005). In this study, the population was all health workers of Mengo Hospital who are directly involved in providing a service to the patients, in other words, the study focused on the frontline staff who actually handle patients and are licensed to do so as well as top management. The study population in this research was 371 employees which included medical doctors, nurses, midwives and allied health workers. Five (5) members of top management were purposively sampled to participate in the study bringing the total study population to 376. This information was derived from the Mengo Hospital Payroll as at 31st March 2015.

3.4 Sample Size and Selection

A sample is a small collection from a much larger collection or population which a researcher can study and produce accurate generalizations about the larger group (Neuman, 2011). Simple random sampling and purposive sampling techniques were used. Simple random sampling creates a sampling frame where each element in the population has a known and equal chance of being selected (Sekaran, 2003) whereas purposive sampling focuses on those elements who are particularly known to have the information that the study intends to collect (Amin, 2005). The sample size of the study was determined using Neuman's percentages. Neuman (2011) says that for populations below 1,000, the sample size should be about 30%. In this study, 30.8% was used to determine the sample size which translates into approximately 116 respondents as shown in the table below. The percentage used was slightly higher than 30% due to the purposive sampling of top management who are not necessarily part of the core medical team. The study focused on the health workers and top management members of the Hospital because the researcher felt that they were well placed and are more familiar with both the dependent and the independent variable and could offer valuable information on the subject under study.

Table 1: Sample Size and Selection

Category	Population	Sample size	Sampling technique
Medical Director	1	1	Purposive
Deputy Medical Director	1	1	Purposive
Human Resource Manager	1	1	Purposive
Finance Manager	1	1	Purposive
Principal Nursing Officer	1	1	Purposive
Health workers including Medical Doctors, Allied Health workers, Registered Nurses/Midwives, Enrolled Nurses/Midwives	371	111	Simple Random
TOTAL	376	116	

Source: Primary data

According to the table above, 30.8% of the population will participate in the study. Random sampling and purposive sampling techniques will be used to select the sample size.

3.5 Sampling Techniques and Procedures

The sampling techniques and procedures that were used in the study are presented below.

3.5.1 Purposive Sampling

This sampling technique is used to select unique cases that are especially informative about the topic under investigation (Neuman, 2011). The researcher specifically targeted hospital top management who were believed to be knowledgeable about the topic that was being studied. The researcher believed that they were in position to give dependable and detailed information about the topic under investigation. The qualitative method of data collection using interviews was used to collect data from this category of respondents. Interviews were conducted with the assistance of an interview guide for this category.

3.5.2 Simple Random Sampling

During the study, simple random sampling was used to select the sample on whom the study would be conducted. The simple random sampling technique is applied in order to have a manageable sample for the study (Amin, 2005). This method of sampling is advantageous because all elements in the population have a known and equal chance of being selected for the study (Sekaran, 2003), therefore a high generalisability of the findings to the study population (Sekaran 2003). Compared to all the other sampling techniques, random sampling is the best way to obtain a representative sample (Amin, 2005). The research therefore put all elements of the study population in a container and randomly picked the sample to participate in the study.

3.6 Data Collection Methods

Data was collected using two data collection methods, that is, the questionnaire survey and interviews.

3.6.1 Questionnaire Survey

This is a method whereby questionnaires are sent to the persons concerned with a request to answer the questions and return the questionnaire, (Kothari, 2001). This method was used because it is convenient, data was collected from the respondents within the same period of time and the target group was all literate and could fill the questionnaires with ease. Questionnaires were distributed to the sampled health workers who were given seven days within which to fill the required information after which the questionnaires were collected from them.

3.6.2 Interviews

An interview is an oral administration of a questionnaire or interview schedule, (Mugenda & Mugenda, 1999). This is a face to face interaction between the researcher and the respondent and it aims at obtaining accurate information from the respondent, (Mugenda & Mugenda, 1999). It is a research technique whereby a conversation is carried out between the researcher and the respondent for the purpose of obtaining certain information, (Amin, 2005). During the study, the researcher used this method to collect data from top management who were sampled purposively to participate in the study. Interviews were used in order to obtain detailed information on the variables under study.

3.7 Data Collection Instruments

Data was collected using the questionnaire and the interview guide.

3.7.1 Questionnaire

This is a research instrument for collecting data in line with the research questions and hypotheses (Amin,2005). It consists of a number of questions printed or typed in a definite order on a form or set of forms and the respondents have to answer the questions on their own (Kothari, 2001). Babbie (2007) defines a questionnaire as a document containing questions and other types of items designed to solicit information appropriate for analysis.

Questionnaires were used to collect data because it is a less expensive data collection method compared to other methods. They are filled at the respondent's convenience therefore increasing the chances of getting valid information respondents are assured of anonymity hence they can comfortably give all the necessary information, (Amin, 2005).

A close-ended self-administered questionnaire was used to collect data from the respondents. Close-ended questionnaires were used because they elicit specific answers which can be easily analysed and they take less time for both the researcher and the respondent, (Amin 2005). Close ended questionnaires are also easier to use because each item is followed by alternative answers from which the respondent can choose (Mugenda & Mugenda 1999).

Considering that this is an academic research with limited time within which data had to be collected, the questionnaire was found to be an appropriate tool since the questionnaires could be distributed to the respondents at the same time and then collected at the same time, therefore, data

could be collected within a short period of time. Questionnaires were also used because the target population of health workers is a literate population and could fill the questionnaires with ease (Muganyizi, 2013).

3.7.2 Interview Guide

This is a tool that is used for interviewing respondents. Interviewing is a method of data collection through which a researcher obtains information from the respondents by face to face interaction or via telephone (Mugenda & Mugenda 1999). According to Mugenda and Mugenda, (1999), interviews are advantageous because they provide in-depth data, it is possible to obtain information that meets specific objectives of the study, clarity can be made in case the respondent gets confused, provide an opportunity for probing hence getting more information and interviews yield a relatively high response rate. For this particular study, conducting interviews using an interview guide assisted the researcher in getting accurate information from the people directly responsible for rewarding employees and to determine whether they think that enough is being done in rewarding their employees.

Creswell (as cited in Muganyizi, 2013) recommends the interview guide as a tool which allows one to provoke high discussion hence getting a detailed account of the variables under study and the response rate is also likely to be higher than where questionnaires are going to be used hence increasing the validity and reliability of the data that is to be collected. Interviews were used to collect information from top management and they provided detailed information which could not be got from questionnaires.

3.8 Validity and Reliability

The validity and Reliability of the data collection instruments was ensured using both the Content Validity Index and the Cronbach Alpha Formula.

3.8.1 Validity

Validity refers to the accuracy and meaningfulness of inferences which are based on the research results (Mugenda & Mugenda 1999). Amin (2005), states that a research instrument is said to be valid if it measures what it is supposed to measure. Gravetter and Forzano (2009), add that the validity of a measurement procedure is the degree to which the measurement process measures the variable it claims to measure. In this study, the validity of the instruments was determined using

the Content Validity Index. The interview guide and questionnaire were given to three experts to determine their relevance to the study. The number of questions that were ticked as relevant were added together divided by the total number of questions in each category. The Content Validity Index was computed using the following formula;

$$CVI = \frac{\text{Number of items regarded relevant}}{\text{Total number of items}}$$

Total number of items

Where;

CVI = Content Validity Index

n = number of items indicated relevant

N = total number of items in a questionnaire

Below is the average total number of questions ticked relevant by the experts divided by the total number of questions in the instruments;

3.8.1.1 Questionnaire

The questionnaire had 32 items in total starting from the demographic information. The experts ratings were as follows

1. The first ticked 30 questions out of 32 as relevant ones and 2 as irrelevant.
2. The second one ticked 30 questions out of 32 as relevant and 2 as irrelevant.
3. The third ticked 32 out of 32 questions as relevant.

The CVI was calculated as follows;

$$CVI = \frac{(30+28+32)}{3} = 30.7. \text{ This implies that } 30.7/32 = 0.95 = 95\%$$

According to Amin (2005) a CVI of 0.7 means that the instrument will collect valid data. The CVI for the instruments in this study is 0.95 which indicates that the questionnaires will collect valid data in the study.

