



**STAKEHOLDER INVOLVEMENT AND PERFORMANCE OF PUBLIC
INSTITUTIONS IN UGANDA: THE CASE OF
NATIONAL MEDICAL STORES**

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**A DISSERTATION SUBMITTED TO THE SCHOOL OF MANAGEMENT SCIENCES
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DECLARATION

I Dan Atwijukire declare that this research dissertation is my original work and has never been submitted to any other institution for any academic award.

Signed.....

Date.....

Dan Atwijukire

APPROVAL

This is to certify that this research study has been written under our supervision and satisfies the partial fulfilment for the award of a degree of Masters in institutional management and leadership of Uganda Management Institute and has been submitted with our approval.

Signed.....

Date.....

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Signed.....

Date.....

Dr. Michael Kiwanuka

DEDICATION

This work is dedicated to my wife Hellen Kimosho, my son Jordan Kimosho and my mother Pelly Mugume for their moral support and sacrifices endured as pursued this course.

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ABSTRACT

This study examined the relationship between stakeholder involvement and performance of public institutions in Uganda. In particular, the objectives of the study were to establish the relationship between stakeholders' in planning and performance of public institutions in Uganda; to find out the relationship between stakeholders' involvement in monitoring and performance of public institutions in Uganda; and to establish the relationship between stakeholders' feedback and performance of public institutions in Uganda.. The study adopted a case study design with 142 staff of National Medical Stores as the study sample. Data was collected using questionnaires and interview guides. Quantitative data was analysed using descriptive statistics, correlation and regression analysis. The findings of the study revealed a positive significant relationship between stakeholder participation in planning, monitoring and feedback with performance of public institutions. It was thus concluded that stakeholder planning, monitoring and feedback related to performance of public institutions. Therefore, it is recommended that government organisations and other organisations involvement in provision service should promote involvement of stakeholders in organisational planning. Government organisations and other organisations should entice the different stakeholders to constantly monitor their activities. Government organisations and other organisations should encourage different stakeholders to provide regular feedback about the services of the organisation.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

Performance of public institutions has become a critical issue because of the mounting demand from the public for higher quality services. Thus the need to enhance public institutions performance has become more urgent (Curristine, 2005). Citizens are demanding that public institutions be more accountable for what they achieve with taxpayers' money (Curristine, Lonti&Joumard, 2007). It was conceived for this study that Stakeholder involvement could enhance public institutions management. Stakeholder involvement in relation to performance of organisations was conceived in terms of stakeholders' involvement in planning, monitoring and providing feedback (Yee, 2010; Gaspar, Tausi & Mkasiwa; 2014; Linnell, 2012). This first chapter of the study covers background to the study, statement of the problem, study purpose, objectives, research questions, hypotheses, conceptual framework, significance, justification, scope and operational definition of terms.

1.2 Background

1.2.1 Historical Background

Over the past two decades, enhancing performance of public institutions has taken on a new urgency especially in the countries of the Western World as governments face mounting demands on public expenditure, calls for higher quality services and, in some countries, a public increasingly unwilling to pay higher taxes. Governments have adopted a number of different approaches to improving the efficiency and effectiveness in their agencies (Curristine, 2005). One of such approaches is the stakeholders approach by which is concerned with active management of the business environment, relationships and the promotion of shared interests in order to develop business strategies. The approach assists organisations to fit into the larger environment, analyse how standard operating procedures

affect stakeholders within the organisation that is employees, managers and immediately beyond the company, namely customers, suppliers, financiers, workers (Ahamed, 2013). The stakeholder approach was introduced into the management as an answer for dissatisfaction with the unilateral financial criteria of effectiveness (Gomes, 2006).

In the mid-1980s the stakeholder approach became prominent as a strategy for promoting citizenry interests. Since then the stakeholder concept has achieved widespread popularity among academics, media and managers. The aim of the stakeholder approach is to manage and integrate the relationships and interests of shareholders, employees, customers, suppliers, communities and other groups in a way that guarantees the long-term success of the firm (Fontaine, Haarman & , 2006). Stakeholder involvement has become an important tool to transfer ethics to management practice and strategy (Fassin, 2009). *A decision can be considered legitimate or a judgment is legitimately made when citizens are involved and offered adequate opportunity to contribute to the decision-making process* (Gnan, Hinna & Monteduro, 2013). This achieves maximum openness and inclusiveness through a consensus oriented approach bringing about chance for successful design and effective implementation of policies (Veronesi & Kevin, 2009).