3.8.1.2 Interview Guide

The interview guide had 7 questions and the results were as follows;

1. The first expert ticked 6 out of 7 questions as relevant and 1 as irrelevant
2. The second ticked 5 out of 7 questions as relevant and 2 as irrelevant
3. The third ticked 6 questions out of 7 as relevant and 1 as irrelevant

The CVI was determined as follows;

$$CVI = \frac{6+5+6}{3} = 5.7 \text{ Implying that } \frac{5.7}{7} = 0.81 = 81\%$$

This is also in line with the assertion of Amin (2005) who said that a CVI of 0.7 means the instrument will collect valid data. A CVI of 0.81 in this case means that the interview guide will collect valid data.

3.8.2 Reliability

In order to ensure the reliability of the instruments in this study, a pilot study was conducted using the internal consistency method to pretest the instrument through utilization of the CRONBACH Alpha Coefficient formula. The questionnaires were pre-tested by 10 people.

The data collected was analysed using the SPSS which provided important information. The overall coefficient was calculated in order to establish the reliability of the questionnaire as an instrument.

Table 2: The Reliability Index

Variable	Reliability Index
Financial Rewards	0.912
Non-financial Rewards	0.824
Performance of Health Workers	0.623
Overall reliability	0.79

Source: Primary data

The reliability results for the different individual items were; Financial rewards (0.912), Non-financial rewards (0.824) and Performance of Health Workers (0.623). The resultant reliability coefficient was found to be 0.79. Nunnally (as cited in Biganja, 2013) says that a value of Cronbach's alpha of 0.5 and above is consistent with the minimum recommended values as a measure of reliability of internal consistency. A further recommendation by Nunnally (as cited in Biganja, 2013) is that a cronbach alpha coefficient of 0.6 is the minimum acceptable level of reliability test. Since the resultant reliability coefficient of 0.79 is above 0.6, the interview guide was found to be a reliable instrument for this study.

3.9 Data Collection Procedures

The Self-administered questionnaires were given to the selected sample of one hundred eleven (111) respondents. Interviews were also conducted with 4 respondents all from top management. An interview guide was used with structured questions to ensure that the same questions were subjected to the respondents and the responses were written down by the researcher.

3.10 Data Processing and Analysis

The data that had been collected was edited to eliminate all possible errors. The data from the returned questionnaires was put in categories according to the conceptual framework and more editing was done to ensure completeness and accuracy. The questionnaires were coded and assigned numbers. This was manually done. After the manual numbering and coding, the same was repeated using the SPSS (Statistical Package for Social Sciences) application. The data was entered and analysed using the SPSS which generated relevant information for the study. The information was generated in form of correlations, regression, coefficients and descriptive statistics. The information from the SPSS is presented in form of percentages and frequencies, as well as the mean, Pearson's correlation coefficient and standard deviation. The mean assisted in determining the overall trends and the standard deviation was an important item in assisting the researcher to determine how the individual items deviated from the mean. Pearson's Correlation Coefficient was used to determine the relationship between rewards and the performance of health workers in Mengo Hospital.

3.11 Measurement of Variables

In this study, measurement of variables was conducted using three scales which included nominal, ordinal and interval as guided by Sekaran (2003). Descriptive statistics was used to analyse the data using the SPSS application. The variables that were studied in this research were rewards as the independent variable and performance of health workers as the dependent variable. The questionnaire was arranged with responses in a five point interval scale of Strongly Agree (5), Agree(4), Not Sure(3), Disagree(2) and Strongly Disagree(1) in that order.

3.12 Ethical Considerations

According to Amin (2005), ethics refers to well based standards of right and wrong that prescribes what humans ought to do, usually in terms of rights, obligations, benefits to society, fairness or specific virtues. According to De Vos et al (as cited in Lutwama 2011), ethics refers to preferences that influence behaviour in relations. Bordens and Abbott (2008), state that as part of ethical considerations, a research proposal must be reviewed to make sure that the safety, well-being, dignity and rights of the participants are protected. In other words, ethics refers to the acceptable way of doing things.

During this research, the consent of the institution was sought by presenting to the Medical Director a letter introducing the researcher from Uganda Management Institute seeking permission to be allowed to carry out the study at the Hospital. The Medical Director granted the researcher permission conduct research at the Hospital, however, she was referred to the Mengo Hospital Research Review Board for ethical clearance. Individual letters were given to the respondents introducing the researcher, explaining the purpose of the study, what was required of them in terms of participation and seeking their consent to participate in the study. The researcher ensured that no harm is done to the subjects in this study as all respondents remain anonymous. Data collected was handled with confidentiality and codes were used instead of names.

CHAPTER FOUR

PRESENTATION, ANALYSIS AND INTERPRETATION OF RESULTS

4.1 Introduction

This chapter presents the analysis and interpretation of findings regarding rewards and performance of health workers. The chapter is presented according to the study objectives.

4.2 Response Rate

Table 3: Response Rate

Category of Respondents	Sample	Questionnaires distributed	Questionnaires returned/total interviews done	Response rate
Health Workers	111	111	96	
Key Informants	5	-	4	
	116		100	86.2%
Response rate				86.2%

Source: Primary data

According to table 3, 111 questionnaires were distributed to the health workers. A total of 96 questionnaires were returned and four out five of interviews conducted indicating an overall response rate of 86.2%. Mugenda and Mugenda (1999), states that a response rate of 60% is good and a response rate of 70% and over is very good. Since this study yielded a response rate of 86.2%, it is very good and therefore the findings from this study can be generalized to the study population.

4.3 Demographic Characteristics of the Respondents

Under this section, the demographic characteristics of the respondents are presented.

4.3.1 Gender of the Respondents

The table below shows the gender distribution of the respondents who participated in the study.

Table 4: Gender of Respondents

Gender	Frequency	Total
Male	20	20.8
Female	76	79.2
Total	96	100

Source: Primary data

The table above shows that 79.2% of the respondents were female and 20.8% of the respondents were male. This implies that more female are employed than their male counterparts.

4.3.2 Age of Respondents

The table below shows the age of the respondents who participated in the study.

Table 5: Age of Respondents

Age	Frequency	Total
20-29	48	50
30-39	33	34.4
40-49	11	11.5
50+	4	4.2
Total	96	100

Source: Primary data

Table 5 above shows the age of respondents and 50% were aged between 20-29 years, followed by 34.4% who were aged between 30-39 years whereas 11.5% and 4.2% were aged between 40-49 years and above 50 respectively. The percentages indicate that majority of the health workers in Mengo Hospital are young and energetic and can therefore effectively perform their roles.

4.3.3 Marital status of the Respondents

The table below shows the marital status of the respondents who participated in the study.

Table 6: Marital Status of the Respondents

Status	Frequency	Total
Married	55	57.3
Single	41	42.7
Widowed	-	-
Divorced	-	-
Total	96	100

Source: Primary data

Respondents also provided information about their marital status and 55 (57.3%) were married whereas 41 (42.7%) were single and none was widowed or divorced. The findings implied that majority of health workers or staff at Mengo Hospital are married. This also means that their being married implies that they are more stable on their jobs and could also have a strong attachment to the institution and are concerned about how they are rewarded given the responsibilities that go hand in hand with marriage.

4.4.4 Category of Respondents

The table below shows the categories of health workers who participated in the study.

Table 7: Category of Respondents

Category	Frequency	Total
Medical doctor	9	9.4
Registered Nurse/Midwife	34	35.4
Enrolled Nurse/Midwife	38	39.6
Allied health worker	15	15.6
Total	96	100

Source: Primary data

Since the study was about the rewards and the performance of health workers, the different categories of health workers participated in the study as follows; 39.6% were Enrolled Nurses/Midwives, followed by 35.4% who were Registered Nurses/Midwives whereas 15.6% and 9.4% were Allied Health Workers and Medical Doctors respectively. The findings above implied that majority of Mengo Hospital health workers are Enrolled and Registered Nurses/Midwives. The findings also mean that Mengo Hospital employs very few doctors and Allied Health Workers compared to the nurses.

4.4.5 Length of Service of Respondents

The table below shows how long the respondents have worked for the hospital.

Table 8: Length of Service of the Respondents

Length	Frequency	Total
Less than 1 year	15	15.6
2-4 years	31	32.3
5-7 years	17	17.7
8+ years	33	34.4
Total	96	100

Source: Primary data

Respondents were also asked to state their length of service at Mengo Hospital and 34.4% mentioned that they had served at the Hospital for more than 8 years, followed by 32.3% who had served at the hospital for a period between 2-4 years whereas 17.7% and 15.6% had served at the hospital for a period between 5-7 years and less than 1 year respectively. Since majority had served the Hospital for a considerably longer period, it implied that they had witnessed the different changes that have taken place in the rewarding system of the Hospital over a number of years and therefore would be in position to effectively provide information on how financial and non-financial rewards impacts on their performance.

4.4 Perceptions Towards Rewards

The table below shows how the rewards at Mengo Hospital are perceived by the health workers.

Table 9: Perceptions Towards Rewards

Statement on perceptions towards rewards	SA	A	NS	D	SD
The Hospital has an effective reward system	5(5.2%)	18(18.8%)	25(26%)	26(27.1%)	22(22.9%)
Rewards are fairly distributed to all deserving employees	2(2.1%)	13(13.5%)	34(35.4%)	24(25%)	23(24%)
Rewards are based on performance	6(6.3%)	13(13.5%)	26(27.1%)	26(27.1%)	25(26%)
Deserving staff are rewarded in a timely manner	4(4.2%)	17(17.7%)	27(28.1%)	19(19.8%)	29(30.2%)

Source: Primary data

The respondents' perception towards rewards was one of this study's areas of interest and 50% revealed that the Hospital does not have an effective reward system whereas 26% were not sure and only 24% agreed with the statement that Mengo Hospital has an effective reward system. Majority of the respondents (49%) disagreed with the statement that rewards are fairly distributed to all deserving employees with 35.4% not sure and 15.6% agreed meaning that they concur with the statement that rewards are fairly distributed to all deserving employees at Mengo Hospital. These findings implied that Mengo Hospital does not have an effective reward system and rewards are not fairly distributed to all deserving employees something that may be detrimental to the performance of health workers as reflected by majority of the respondents.

Furthermore, 53.1% disagreed with the statement that rewards are based on performance with 27.1% not sure and 19.8% in agreement with the statement whereas 50% also disagreed with the statement that deserving staff are rewarded in a timely manner though 28.1% were not sure and

21.9% agreed with the statement. The above findings implied that rewards at Mengo Hospital are not based on performance and deserving staff are not rewarded in a timely manner.

During interviews when a member of top management was asked whether Mengo Hospital has a comprehensive reward system and if so what it entails, he said;

All hospitals today need a strategic reward system for health staff and this must address mainly four areas of compensation, benefits, recognition and appreciation. This is what Mengo Hospital today has endeavoured to do by involving all these dimensions such that workers perform in line with the Hospital's corporate strategies. The Hospital is making every effort to ensure that rewards are fairly distributed to ensure that performance of health workers is always improving.

The message above means that Mengo Hospital considers rewards as important in influencing the performance of health workers and this is why they are trying to do everything possible in order to ensure that staff are satisfied with the rewards that they receive.

Another top manager at Mengo Hospital when asked the same question as above also said;

At Mengo Hospital, we take rewards seriously as rewards give direction to employee behavior and greatly influence performance. Components of both financial and non-financial rewards exist with the aim of improving performance.

The findings from the interviews above however contradicted with majority of the respondents because they revealed that the reward system at Mengo Hospital is neither effective nor fair to all those health workers who deserve being rewarded. This variation in thinking could be either because the health workers are not aware of the rewards available to them or they do not value what the employer is offering in form of rewards but because the key informants are the ones distributing these rewards, they are more informed. The two types of respondents seem to be operating from different angles all together.

4.5 Job Performance among Health Workers

The table below shows the findings of the study on job performance among Mengo Hospital health workers.

Table 10: Job Performance among Health Workers

Statement on job performance	SA	A	NS	D	SD
I attend to all patients under my care in a timely manner	43(44.8%)	48(50%)	1(1.0%)	4(4.2%)	-
I administer all patient drugs as per instructions	51(53.1%)	39(40.6%)	6(6.3%)	-	-
I conduct all patient reviews in a timely manner	41(42.7%)	46(47.9%)	5(5.2%)	3(3.1%)	1(1.0%)
I document all procedures done on each patient	46(47.9%)	46(47.9%)	2(2.1%)	1(1.0%)	1(1.0%)
I make timely interventions on patients whenever there is need	37(38.5%)	54(56.3%)	3(3.1%)	1(1.0%)	1(1.0%)
I health educate all the patients under my care	33(34.4%)	55(57.3%)	6(6.3%)	1(1.0%)	1(1.0%)
I attend to all my patients in a friendly manner offering good customer care to each of them.	54(56.3%)	40(41.7%)	-	1(1.0%)	1(1.0%)
I give relevant information to patients and their attendants as and when requested	49(51%)	42(43.8%)	2(2.1%)	3(3.1%)	-

Source: Primary data

Respondents were also asked to rate their levels of job performance and majority (94.8%) agreed and noted that they attend to all patients under their care in a timely manner with only 4.2% disagreeing that they don't attend to their patients in a timely manner but eight percent of them were not decided about the statement. More so, 93.7% agreed to the statement that they administered all patient drugs as per instructions with 6.3% remaining undecided about the

statement. The findings above implied that the health workers at Mengo Hospital ensure that they attend to their patients in a timely manner and administer drugs as per the instructions given. These findings indicate that there could be good performance among the health workers of Mengo Hospital.

One respondent in an interview when asked to comment about the performance of health workers in Mengo Hospital stated;

Some departments don't understand the meaning of emergency, there is frequent breakdown of equipment and delays in repairing these equipment therefore causing delays and frustration hence depicting low performance levels in some instances but generally, the performance of our health workers is good not forgetting of course some few elements whose performance is not good.

The comment above implies that there are circumstances in the Hospital which sometimes make health workers fail to perform as expected but the findings show a general impression that irrespective of the challenges, the health workers endeavour to perform their duties as expected. This is also in agreement with the responses from the data which was quantitatively collected.

The study findings also revealed that health workers at Mengo Hospital conduct all patient reviews in a timely manner as noted by 90.6% response with only 4.2% disagreeing and 5.2% were not sure about this statement. More so, 95.8% noted that they document all procedures done on each patient with only with two percent and 2.1% disagreeing and not decided about this statement respectively. The findings implied that health workers in Mengo Hospital ensure that they conduct regular patient reviews in a timely manner and they also fully document the procedures done on each patient. These therefore are some of the key duties of health workers and if the respondents perform these tasks as required, it shows that they are performing their duties effectively which can lead to improved quality of care.

Another top management respondent when asked to comment about the performance of health workers in Mengo Hospital stated;

Those that are paid according to work done generally perform better while those who receive a flat salary at the end of the month are not motivated to work harder which affects their overall performance.

The comment above means that performance related reward motivates employees to perform since salaries become a normal occurrence to the employees and they don't push them towards higher levels of performance.

In addition to the above, 94.8% of the respondents noted that they make timely interventions on patients whenever there is need while two per cent and 3.1% disagreed and were undecided respectively. Majority (91.7%) of the respondents also agreed with the statement that they health educate all the patients under their care with only two per cent failing to take time to educate their patients and 6.3% were not sure. The findings above therefore implied that health workers in Mengo Hospital make timely interventions on patients whenever there is need and they also take time to health educate those under their care regarding matters of health as well as general treatment and care.

Another key informant when asked to comment about the performance of health workers said;

In areas where there is new leadership, the performance has greatly improved as staff is closely supervised and therefore they perform their duties as expected or at least closer to what is expected but in areas where leadership has not changed, performance of those health workers is lacking.