1.2.2 Theoretical Background

This study was underpinned by the stakeholder theory suggested by Richard E. Freeman in 1984. Stakeholder theory is based on the notion that beyond shareholders there are several agents with an interest in the actions and decisions of companies. The theory identifies stakeholders as groups and individuals who benefit from or are harmed by, and whose rights are violated or respected by, corporate actions. In addition to shareholders, stakeholders

include creditors, employees, customers, suppliers, and the communities at large. The theory asserts that companies have a social responsibility that requires them to consider the interests of all parties affected by their actions. Management should not only consider its shareholders in the decision making process, but also anyone who is affected by business decisions (Branco & Rodriques, 2007). The main assumption of the stakeholder theory is that an organization's effectiveness is measured by its ability to satisfy not only the shareholders, but also those agents who have a stake in the organisation (Gomes, 2006). This theory advocates for involvement of stakeholders in programs of organisations or institutions. This theory will thus help in relating stakeholders' involvement in planning, monitoring and feedback to performance to performance of public institutions.

1.2.3 Conceptual Background

Stakeholder involvement refers to the notion of management that besides shareholders, other groups or constituents are affected by a company's activities (e.g. representatives of locally affected communities, national or local government authorities, politicians, civil society organisations and businesses) have to be considered in managers' decisions, possibly equally with shareholders (Branco & Rodriques, 2007). The concept of stakeholder involvement in this study has been operationalised as stakeholder involvement in planning, monitoring and providing feedback in institutions or organisations. With institutional performance, this the ability of the institution to yield or results of activities carried out in relation to the purposes being pursued (Curristine, 2005). Performance of public institutions in this study has been operationalised in terms of resource economy, costs, efficiency, effectiveness and quality of service. Economy refers to the difference between purchase price of the inputs and the designated value; costs concerns the monetary expression of a particular product or service; efficiency is the result obtained in relation to the resources used; effectiveness is the actual

result to its expected level; and quality is the degree to which the public product/ service satisfies the requirements (Mihaiu, Opreana & Cristescu, 2010).

1.2.4 Contextual Background

National Medical Store (NMS) was an autonomous government corporation established by the National Medical Stores Statute No. 12 of 1993, which came into effect on 3rd December 1993. National Medical Stores was responsible for ensuring continuous distribution of pharmaceutical products in a financially viable and sustainable manner. In addition, NMS distributes various drugs and these currently include; Uganda Essential Drug Kits, STI drugs, family planning products and Ministry of Health direct distributions to the District (Noel & McCord, 2013). To improve service delivery a stakeholder approach was adopted in the procurement and supply of drugs in Uganda in conjunction with NMS. Thus, in 2000 the government introduced the sector wide approach (SWAP) to improve the overall performance of the health system through bringing on donors, NGOs and other partners such as USAID (Tashobya, Ssenooba & Cruz (2006). These stakeholders included central (Ministries of Health, Finance, Public Service, Local Government, Education) and local government officials, representatives of multi-lateral and bilateral agencies, NGOs and private providers of health services. The purpose was to improve capacity and performance of the National Medical Stores in carrying out its supply chain management responsibilities (Tashobya et al. 2006).

Despite this stakeholder approach, the performance of NMS still had some gaps. Complaints about medicines stock-outs were still frequently pronounced in many health units. Surprisingly large quantities of medicines and medical supplies expired at health facilities. This situation brought about controversy as to how come the same facilities that cried of stock outs yet the same facilities had huge expiries. To add on this confusion, NMS had many

times come out in the media insisting that they were overstocked with medicines and this left the public guessing as to what was the real problem. This contextual contradiction thus led to the unanswered empirical question as to what was the relationship between stakeholder involvement and performance of public institutions.

1.2 Statement of the Problem

Performance of public institutions is of paramount importance in service delivery. In this endeavour, the government of Uganda has introduced strategic mechanisms such as the stakeholders approach to enhance services delivery. The government for instance adopted the stakeholder approach in the procurement and supply of drugs to improve capacity and performance of the National Medical Stores (NMS) in carrying out its supply chain management responsibilities (Tashobya et al. 2006). However, despite this effort performance of NMS was still poor. There were frequent drug stock-outs in many health units and large quantities of expired drugs and medical supplies due to poor quantification practices and ordering of large quantities of drugs. NMS could take 60 days instead of 30 to process and deliver an order to the district leading to frequent drug stock-outs of up to 30% in many health units (Tumwine, Kutyaabami, Odoi & Kalyango, 2010). If the problem of poor performance of public institutions such as NMS was not addressed, it would result in complete decline of services delivery in the country. It was against this background that this study was carried out to examine the relationship between stakeholder involvement and performance of public institutions.

1.3 Purpose of the Study

The purpose of the study was to examine the relationship between stakeholder involvement and performance of public institutions in Uganda.

1.4 Specific Objectives

This study specifically sought;

- i. To establish the relationship between stakeholders' involvement in planning and performance of public institutions in Uganda
- ii. To find out the relationship between stakeholders' involvement in monitoring and performance of public institutions in Uganda
- iii. To establish the relationship between stakeholders' feedback and performance of public institutions in Uganda.