The message above implies that good leadership in any work setting Mengo Hospital in particular provides a great boost to employee's ability to perform as expected and if this leadership is complemented by better rewards, employees perform even better.

It was also revealed that 98% agreed with the statement that they attended to all their patients in a friendly manner offering good customer care to each of them but two per cent were in disagreement with the statement meaning that they don't attend to all their patients in a friendly manner and not

offering good customer care to the patients. More so, 94.8% agreed to the statement that they give relevant information to patients and their attendants as and when requested but 2.1% disagreed and 3.1% were not decided about the idea. The findings implied that health workers at Mengo Hospital do their best and offer services in a friendly manner by providing relevant information to patients and their attendants whenever requested.

4.6 Financial Rewards and Performance of Health Workers

The following table shows the responses given by the sampled health workers regarding financial rewards in Mengo Hospital.

Table 11: Financial Rewards and Performance of Health Workers

Statement on financial rewards	SA	A	NS	D	SD
Staff receive their salaries in a timely manner	54(56.3%)	31(32.3%)	3(3.1%)	5(5.2%)	3(3.1%)
Employees are paid their salaries as agreed in their appointment letters	35(36.5%)	41(42.7%)	11(11.5%)	5(5.2%)	4(4.2%)
Payment is in line with my tasks	3(3.1%)	26(27.1%)	18(18.8%)	29(30.2%)	20(20.8%)
Mengo Hospital provides regular salary increments	4(4.2%)	4(4.2%)	13(13.5%)	26(27.1%)	49(51%)
The salary I get meets all my basic needs	4(4.2%)	5(5.2%)	3(3.1%)	26(27.1%)	58(60.4%)
Employees with higher academic qualifications get a higher pay	4(4.2%)	22(22.9%)	28(29.2%)	17(17.7%)	25(26%)
Employees in higher positions get a higher pay	23(24%)	28(29.2%)	29(30.2%)	6(6.3%)	10(10.4%)
Employees with extra responsibilities receive a	8(8.3%)	6(6.3%)	38(39.6%)	15(15.6%)	29(30.2%)

responsibility allowance for the additional role					
Employees receive leave transport allowance	5(5.2%)	23(24%)	16(16.7%)	17(17.7%)	35(36.5%)
All employees receive gratuity at the end of their employment contract with the Hospital	8(8.3%)	16(16.7%)	47(49%)	12(12.5%)	13(13.5%)
Good quality meals are provided to all Mengo Hospital employees	7(7.3%)	25(26%)	9(9.4%)	33(34.4%)	22(22.9%)
Mengo Hospital provides medical treatment to all employees and their immediate dependents	43(44.8%)	38(39.6%)	7(7.3%)	4(4.2%)	4(4.2%)
Employees who fall sick and are off work continue to receive pay until they recover	32(33.3%)	31(32.3%)	22(22.9%)	9(9.4%)	2(2.1%)

Source: Primary data

Regarding financial rewards and performance of health workers at Mengo Hospital, 88.6% agreed with the statement that staff receive their salaries in a timely manner whereas 8.3% disagreed, 3.1% were not decided about the statement. More so, 79.2% of the respondents agreed with the statement that employees are paid their salaries as agreed in their appointment letters with 9.4% disagreeing and 11.5% not sure about the same statement. These findings implied that employees at Mengo Hospital receive salaries in a timely manner and they are also paid as agreed in their respective appointment letters. This can therefore result into an increase in motivation and overall performance of the health workers at the Hospital.

In an interview, a top management member when asked about the forms of financial rewards available in the Hospital and how they influence performance said;

There are several financial rewards given to the health workers including salaries, overtime allowance, lunch allowance where applicable, professional fees, out of pocket allowance in case one has to work outside the hospital and financial contribution towards bereaved members of staff among others. Monthly salaries do not influence performance positively because it is more of a routine and an entitlement but these allowances make health workers improve performance because of increased levels of motivation.

The comment above implied that Mengo Hospital does provide various forms of financial rewards to its health workers although salaries have less influence on performance because they are routine than other forms of financial rewards.

Worth noting is that 51% of the respondents disagreed with the statement that their payment is in line with their tasks though 30.2% agreed and 18.8% were not sure about the statement. Majority of the respondents (78.1%) disagreed with the statement that Mengo Hospital provides regular salary increments with 8.4% agreeing and 13.5% not sure about the same statement. The findings above implied that health workers at Mengo Hospital don't receive payments in line with their tasks and they are not provided with regular salary increments. This may however act as a demotivator towards health workers and may therefore negatively affect the levels at which they perform.

The findings on financial rewards further revealed disagreement with the statement that the salary health workers receive at Mengo Hospital meets all their basic needs as shown by 87.5% response but 9.4% agreed with the statement and 3.1% were not decided about the statement. Relatedly, 43.7% of the respondents disagreed with the statement that employees with higher academic qualifications get a higher pay but 27.1% agreed and 29.2% were not decided about the statement. The findings also showed that 53.2% of the respondents agreed with the statement that employees in higher positions receive higher pay, while 30.2% were not sure and 16.7% disagreed with the statement. These findings implied that health workers at Mengo Hospital are generally not satisfied with the financial rewards that they receive since they can hardly meet all their basic needs and not even match with their qualifications.

Another key informant when asked about how financial rewards influence performance of health workers said;

Financial rewards like professional fees and overtime allowances positively influence the performance of those who get it because they are linked to actual work done but those who do not receive may become demotivated because of feelings of unfairness in distribution of the rewards. The same respondent also highlighted that if salaries are paid on time, health workers will duly report for work and perform their duties with commitment. Out of pocket allowances give them a sense of belonging since they feel the institution cares about them which motivates them to work and harder.

The comment above implies that distribution of financial rewards needs to be seen to be fair because once it is given to sections of employees, it actually demotivates their counterparts leading to a decline in their overall performance. The interview also means that it is a good practice to pay salaries on time because they make employees commit to their employer which increases performance levels. It also implies that there are certain forms of financial rewards that increase employee commitment because they create a sense of belonging in the employee. The response is also a clear indicator that in order for financial rewards to be effective, they must be directly linked to performance if they are to create a positive impact. The issue of prompt payment of salaries also need not be underestimated as it could raise the levels of commitment in employees and hence positively influence performance.

A good number of respondents disagreed with the statement that employees with extra responsibilities receive a responsibility allowance for the additional role as revealed by 45.8% response but 39.6% were not sure about this and only 14.6% agreed with the statement. The study findings above implied that a minimal number of health workers is aware about the existence of responsibility allowance as majority either disagree with its being received by those with extra responsibility and a significantly high number not being sure whether it is actually received.

While commenting about the issue of responsibility allowance, a key informant said;

Rewards like responsibility allowances are available for those who have been assigned extra responsibilities and they play a major role in the performance of such employees.

This response was also mentioned by several other key informants, however, it is not in agreement with the data quantitatively collected as majority of the respondents either deny that it is received or are not aware of its existence. This indicates that the Hospital Management Team and the health workers are not on the same page when it comes to the issue of responsibility allowance. This could be because either it is selectively given or employees are given additional responsibilities without any corresponding rewards.

Majority of the respondents (54.2%) expressed disagreement with the statement that employees receive leave transport allowance but 29.2% agreed with the statement. Only 16.7% were not decided about the statement. A big number of respondents (49%) indicated that they were not sure whether all employees receive gratuity at the end of their employment contract with the Hospital but only 25% agreed with the statement and 26% disagreed with the statement. The findings above meant that majority of the health workers at Mengo Hospital may not be aware about the provision of leave transport allowance by the Hospital. A fairly large number of health workers also indicated that they were not aware about the provision of gratuity by the Hospital at the end of an employment contract. Ignorance by staff about the presence of such rewards does not improve their motivation yet if they knew about the existence of such, they could be motivated to work harder and better.

A top management respondent while commenting about financial rewards and how they influence performance said;

Although leave transport is one of the financial rewards provided by the Hospital to the staff, it would be a motivator only if the amounts were significant but currently it is so meagre that it is hardly felt by the staff and can therefore not improve staff motivation.

This statement by a senior member of staff explains why majority of the respondents are not aware about the existence of leave transport allowance. It could be the same issue with gratuity. The interview means that leave transport allowances can play a significant role in enhancing employee performance but it should however be noted that this allowance should be significant enough to influence employees to actually consider it viable if it is to positively influence health worker performance.

Regarding the meals, 57.3% were in disagreement with the statement that Mengo Hospital provided good quality meals to its employees but 33.3% agreed with the statement and only 9.4% were not decided. Majority of the respondents (84.4%) agreed with the statement that Mengo Hospital provides medical treatment to all employees and their immediate dependents and only 8.4% disagreed with the statement and 7.3% were not sure about the statement. Relatedly, 65.6 % of the respondents agreed with the statement that employees who fall sick and are off work continue to receive pay until they recover as shown 65.6% by response with 11.5% disagreeing and 22.9% not being sure. The findings above implied that Mengo Hospital provides poor quality meals for the employees but an overwhelmingly big response confirmed that the Hospital provides medical treatment for both the employees and their dependants and employees who fall sick are assured of their pay until they recover. The quality of meals provided by the Hospital could have a significant negative impact on the levels of performance of health workers. However, the fact that the Hospital provides medical treatment for staff and dependents and also continues to pay off sick employees until they recover could make up for any bad feelings about the poor quality of food and could compensate for any negative impact on performance hence leading to improved health worker performance.

A top management member during the interview while commenting about the financial rewards available and how they influence performance, said;

The Hospital provides free meals and free medical treatment and these rewards are intended to make the staff stay at work during meal times and reduce medical costs in case of sickness respectively. This therefore makes health workers certain that even if they run out of money, they are assured of meals at the Hospital

and free medical treatment, which is a motivator to perform diligently at work.

The findings above mean that the provision of meals and medical treatment saves employees' money that would have been diverted to buying food and paying for health care which gives the health workers a certain degree of comfort and therefore, this acts as a motivation for the health workers and thus makes them offer their best for the best of the hospital.

Correlation between Financial Rewards and Performance of Health workers

The table below shows the correlation between financial rewards and the performance of health workers.

Table 12: Correlation between Financial Rewards and Performance of Health Workers

		Performance of Health workers	Financial rewards
Performance of Health workers	Pearson Correlation	1	.840**
	Sig. (2-tailed)		.000
	N	96	96
Financial rewards	Pearson Correlation	.840**	1
	Sig. (2-tailed)	.000	
	N	96	96

** . Correlation is strong at the 0.01 level (2-tailed).

The study used Pearson correlation coefficient to establish the relationship between financial rewards and performance of health workers. The analysis found out that there is a positive (0.840**) and strong (0.000) relationship between financial rewards and performance of health workers at Mengo Hospital, Uganda. The relationship is statistically significant at 95% confidence level (2-tailed) as the p-value is less than 0.025 (=0.000). The findings implied that an increase in

financial rewards automatically leads to a corresponding increase in the performance of health workers at Mengo Hospital. This therefore calls for the acceptance of the hypothesis that there is a strong positive relationship between financial rewards and the performance of health workers in Mengo Hospital.

Generally, from the information collected both qualitatively and quantitatively, there seems to be agreement that the financial rewards provided by the Hospital are not adequate and therefore something needs to be done to improve the situation. But also it has been generally agreed by the findings both qualitatively and quantitatively that financial rewards which are linked to performance have a much better effect on performance than those which are not.

4.7 Non-Financial Rewards and Performance of Health Workers

The following table shows the responses given by the sampled health workers regarding non-financial rewards in Mengo Hospital.

Table 13: Non-Financial Rewards and Performance of Health Workers

Statements on Non-financial rewards	SA	A	NS	D	SD
There are career development opportunities for all health workers in Mengo Hospital	5(5.2%)	22(22.9%)	31(32.3%)	18(18.8%)	20(20.8%)
My work is highly recognized by my supervisor	24(25%)	37(38.5%)	22(22.9%)	9(9.4%)	4(4.2%)
Promotion is for every staff in Mengo Hospital who qualifies for it	3(3.1%)	15(15.6%)	33(34.4%)	23(24%)	22(22.9%)
Mengo Hospital formally recognizes good performance of its employees	12(12.5%)	24(25%)	24(25%)	19(19.8%)	17(17.7%)

Source: Primary data

Regarding non-financial rewards and performance of health workers at Mengo Hospital, 39.6% of the respondents disagreed with the statement that there are career development opportunities for all health workers in Mengo Hospital but 28.1% agreed with the statement and 32.3% were not decided. Majority (63.5%) revealed that their work is highly recognized by their supervisors with 22.9% not decided and only 13.6% disagreed with the statement regarding their work being highly recognised by their supervisors. The findings above implied that there are some career development opportunities for some health workers at Mengo Hospital. This could motivate those who benefit from the career development opportunities but may demotivate those who do not or those who do not see themselves benefitting from these opportunities in the near future. Employees knowing that their work is highly recognised by their supervisors could motivate them to take better care of the patients.

A top management respondent in an interview while responding to the question on which non-financial rewards are available to the staff of Mengo Hospital and how these influence the performance of health workers stated;

The non-financial rewards available at the Hospital include appreciation, day outs, medical treatment, physical housing, certificates, corporate t-shirts, recognition, promotion, professional development among others and these rewards, for example, recognition/appreciation keeps them working, day outs help them to bond, medical treatment increases commitment and physical housing motivates those who are housed and all these positively influence their performance but in some cases, those who are not housed may be de-motivated and may in one way or the other affect their performance.

The above response means that Mengo Hospital offers a variety of non-financial rewards to their employees and it is clear that these significantly improve the performance of the health workers as they help in increasing commitment to the institution.

Another top management respondent in an interview while responding to the question on which non-financial rewards are available and how they influence the performance of health workers mentioned;

The Hospital offers capacity building in form of workshops, upgrading, seminars and refresher courses for those who formally need them and some need applying to be allowed to undertake them. These career development opportunities help the staff to perform their duties well but at the same time, allowing them to undertake the courses they want which motivates them because they realise that the hospital wants them to improve on their skills.

This response implies that the capacity building activities make the employees feel valued because the employer is interested in improving their skills. When employees feel valued, they are motivated to perform better. With this realization, Mengo Hospital needs to scale up its capacity development activities and reach more health workers if its positive impact is to be effectively tapped into.

Furthermore, 46.9% of the respondents disagreed with the statement that promotion is for every staff in Mengo Hospital who qualifies for it with 34.4% not decided about the statement and only 18.7% agreeing with the statement. A good number of respondents (37.5%) gave a balanced response and acknowledged that Mengo Hospital formally recognizes good performance of its employees but an equal number of 37.5% of their counterparts disagreed with the statement whereas 25% were not decided about the statement. The above findings implied that to a small extent, promotion at Mengo Hospital is for every staff who qualifies and recognition for good performance of the employees is minimal.

In an interview, a top management respondent while responding to the question on how non-financial rewards influence the performance of health workers noted;

Recognition coupled with acknowledging peoples contribution and promotions are done once in a while but they have a greater impact on staff performance since they carry a surprise element and most

importantly is that non-financial rewards have a better and longer lasting impact on performance of health workers.

This response agrees that recognition and promotions significantly positively influence employee performance. However, the fact that these are done once in a while and at a minimal level could negatively affect the performance of health workers yet if this were to be improved, performance would improve even further. This observation is also in agreement with the data which was collected quantitatively where a significant number of respondents disagreed with the existence of capacity development opportunities and promotions.

Correlation Coefficient between Non-Financial Rewards and Performance of Health Workers

The table below shows the correlations between non-financial rewards and the performance of health workers.