1.5 Research Questions

This study was guided by the following research questions;

- i. What is the relationship between stakeholders' involvement in planning and performance of public institutions in Uganda?
- ii. What is the relationship between stakeholders' involvement in monitoring and performance of public institutions in Uganda?
- iii. What is the relationship between stakeholders' feedback and performance of public institutions in Uganda?

1.6 Hypotheses

The study was analysed along the following research hypotheses;

- i. There is a relationship between stakeholders' involvement in planning and performance of public institutions in Uganda
- ii. There is a relationship between stakeholders' involvement in monitoring and performance of public institutions in Uganda

iii. There is a relationship between stakeholders' feedback and performance of public institutions in Uganda.

1.7 The Conceptual Framework

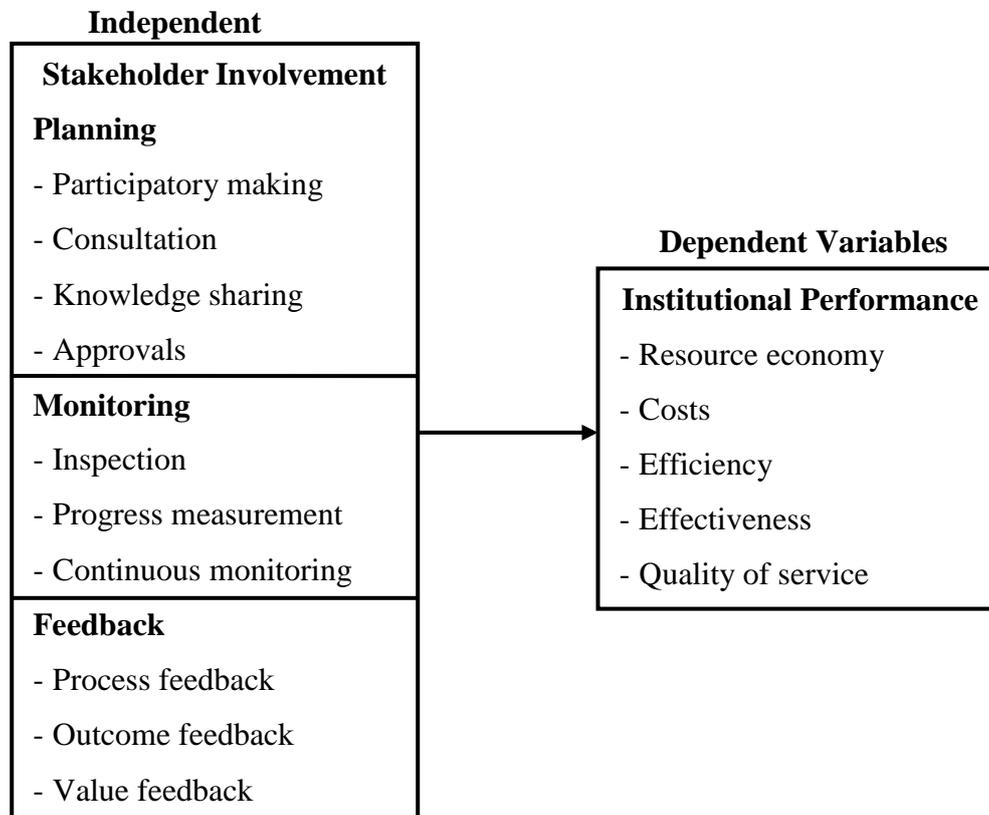


Figure 1.1: Conceptual Framework Relating stakeholder involvement and Institutional Performance

Source: Constructs adopted from Yee (2010); Luyet, Schlaepfer, Parlange and Buttler (2012); Kusek and Rist (2004) and Curristine (2005).

The above framework shows that there is a relationship between stakeholder involvement and performance of public institutions. Stakeholder involvement covers stakeholder planning, monitoring and feedback. Planning involves participatory making, consultation, knowledge sharing and approvals (Yee, 2010; Luyet, Schlaepfer, Parlange & Buttler, 2012). Stakeholder monitoring involves inspection, progress measurement and continuous monitoring (Kusek & ,

2004) and stakeholder feedback is in terms of process feedback, outcome feedback and value feedback (Luyet et al., 2012). On the other hand, institutional performance includes resource economy, costs, efficiency, effectiveness and quality of service (Curristine, 2005). However, there extraneous variables that could affect the relationship between the independent and dependent variables which were not of interest to this study, these included government policies, institutional budget, human resource quality and infrastructure.