Table 14: Correlations between Non-Financial Rewards and Performance of Health Workers

		Performance of Health workers	Non-Financial rewards
Performance of Health workers	Pearson Correlation	1	.514**
	Sig. (2-tailed)		.000
	N	96	96
Non-Financial rewards	Pearson Correlation	.514**	1
	Sig. (2-tailed)	.000	
	N	96	96

** . Correlation is moderate at the 0.01 level (2-tailed).

The study also used Pearson correlation coefficient to establish the relationship between non-financial rewards and performance of health workers. The analysis found out that there is a positive

(0.514**) and moderate (0.000) relationship between non-financial rewards and performance of health workers at Mengo Hospital, Uganda. The relationship is statistically significant at 95% confidence level (2-tailed) as the p-value is less than 0.025 (=0.000). The findings implied that an increase in non-financial rewards automatically leads to a moderate increase in the performance of health workers at Mengo Hospital. This therefore calls for the acceptance of the hypothesis that Non-financial rewards significantly influence the performance of health workers in Mengo Hospital.

Although both qualitative and quantitative data point to a certain degree of availability of non-financial rewards in the Hospital, there are pointers from both angles which suggest that more should be done about the provision of these rewards.

4.8 Multiple Regression Analysis

The study needed to establish the extent of effect to which both financial and non-financial rewards have on the performance of health workers in Mengo Hospital and therefore employed a multiple regression to this effect.

Table 15: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.847 ^a	.718	.712	.63673

a. Predictors: (Constant), Non-Financial rewards, Financial rewards

Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	.103	.185		.557	.579
1 Financial rewards	.866	.071	.777	12.232	.000
Non-Financial rewards	.115	.058	.126	1.980	.051

a. Dependent Variable: Performance of Health workers

The model summary shows that there was a positive relationship which exists between rewards and performance of health workers at Mengo Hospital. Using the regression model, it is evident that the Beta coefficients (0.777 and 0.126) have a positive effect on performance of health workers in Mengo Hospital.

The analysis treated Performance of Health workers as a Dependent Variable whereas the Financial and Non-Financial rewards were treated as the Independent Variables. The hypothetical regression model that guided the multiple regression equation is of the form;

$$Y = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \dots + \beta_n X_n$$

Where: Y is the dependent variable (Performance of Health workers), “ α ” is a regression constant; $\beta_1, \beta_2, \beta_3$ and β_n are the beta coefficients; and X_1, X_2, X_3 , and X_n are the independent (predicators) variables. When the coefficients were substituted, the model looked as shown below.

$$Y = 0.103 + 0.777 X_1 + 0.126 X_2$$

Where:

Y is Performance of Health workers; 0.103 is a regression constant, X_1 is Financial rewards and X_2 is Non-Financial rewards.

The multiple regression analysis above shows that the all the rewards (Financial rewards and Non-Financial rewards) positively impacted on the Performance of Health workers in Mengo Hospital. Hence, Financial rewards ($\beta_1 .777$) and Non-Financial rewards ($\beta_2 .126$), an implication that an

increase in both Financial and Non-Financial rewards increases the levels of performance of health workers in Mengo Hospital.

The above findings therefore implied that 71.2% of the variation (adjusted $R^2 = 0.712$) in Performance of health workers Financial and Non-Financial rewards and other factors that this study may not have considered explain the remaining 28.8% of the variation in Performance of health workers. Such factors may include leadership styles, supervision and human resource practices among others.

CHAPTER FIVE

SUMMARY, DISCUSSION, CONCLUSIONS AND RECOMENDATIONS

5.1 Introduction

This chapter presents the summary of findings, conclusion, and discussion as well as the recommendations regarding the study findings. This chapter is also arranged according to the study objectives.

5.2 Summary of findings

In this section the findings of the study are summarised and presented according to the study objectives.

5.2.1 Perception Towards Rewards

The study findings on perception towards rewards revealed that Mengo Hospital does not have an effective reward system and that rewards are not fairly distributed to all deserving employees. These findings implied that majority of the respondents did not agree with the statements that the Hospital has an effective reward system and rewards are fairly distributed to all deserving employees at Mengo Hospital.

Furthermore, the study revealed that rewards are not generally based on performance and deserving staff are not rewarded in a timely manner. The findings from the interviews above are in line with majority of the respondents as they highlighted that not all rewards are performance based.

The findings of the study are not in agreement with the hypothesis that health workers are satisfied with the rewards they receive from Mengo Hospital. This could negatively affect the performance of health workers since there is a positive relationship between rewards and the performance of health workers.

5.2.2 Financial Rewards and Performance of Health Workers

The Pearson correlation coefficient analysis also found out that there is a positive and strong relationship between financial rewards and performance of health workers at Mengo Hospital,

Uganda. The findings implied that an increase in financial rewards automatically leads to a corresponding increase in the performance of health workers at Mengo Hospital.

The qualitative data indicates that performance based financial rewards significantly and positively influence the performance of health workers as opposed to those that are not.

Therefore, the hypothesis that there is a strong positive relationship between financial rewards and the performance of health workers holds.

5.2.3 Non-Financial Rewards and Performance of Health Workers

The Pearson correlation coefficient analysis also found out that there is a positive and moderate relationship between non-financial rewards and performance of health workers at Mengo Hospital, Uganda. The findings implied that an increase in non-financial rewards leads to an increase in the performance of health workers at Mengo Hospital.

The qualitative data indicates that Mengo Hospital has a range of non-financial rewards and that these positively influence the performance of health workers though this is moderate.

This finding is not entirely in agreement with the hypothesis that non-financial rewards significantly influence the performance of health workers in Mengo Hospital as the influence occurs only moderately.

5.3 Discussion of Findings

Under this section, the researcher discusses the findings of the study and this is done according to the study objectives.

5.3.1 Perception Towards Rewards

The study findings on perception towards rewards revealed that Mengo Hospital does not have an effective reward system and that rewards are not fairly distributed to all deserving employees. These findings implied that majority of the respondents disagreed with the statement that the Hospital has an effective reward system and rewards are not fairly distributed to all deserving employees at Mengo Hospital. Armstrong (2006) mentions that both financial and non-financial rewards should be made available to employees if the reward system is to have a totality

perspective that will satisfy the employee. From the findings of the study, this seems to be either lacking or the health workers are not satisfied with what is available to them.

Furthermore, the study revealed that rewards are not all based on performance and deserving staff are not rewarded in a timely manner. This could hinder any improvement in the performance of health workers. The expectations of the respondents as revealed by the study seem to be in-line with the Expectancy Theory under the Valency, Instrumentality and Expectancy and (Armstrong, 2006) states that Valency stands for value, instrumentality is the belief that if one does one thing it will lead to another and expectancy is the probability that action or effort will lead to an outcome. Mengo Hospital Management should strengthen the reward system and ensure that all rewarding is performance based. This is likely to improve the performance of health workers even further.

5.3.2 Financial Rewards and Performance of Health Workers

The Pearson correlation coefficient analysis also found out that there is a positive and strong relationship between financial rewards and performance of health workers at Mengo Hospital, Uganda. The findings implied that an increase in financial rewards, timely rewarding of the excellent employees, timely payment of salaries, tagging pay to performance, automatically leads to a corresponding increase in the performance of health workers at Mengo Hospital. The findings are supported by Ajila and Abiola (2004) who identified that there is a significant relationship between extrinsic rewards, that is, salary, bonuses, allowances, benefits and employee performance.

This finding was also supported by Atuhairwe (2006) who found out that financial and non-financial rewards are crucial in influencing employee performance. The study findings indicate that employees with extra responsibilities receive a responsibility allowance for their extra effort which could be contributing to their high quality performance. This finding is in agreement with Frontera (as cited in Lalam 2013) who observed that if employees feel that their inputs such as effort, commitment, loyalty, trust and enthusiasm to the organization are fairly rewarded by outputs such as financial and non-financial benefits, they remain motivated and continue to provide inputs towards higher performance.

During this study, the findings revealed that there is a general lack of link between performance and pay but where pay is linked performance, health worker performance is generally better. This finding is supported by Benardin (2006) who emphasized that there must be a relation between rewards and performance if money is to motivate behavior and must be perceived as being fair and equitable.

The study findings are also supported by Byars & Rue, (2008) who emphasized that pay is the primary organizational variable used to reward employees and reinforce performance as rewards should primarily be based on performance. The study findings were also supported by Armstrong (1997) who stated that financial rewards can motivate and are a major means of ensuring that organisations achieve corporate objectives by motivating people to join the organization, stay with it and deliver sustained levels of performance.