1.8 Significance of the Study

This study provides a yardstick for stakeholder involvement in government institutions from the Ugandan context. This study will thus be of value to government organs such as the ministries and local governments and then NGOs and Civil Society Organisations on how they can promote stakeholder involvement in order to enhance performance of public institutions. The study identifies the role of stakeholder involvement and suggests ways in which it can be increased from the top to the point of delivery and the lowest level. This will help promoting the role of stakeholders in ensuring that there no losses through dubious means such as corruption in the management of public funds. The study avails information to government and donors on how partner with stakeholders. This will help in ensuring that the stakeholder role is strengthened in order to enhance performance of government institutions. Also this proposed study contributes to the body of knowledge on stakeholder involvement and performance of public institutions. This will help researchers and academicians interested in further research in stakeholder involvement and performance of public institutions.

1.9 Justification for the Study

Performance of public institutions is of paramount importance is of paramount importance in service delivery. Indeed the government of Uganda has introduced strategic mechanisms such as the stakeholders approach to enhance services delivery. The government for instance

adopted the stakeholder approach in the procurement and supply of drugs to improve capacity and performance of the National Medical Stores (NMS) in carrying out its supply chain management responsibilities (Tashobya et al. 2006). However, despite the effort of the government to enhance the performance of public institutions such as NMS, performance of NMS is still poor. There are frequent drug stock-outs in many health units and large quantities of expired drugs and medical supplies due to poor quantification practices and ordering of large quantities of drugs. NMS may take 60 days instead of 30 to process and deliver an order to the district leading to frequent drug stock-outs of up to 30% in many health units (Tumwine, Kutwabami, Odoi& Kalyango, 2010). Thus this study sought to examine the relationship between stakeholder involvement and performance of public institutions.

1.10 Scope of the Study

1.10.1 Geographical Scope

The geographical scope of the study was the headquarters of NMS in Entebbe and all the regional offices that are namely, Arua, Gulu, Hoima, Kabarole, Kampala, Karamoja, Mbale, Mbarara and Soroti. This scope was chosen because the staff of NMS who were the primary key respondents were distributed in those regional centres.

1.10.2 Content Scope

The content scope was on stakeholder involvement and performance of public institutions. Stakeholder involvement was studied in terms of stakeholder planning, monitoring and feedback. Planning was looked at in terms of participatory decision making, consultation, knowledge sharing and approvals. Stakeholder monitoring was studied in terms of inspection, progress measurement and continuous monitoring. Stakeholder feedback was studied in terms process feedback, outcome feedback and value feedback. On its part, institutional

performance included resource economy, costs, efficiency, effectiveness and quality of service.

1.103 Time Scope

The time scope of the study was the period 2010 – 2014 covering the study problem over an extended period. This helped in analysing how stakeholders' management had affected the performance of public institutions.

1.11 Operational Definitions

Institutional Performance: In this study it is considered to refer resource economy, costs, efficiency, effectiveness and quality of service.

Stakeholder: This refers to those individuals without whose continuing participation, the corporation cannot survive as a going concern.

Stakeholder feedback: In this study it refers to process feedback, outcome feedback and value feedback.

Stakeholder Management: Operationally it refers stakeholder planning, monitoring and providing feedback in institutions or organisations.

Stakeholder monitoring: In this study it has been defined as stakeholder inspection, progress measurement and continuous monitoring.

Stakeholder planning: In this study, it means participatory decision making, consultation, collaboration and decision approvals by stakeholders.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter is a review of existing literature on stakeholder involvement and performance of public institutions. The literature presents the theory that helped to relate stakeholder involvement and performance of public institutions. The review of related literature was based on the study themes following the order of the research objectives. The themes on which the literature review was based were namely; stakeholder planning, monitoring and feedback. During literature review, contributions, weaknesses and existing gaps were identified.

2.2 Theoretical Review

The theory that underpinned this study was the stakeholder theory. The stakeholder theory emerged in the management after it was suggested by Richard E. Freeman in 1984. However, the term stakeholder first appeared in the management literature in an internal memorandum at the Stanford Research Institute, in 1963. The word means any group or individual who can affect or is affected by the achievement of the organization's objectives. The main assumption of the stakeholder theory is that an organization's effectiveness is measured by its ability to satisfy not only the shareholders, but also those agents who have a stake in the organisation (Gomes, 2006). Stakeholder theory is based on the notion that beyond shareholders there are several agents with an interest in the actions and decisions of companies. The theory identifies stakeholders as groups and individuals who benefit from or are harmed by, and whose rights are violated or respected by, corporate actions. In addition to shareholders, stakeholders include creditors, employees, customers, suppliers, and the communities at large (Branco & Rodriques, 2007).

The theory asserts that companies have a social responsibility that requires them to consider the interests of all parties affected by their actions. Management should not only consider its shareholders in the decision making process, but also anyone who is affected by business decisions. The theory proposes that the goal of any company is or should be the flourishing of the company and all its principal stakeholders. The theory distinguishes stakeholders as primary and secondary stakeholders. Primary stakeholders are those without whose continuing participation the corporation cannot survive as a going concern (shareholders and investors, employees, customers and suppliers, and also governments and communities that provide infrastructures and markets, whose laws and regulations must be obeyed, and to whom taxes and other obligations may be due), whereas secondary stakeholders are those who influence or affect, or are influenced or affected by, the corporation, but they are not engaged in transactions with the corporation and are not essential for its survival (Branco & Rodriques, 2007). This theory advocates for involvement of stakeholders in programs of organisations or institutions. This theory helped in relating stakeholders' involvement in planning, monitoring and feedback to performance to performance of public institutions.

2.3 Review of Related Literature

2.3.1 Stakeholder Planning and Performance of Public Institutions

Stakeholder planning involves participatory decision making, consultation, knowledge sharing and approvals (Yee, 2010; Luyet, Schlaepfer, Parlange&Buttler, 2012). Regarding participatory decision making, this is the extent to which different stake holders in an organization are allowed or encouraged to share or participate in organizational decision-making (Abdulai & Shafiwu 2014). Veronesi and Keasey (2009) studied policy implementation and stakeholder involvement on staff of the National Health Service in the UK. Using content analysis, they established that participation led to a greater understanding of the needs of the local population as well as an enhanced awareness on the areas in need of

improvement. Essentially, it triggered a process of learning and knowledge shared by all those actors at some point engaged in decision making. Besides, increase in stakeholder voice was a fundamental means through which to formulate and implement successful strategies because engaging stakeholders in board discussions improved the overall commitment levels and fostered the team working atmosphere, providing renewed unity and a sense of belonging to the local community. On the other hand, Edelenbos and Klijn (2005) carried out a study on management of stakeholder involvement in decision making in municipal councils in the Netherland. The findings of their study revealed that greater input in decision making from a variety of parties generated a variety of ideas and potentially enriched process substance.

With Stakeholder consultation, this involves the development of constructive, productive relationships over the long term. It results in a relationship of mutual benefit; it enables us to identify trends and emerging challenges which are currently or will in the future impact on the organisation. Listening to stakeholder concerns and feedback is a valuable source of information that can be used to improve project design and outcomes, and help a corporation to identify and control external risks. It can also form the basis for future collaboration and partnerships (Morgan, 2015). Kessler (2004) carried out a synthesis of literature on stakeholder participation established that participation, consultation implied leads to increased legitimacy. Accordingly, if individuals are consulted, they feel the process was fair and their inputs were used, it will ultimately enhance their compliance. Further, the synthesis revealed that participants who view the process as legitimate generally feel a strong obligation to comply with the results, even if the mandates contradict their self-interests.

Concerning knowledge sharing, knowledge sharing is basically the act of making knowledge available to others within the organisation (Ipe, 2003). Riege and Lindsay (2006) studied knowledge management in the public sector and stakeholder partnerships in the public policy

development. Basing on public sector experiences in several countries in the Western World such as the USA, Australia and European Union, they established that successful public policy depended on effective coordination of many stakeholders, necessitating a chain of processes that involved analysis, evaluation and reconsideration. This only occurred when governments committed to policy objectives that were stated and communicated clearly, honestly and openly. Accordingly, through information exchange, policies reflected shared values of society. Consequently, this knowledge exchange improved the quality and legitimacy of decisions.

In regard to stakeholders' approval, activities involving public institutions require approval by relevant authorities. Sinclair (2011) explains that the pace of growth, multiple stakeholders and multiple internal and external approval requirements, have dictated a fluent and rigorous approach to community stakeholder engagement. Sinclair (2011) carried out a study entitled developing a model for effective stakeholder engagement management on a large Western Australian Government Trading Enterprise. The results of the study showed that the benefits of stakeholder engagement included enhanced trust and credibility through improved relationships at various levels of the organisation and the faster approval of the projects with stakeholder managers fostering organisational interaction and playing an important role in issues resolution and through dedicated resources and early and open exchange of information.

Whereas the above studies made sufficient effort to relate stakeholder planning and institutional performance, there are a number of gaps at contextual and empirical levels that still remain. At the contextual level, all the above studies were biased towards the Western World. At empirical all the studies adopted an interpretive approach and a number of the studies were critical reviews (e.g. Kessler, 2004; Riege& Lindsay; 2006; Sinclair, 2011).

These gaps called for this study to be carried out in the Ugandan context using a positivist approach for generalisability of the findings to various public institutions.

2.3.2 Stakeholder Monitoring and Performance of Public Institutions

Monitoring is the systematic collection and analysis and information as a project progresses. It is aimed at improving the efficiency and effectiveness of a project or organization. It is based on targets set and activities planned during the planning phases of work. It helps to keep the work on track and can let management know when things are going wrong (Dileep, Anusha, Satyaprathik, Kartheek & Ravikumar, 2013). Stakeholder monitoring involves inspection, progress measurement and continuous monitoring (Kusek&Rist, 2004). Gaspar, Tausi and Mkasiwa (2014) studied the use of performance information by local government stakeholders in Tanzania. Interpretive data of the study revealed that stakeholders were involved in monitoring government projects and indeed councillors, local government officials, central government and parliament because of their power and interest demanded performance and this promoted efficiency in projects implementation.