5.3.3 Non-Financial Rewards and Performance of Health Workers

The Pearson correlation coefficient analysis also found out that there is a positive and moderate relationship between non-financial rewards and performance of health workers at Mengo Hospital, Uganda. The findings implied that an increase in non-financial rewards automatically leads to a corresponding increase in the performance of health workers at Mengo Hospital. The findings however contradicted Ajila and Abiola, (2004) who argued that there is no significant relationship between intrinsic rewards (recognition, promotion, career development) and workers' performance. The findings are in agreement with Udiji, (2013) who indicated that there is a positive relationship between non-financial rewards and employee performance.

The findings of the study further agree with Armstrong, (1997) who observed that non-financial rewards are powerful motivators in themselves but can work even more effectively if they are combined with financial rewards. Beardwell et al (2007) noted that non-financial rewards remain the most important motivators of employee performance hence strengthening the findings of the study.

Decenzo and Robbins (2003) stated that non-financial rewards are important in any organisation as they are desirable extras which do not directly increase the employee's financial position but make the job more attractive. Decenzo and Robbins (2003) also continue to note that different

individuals are motivated by different financial rewards and getting the right non-financial reward for each individual employee increases performance to the organization. These assertions by Decenzo & Robbins (2003) are in agreement with the findings of the study on the relationship between non-financial rewards and the performance of health workers in Mengo Hospital.

5.4 Conclusions

This section presents the conclusions made about the findings and this is done according to the study objectives.

5.4.1 Perception Towards Rewards

The study found out that Mengo Hospital lacks an effective reward system; the rewards are not all performance based, rewards are not always fairly distributed to all deserving employees and generally the rewarding is not done in a timely manner. This finding therefore implies that the hypothesis that health workers are satisfied with the rewards that they receive does not hold.

Since the study has revealed that health workers are not satisfied with the reward system yet both types of rewards have been found to positively influence the performance of health workers, the two factors in the Expectancy Theory as highlighted by Armstrong (2006), could be true and hence could play a major role in motivating employees to work harder. The two factors include; that the value of rewards to individuals in so far as they satisfy their needs for security, social esteem, autonomy and self-actualisation and the probability that rewards depend upon effort as perceived by individuals. The issue of linking rewards to performance came out very strongly and it is in agreement with the Expectancy Theory whereby if individuals can see a clear link between effort and rewards, then they will put in extra effort hence producing better results.

5.4.2 Financial rewards and Performance of Health Workers

Since the study findings indicate that financial rewards positively and significantly influence the performance of health workers in Mengo Hospital, it means that an increase in these financial rewards increases employee performance and vice versa. This therefore leads to the acceptance of the hypothesis which states that there is a strong positive relationship between financial rewards and the performance of health workers in Mengo Hospital. It is safe to conclude therefore that financial rewards are significantly and positively related to the performance of health workers.

5.4.3 Non-Financial Rewards and Performance of Health Workers

Given that the study findings revealed that non-financial rewards also positively but moderately influence the performance of health workers at Mengo Hospital, it means that an increase in non-financial rewards moderately increases the performance of health workers and vice versa. This therefore means that the hypothesis that non-financial rewards significantly influence the performance of health workers is not entirely accepted as the relationship between the two variables is moderate. It is therefore safe to conclude that there is a moderate positive relationship between non-financial rewards and performance of health workers in Mengo Hospital.

5.5 Recommendations

In this section, the researcher presents recommendations that have been made regarding the reward system of Mengo Hospital.

5.5.1 Perception Towards Rewards

The Hospital Management needs to work at improving the existing reward system and ensure that the system is clearly communicated and understood by all stakeholders. This can be done by undertaking a benchmarking exercise with other health service providers such as Rubaga Hospital, Nsambya Hospital, and International Hospital Kampala among others and find out how the health workers in those institutions are rewarded and work towards making an improvement through the making of a comprehensive reward policy. After a comprehensive reward policy has been developed, it should be circulated to all stakeholders especially the employees so that they know what is available for them. Clear understanding of the system will help the employees appreciate what is due to them. Every effort should also be made to ensure that rewards are linked to performance and the employees should know this if performance is to continuously improve.

5.5.2 Financial Rewards and Performance of Health Workers

The Hospital should work at introducing a performance based pay system that clearly and directly links financial rewards to performance. Regular pay increments should be provided to the staff to take care of the inflation that eats into their pay.

5.5.3 Non-Financial Rewards and Performance of Health Workers

The Hospital should improve on the frequency of formally recognizing excellently performing employees. There should also be focus on the provision of other non-financial rewards as it has been revealed by the study that they moderately positively influence the performance of health workers.

5.6 Limitations and Areas for Further Study

The study was carried out among health workers in Mengo Hospital, a Private Not For Profit Hospital in Kampala, Uganda. The findings of this study may not be easily generalized to all other health workers working in different health institutions with very different objectives for example, government health facilities and private for profit health facilities. Future studies could be carried out in these two types of facilities to determine if rewards have an effect on the performance of health workers.

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APPENDICES

APPENDIX I: QUESTIONNAIRE

QUESTIONNAIRE

QUESTIONNAIRE NO

QUESTIONNAIRE FOR MENGO HOSPITAL HEALTH WORKERS

Dear Sir/Madam,

My name is Ida Percy Nansinjo, I am a student of Uganda Management Institute. I request you to kindly participate in the study I am conducting in Mengo Hospital by answering the following questions which will be used to establish the relationship between rewards and the performance of

health workers. The information given is confidential and will be used for academic purposes only.

Please feel free to express yourself.

Thank you.

Ida Percy Nansinjo

SECTION A- DEMOGRAPHIC INFORMATION

This section is intended to collect the demographic information/characteristics of the respondents for statistical groupings. Please tick where you belong in the corresponding boxes to the questions.

NO.	QUESTION	CODING CATEGORY
1.	Gender	<input type="checkbox"/> Female <input type="checkbox"/> Male
2.	Age bracket	<input type="checkbox"/> Below 19 years <input type="checkbox"/> 20-29 years <input type="checkbox"/> 30-39 years <input type="checkbox"/> 40-49 years <input type="checkbox"/> 50 years and above
3.	Marital status	<input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
4.	Category	<input type="checkbox"/> Specialist <input type="checkbox"/> Medical Doctor <input type="checkbox"/> Registered Nurse/Midwife <input type="checkbox"/> Enrolled Nurse/Midwife <input type="checkbox"/> Allied Health Worker
5.	Length of service	<input type="checkbox"/> Less than one (1) year <input type="checkbox"/> 2-4 years <input type="checkbox"/> 5-7 years <input type="checkbox"/> 8 years and above

SECTION B:

(7) Please read each item in the table below and indicate by **TICKING** your agreement or disagreement on reward system in Mengo Hospital.

Key: 5=Strongly Agree (SA), 4= Agree (A), 3=Not Sure (NS), 2= Disagree (D), 1=Strongly Disagree (SD)

Statement on Perceptions Towards Rewards	SA	A	NS	D	SD
The Hospital has an effective reward system					
Rewards are fairly distributed to all deserving employees					
Rewards are based on performance					
Deserving staff are rewarded in a timely manner					

(8) Please read each item in the table below and indicate by **TICKING** your agreement or disagreement on satisfaction with financial rewards in Mengo Hospital.

Key: 5=Strongly Agree (SA), 4= Agree (A), 3=Not Sure (NS), 2= Disagree (D), 1=Strongly Disagree (SD)

Statement on Financial Rewards	SA	A	NS	D	SD
Staff receive their salaries in a timely manner					
Employees are paid their salaries as agreed in their appointment letters					
Payment is in line with my tasks					
Mengo Hospital provides regular salary increments					
The salary I get meets all my basic needs					
Employees with higher academic qualifications get a higher pay					
Employees in higher positions get a higher pay					
Employees with extra responsibilities receive a responsibility allowance for the additional role					
Employees receive leave transport allowance					
All employees receive gratuity at the end of their employment contract with the Hospital					

Good quality meals are provided to all Mengo Hospital employees					
Mengo Hospital provides medical treatment to all employees and their immediate dependents					
Employees who fall sick and are off work continue to receive pay until they recover					

(9) Please read each item in the table below and indicate by **TICKING** your agreement or disagreement on satisfaction with non-financial rewards in Mengo Hospital.