Monitoring involves monitoring teams to carry out an intermediary between management and other stakeholders (Azman, 2009). Burns and Zhou (2010) assessed Performance Management in the Government of the People's Republic of China. In the findings of their study in Xi'an City, they established existence of various inspection teams that inspected local governments' projects to ensure compliance with key financial and revenue targets. Inspection teams also checked on the progress of all indicators and objectives on a monthly basis. On their part, Gibson, Lacy and Dougherty (2005) carried out a meta-analysis on improving performance and accountability in local government with citizen participation in the USA. The results of the study revealed that many communities were involved in some forms of community engagement processes that involved residents in various aspects of the governance process in terms of advisory committees. These citizen committees were most

often appointed in specific sectors to provide advice on specific issues such as land use planning, zoning, recreation, transportation, economic development, and sometimes on budget and finance. This thus promoted accountability because of stakeholder teams inspecting local government projects.

Stakeholders help in measuring progress towards targets. Indicators can be selected and used to measure changes, make comparisons and assess whether the targets are being met (Richter, 2007). Measuring progress helps to extract from past and ongoing activities, relevant information that is subsequently used as the basis for programmatic fine-tuning, reorientation and planning (Kusek & Rist, 2004). Tooley, Hooks and Basnan (2010) carried out a study on performance reporting by Malaysian local authorities to identify stakeholder needs measuring progress toward targets. T-test results of the study showed that stakeholders placed more importance on what local authorities had achieved or intended to achieve with entrusted resources (financial and non-financial performance), and were less concerned with the stewardship of resources (financial and non-financial position). This means that they can help in monitoring progress of projects.

Significantly, monitoring should be a continuous function. This should use systematic collection of data on specified indicators to provide management and the main stakeholders of an ongoing development intervention (Kusek & Rist, 2004). To achieve the goals set, it is important regularly to monitor the progress of program execution and periodically to conduct an evaluation of its impact (Slukhai, 2011). Simson, Sharma and Aziz (2011) indicate that to gain an understanding of how public funds have been utilised, and how they contribute to government policies, it is important to continuously monitor the results of expenditure. This has led to the establishment of government monitoring systems. A common feature of such systems involves responsible bodies keeping spending agencies in check by requesting

reports on financial and non-financial performance. Therefore, stakeholders can keep requesting reports on financial and non-financial performance.

The studies above revealed that stakeholder monitoring related to institutional performance. However, then context of the study was biased outside Uganda. For instance, the study by Gaspar et al. (2014) was carried out in Tanzania, Gibson, Lacy and Dougherty (2005) carried out their study in the USA and Tooley et al. (2010) in Malaysia. At the empirical level, studies by Gibson et al. (2005) and Simson et al. (2011) were meta-analyses. While Gaspar et al. (2014) and Tooley et al. (2010) employed the quantitative approach. These gaps made it imperative for this study to be carried out particularly in the Ugandan context using a mixed approach for generalisation and in-depth analysis

2.3.4 Stakeholders Feedback and Performance of Public Institutions

Feedback is a form of communication that provides information as well as a strategy for building trust and strengthening relationships. Feedback is a key component of continuous quality improvement; hence it is a strategy that helps to maximize the benefits of quality improvement information from multiple perspectives (Sebastian, Skelton & West, 2000). Stakeholder feedback includes process feedback, outcome feedback and value feedback (Luyet et al., 2012). Process feedback concerns processes of the program, management and infrastructure and their capacity in delivering outcomes (Linnell, 2012). In a study relating process feedback and organisational performance, Ordenes, Theodoulidis, Burton, Gruber and Zaki (2014) using qualitative analysis established that the ability to timely assess customer experience through feedback represented a prerequisite for successful co-creation processes.

Regarding outcome feedback, Linnell (2012) indicates that this provides assessment of the effectiveness of a program in producing change. Outcome feedback provides information on what happened to program participants and how much of a difference the program made for them. Veronesi and Keasey (2009) carried out a study on policy implementation and stakeholder involvement on staff of the National Health Service in the UK. Through content analysis, they found out that the increased prominence of stakeholder voice had positively contributed to bridge the gap between the activities of the board with those of the rest of the organisation. Hence, this helped to obtain feedback on strategic initiatives and this enabled giving adequate prominence to public views/ concerns.

Value feedback on the other hand is an introspective look at various feedbacks and defining areas of opportunity along with measurable and attainable goals (Faraclas, 2009). Cengiz (2010) carried out a critical review on measuring customer satisfaction. The review established that customer satisfaction (value feedback) influence performance of organisations. Obtaining customer (stakeholder) satisfaction in this competitive business environment is must. Accordingly, knowledge of customer or stakeholder perception and attitudes about an organisation's business greatly enhances its opportunity to make better business decisions because they know requirements or expectations of those they serve and will be able to determine if they are meeting those requirements.

On the part of periodic evaluations, programmes should be periodically evaluated, preferably every two to three years against the initial baseline survey. Such periodic evaluations should form an integral part of the master plan, with the necessary resources allocated from the start (Banerjee & Dika, 2003). Mackie (2008) carried on a literature review on organisational performance management in the Scottish government context. The results of the review indicated that the stakeholder regular feedback affects government organisations ability to

provide quality services. Accordingly, this included issues about the effectiveness of service delivery and overall service and satisfaction. In general, the stakeholder perspective was the primary focus for a public service. Therefore, public bodies had a duty of care perspective than private-sector organisations.

The findings of the studies above revealed that there was a relationship between stakeholders' feedback and organisational performance. However, gaps arose at contextual and methodological levels. Contextually, the studies above Ordenes, et al. (2014) and Veronesi, and Keasey (2009) were biased toward the Western World and in particular the UK. Empirically, Cengiz (2010) and Mackie (2008) carried out critical review of literature. These gaps called for study to carry out an empirical study in the context of Uganda public institutions.

2.4 Summary of Literature Review

The literature above showed that there was a relationship between stakeholder involvement and performance of public institutions. Stakeholder involvement was indicated to include stakeholder planning, monitoring and feedback. Planning involved participatory making, consultation, knowledge sharing and approvals. Stakeholder monitoring involved inspection, progress measurement and continuous monitoring and stakeholder feedback is in terms of process feedback, outcome feedback and value feedback. This literature provided the basis for examining the relationship between stakeholder involvement and performance of public institutions in Uganda.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

This chapter describes the methodology that was employed by the researcher in the study. It presents the research design, study population, sample size and selection, sampling techniques, data collection methods, data collection instruments, procedure of data collection, reliability and validity of instruments, data analysis and measurement of variables.

3.2 Research Design

The study adopted both quantitative and qualitative research approaches for the study involved both statistical data and oral statements from interviews for in-depth analysis (Fassinger& Morrow, 2013). The case study design was selected because it was an empirical inquiry that helped to investigate a contemporary phenomenon within its real life context. The case study design focussed on developing an in-depth understanding by to exploring describing and explaining phenomena by an exhaustive study. The case study was chosen because it helps the researcher to explore, describe, or explain phenomena by an exhaustive study within its natural setting (Ellis & Levy, 2009). This design helped in carrying out in-depth analysis and drawing of statistical inferences as the design collected data using both questionnaire and interviews.

3.3 Study Population

The population of the study involved 233 people that were 225 staff of NMS for survey data and eight officials one from each from the Ministries of Health, Finance, Local Government, Education and local government officials, representatives of multi-lateral and bilateral agencies, NGOs and private providers of health services for qualitative data through

interviews. The staff of NMS was 102 stores and operations, 13 Procurement, 80 Sales and Marketing and 30 Administration.

3.4 Sample Size and Selection

The sample size for survey data was 150 respondents that were 142 out of 225 staff of NMS for survey data and eight stakeholders that were the five accounting officers of the Ministries of Health, Finance, Local Government, Education and local government officials. The other three were officials representing multi-lateral and bilateral agencies, NGOs and private providers of health services. These staff of NMS were determined basing on the sample size selection table using by Krejcie and Morgan (1970) (Appendix A). The sample of the staff of NMS from each category was determined by proportionate sampling.

Table 3.1: Population, Sample Size and Sampling Techniques

Category	Population	Sample size	Sampling technique
Stores and operations	102/225 x 142	64	Simple random/ proportionate sampling
Procurement	13/225 x 142	8	Simple random/ proportionate sampling
Sales and Marketing	80/225 x 142	51	Simple random/ proportionate sampling
Administration	30/225 x 142	19	Simple random/ proportionate sampling
Stakeholders	8	8	Purposive sampling
Total	233	150	

3.5 Sampling Techniques

The study used both simple random sampling and purposive sampling techniques. By simple random sampling, each individual was chosen randomly and entirely by chance, giving each individual in the population the same probability of being chosen for the study (Amin (2005).

Simple random sampling has been selected because the respondents were a large sample size and enabled the generalisability of the findings. Purposive sampling was used to select particular people to provide in-depth views since the study were both qualitative and quantitative. Purposive allowed the researcher to select a small number of rich cases that provides in depth information and knowledge of a phenomenon of interest (Bordens & Abbott, 2011). Purposive sampling helped in obtaining detailed data through oral responses for in-depth analysis.