Key: 5=Strongly Agree (SA), 4= Agree (A), 3=Not Sure (NS), 2= Disagree (D), 1=Strongly Disagree (SD)

Statement on Non-Financial Rewards	SA	A	NS	D	SD
There are career development opportunities for all health workers in Mengo Hospital					
My work is highly recognized by my supervisor					
Promotion is for every staff in Mengo Hospital who qualifies for it					
Mengo Hospital formally recognizes good performance of its employees					

(10) Please read each item in the table below and indicate by **TICKING** your agreement or disagreement on employee performance in Mengo Hospital.

Key: 5=Strongly Agree (SA), 4= Agree (A), 3=Not Sure (NS), 2= Disagree (D), 1=Strongly Disagree (SD)

Statement on Job Performance	SA	A	NS	D	SD
I attend to all patients under my care in a timely manner					
I administer all patient drugs as per instructions					
I conduct all patient reviews in a timely manner					
I document all procedures done on each patient					
I make timely interventions on patients whenever there is need					
I health educate all the patients under my care					

I attend to all my patients in a friendly manner offering good customer care to each of them.					
I give relevant information to patients and their attendants as and when requested					

(11) In your opinion, what are some of the major problems that affect your performance while working in Mengo Hospital?

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.....

.....

(12) How do you think these problems can be solved?

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Thank you very much for your time.

APPENDIX II: INTERVIEW GUIDE FOR TOP MANAGEMENT/KEY INFORMANTS

This interview is designed to collect information on the relationship between rewards and health worker performance in Mengo Hospital. All the information collected will be handled in a confidential manner. Your responses will be combined with those of others and reported as group data. This information is being gathered and analyzed as part of the requirements for completing my master’s degree and is therefore for purely academic purposes.

Thank you for sparing your time and agree to participate in this interview.

Sincerely,

Ida Percy Nansinjo

1. In your opinion, does Mengo Hospital have a comprehensive reward system and if so, what does it entail?
2. What forms of financial rewards are provided by Mengo Hospital?
3. How do these financial rewards influence the performance of your staff?
4. Which non-financial rewards are available to the staff of Mengo Hospital?
5. How do the rewards mentioned in (3) above influence the performance of your staff?
6. What is your opinion on the level of performance of health workers in Mengo Hospital?
7. In your opinion, are your staff satisfied with the reward system of Mengo Hospital?
8. How do you describe the general work conditions in Mengo Hospital?

Thank you very much for your time

APPENDIX III: SUMMARY OF INTERVIEW TRANSCRIPT

- 1. In your opinion, does Mengo Hospital have a comprehensive reward system and if so what does it entail?**
 - Yes. It has components of monetary and non-monetary rewards. Focus is on compensation, benefits, recognition and appreciation.
 - Yes. The reward system has both aspects of financial and non-financial rewards. The Hospital pays attention to both aspects.

- 2. What forms of Financial Rewards are provided by Mengo Hospital?**
 - Monthly salaries
 - Free medical treatment for staff and immediate dependents
 - Financial assistance during bereavement
 - Free meals

- Overtime allowances
- Lunch allowances where applicable
- Out of pocket allowances in case one has to participate in activities outside the Hospital
- Responsibility allowances
- Monetary rewards for excelling performers
- Professional fees
- Acting allowances
- Duty allowances
- Gratuity
- Leave transport allowances

2. How do these Financial Rewards influence the performance of your staff?

- Monthly salaries are more of a routine so they do not influence performance.
- Professional fees greatly influence performance
- Salaries are paid on time and this greatly influences performance
- Out of pocket allowances create a sense of belonging for the staff so they are motivated to work harder
- Additional payment made in form of overtime allowances, responsibility allowances, acting and duty allowances significantly improve performance since they are performance related.
- Periodic increments have short lived episodes of motivation
- Medical treatment increases commitment

3. What forms of Non-Financial Rewards are available to the staff of Mengo Hospital?

- Free uniforms
- Free corporate t-shirts
- Fully paid outings
- Plaques and certificates for long serving and excelling performers
- Appreciation
- Physical housing

- Promotions

4. How do the rewards in (3) above influence the Performance of your staff?

- Outings help them bond, enhance teamwork and therefore work together better.
- Appreciation lifts their spirits and therefore improves performance
- Physical housing motivates those who are housed and positively influences their performance but those who are not housed are demotivated by the fact they are left out and this could negatively affect their performance.
- Non-financial rewards have a longer lasting impact and influence performance better.
- Sometimes there is unfairness in the distribution of these rewards and this causes demotivation to those who feel unfairly treated.

5. What is your opinion on the level of Performance of Health Workers in Mengo Hospital?

- Generally, the performance is good although there are certain elements whose performance is not good at all.
- Performance is good among those who are paid based on what they do but its poor among those who earn just a flat salary at the end of the month.

6. In your opinion, are your staff satisfied with the reward system of Mengo Hospital?

- No
- Some are satisfied while others are not

7. How do you describe the general work conditions of Mengo Hospital?

- Sometimes there is frustration due to frequent breakdown of equipment
- Delays in repairing the equipment also affects the work of health workers
- Some departments do not understand the meaning of emergency hence causing delays and frustration
- The general work conditions are improving.
- Computerisation is making work much more easier
- Mengo Hospital has an enabling atmosphere that allows freedom of expression.

- Departments are fairly well equipped

APPENDIX IV: PROBLEMS AND SOLUTIONS TO EMPLOYEE PERFORMANCE

1. Problems

NO.	CODE	Challenge facing performance	Frequency
1	IS	Inadequate salary	40
2	US	Understaffing	18
3	ISM	Irregular servicing of machines	1
4	PQM	Poor quality meals	6
5	DPE	Delay in providing requisitioned equipment	5

6	LCB	Limited Capacity Building	4
7	LIS	Lazy, Incompetent and Rude staff	1
8	BW	Being over worked	12
9	LB	Language Barrier	1
10	DEM	Delayed Release of emergency medicines	2
11	ISC	Inadequate space in which to serve clients	1
12	LC	Limited number of computers	1
13	FRD	Frequent drug stock-outs	1
14	FRS	Fault-seeking and rude supervisors	4
15	OI	Old Infrastructure	1
16	BIM	Bureaucracy in decision making	1
17	DP	Delayed promotions	4
18	LT	Lack of teamwork	2
19	LA	Lack of accommodation	1
20	PHC	Poor housing conditions	2
21	LS	Lack of enough security at night	1
22	TC	Transport challenges	7
23	PC	Poor communication between management and staff	3
24	LJS	Lack of job security	1

25	NRA	No recognition/appreciation	4
26	LEE	Lack of enough equipment	10

2. Solutions

NO.	CODE	Solutions to problems affecting performance	Frequency
1	HRV	HR department should become more vigilant	1
2	RWH	Reduce the working hours	1
3	PND	Provide an allowance for night duty	1
4	PRP	Monitor performance and reward according to performance	4
5	IS	Increase salaries	34
6	OW	Organise workshops for staff	1
7	PE	Provide enough equipment	6
8	PDS	Promote deserving staff	1
9	ICMS	Improve communication between management and staff	3
10	PTA	Provide transport allowance	6

11	PAC	Provide accommodation to staff	2
12	PMC	Provide more computers	1
13	SG	Security Guards on every ward especially at night	1
14	HMS	Hire more staff	20
15	EDD	Equal distribution of duties	1
16	RHH	Renovate the hospital houses	2
17	PGM	Provide good quality meals	2
18	REE	Recognition of excellent employees	2
19	OTA	Organise more team building activities	1
20	SMS	Sponsor more staff for further studies	6
21	CNB	Construction of new buildings	1
22	TRL	Provide training in different languages	1

APPENDIX V: PERMISSION TO GO TO THE FIELD