3.6 Data Collection Methods

3.6.1 Research Questionnaire Survey

The study adopted a questionnaire Survey data collection method. The questionnaire survey involved the use of self-administered questionnaires (SAQs). This method enabled the researcher to cover the respondents quickly and at reasonable cost (Bordens & Abbott, 2011). The required responses were based on a five – point Likert scale with 5 intervals: (1 = Strongly Disagree 2 = Disagree 3 = Undecided 4 = Agree 5 = Strongly Agree). The SAQ based methods was very suitable for the sampled respondents because they could easily respond to the questions because of their proficiency in the English Language which was used in the questionnaire survey.

3.6.2 Interview

Interview is a method that is used when a specific target population is involved. A personal interview survey is conducted to explore the responses of the people through gathering more detailed information. Using in-depth interviews, the respondents were asked their opinions and experiences about asset stakeholder involvement and performance of public institutions. Through interviews, information of much detail was obtained by the researcher by talking to each respondent directly. The method was chosen for the proposed study because respondents

largely readily answered live questions because they found it more convenient to give long answers orally than in writing (Bordens & Abbott, 2011). Interview data was collected from NMS stakeholders who were eight in number.

3.7 Data Collection Instruments

3.7.1 Research Questionnaire

The questionnaire was the main research instrument. The questionnaire was chosen as an instrument of the study because it was self completed by the respondents, it was cheap and more suited because the questions were clear and simple in their meaning, and the choice of responses was limited to fixed categories (Constantinos, 2011). The items were short requiring direct answers based on a five – point Likert scale with 5 intervals of 1 = strongly disagree 2 = disagree 3 = undecided 4 = agree 5 = strongly agree

3.7.2 Interview Guide

An interview guide is a qualitative research technique that involves conducting intensive individual interviews with a small number of respondents to explore their perspectives on a particular idea, program or situation to explore issues in depth (Boyce, 2006). Interviews were conducted on eight respondents for in-depth analysis.

3.8 Data Quality Control

3.8.1 Validity

The researcher looked at content related validity. The test of content validity was established through inter-judge with two research experts, each analysing the questionnaire and the interview guide to their opinion about their accuracy. Each judge rated the items of the instruments on a two point rating scale of relevant (R) and irrelevant (IR). The computation

of CVI (Content Validity Index) was done by summing up the judges ratings and dividing by two to get the average. The formula for CVI was;

$$CVI = \frac{n}{N}$$

Where; n = number of items rated as relevant and N= Total number of items in the instrument.

The CVI for the questionnaire was valid at above 0.70 because the least CVI recommended in a survey study should be 0.7 (Amin, 2005). Some adjustments were made by discarding and replacing items rated irrelevant with relevant ones. The results were as presented in Table 3.2.

3.8.2 Reliability

Reliability for the qualitative instrument was achieved through consultation with the supervisor, fellow students, prolonged engagement and audit trails. Data was systematically checked, focus maintained and there was identification and correcting of errors (Tashakkori & Teddlie, 2003). Reliability for quantitative data was determined by calculating Cronbach Alpha using SPSS 20.0 (Statistical Package for Social Scientists) The instruments were found valid at above 0.70 (70) after a pilot study. A reliability of .70 indicates 70% consistency in the scores that are produced by the instrument (Tavakol & Dennick, 2011). Cronbach results are presented in Table 3.2.

Table 3.2: Reliability and Content Validity Index

Items	Content Validity Index	Cronbach alpha (α) value
Stakeholder Planning	0.75	0.743
Stakeholder Monitoring	0.90	0.710
Stakeholder Feedback	0.80	0.703
Institutional Performance	0.80	0.728

Source: Primary Data

3.9 Data Collection Procedure

The researcher obtained a letter from the head Political and Administrative Science at Uganda Management Institute (UMI), granting permission to proceed with data collection. This letter was presented to the different heads of institutions where data was collected. Consent was obtained from all the respondents participating in the study. Anonymity and confidentiality was observed during data collection and handling the responses. Information was availed to the respondents that the research would not endanger them directly or indirectly and that participation was voluntary. During data collection of interview data, the researcher kept jotting down the major points. Thereafter, data was coded, analysed, and the report written.

3.10 Data Analysis

3.10.1 Quantitative Data

Quantitative data was analysed at two levels that are namely univariate and bivariate. The data analysis at univariate level will be carried out using descriptive statistics that will be the frequencies, mean and standard deviation. At bivariate level, the dependent variable public institutions performance will be correlated with each of the three independent variables from which hypotheses have been developed, namely stakeholder planning, monitoring and

feedback. Also the dependent variable was regressed on the three independent variables. The Statistical Package for Social Sciences (SPSS 20.0) was in carrying out analysis.

3.10.2 Qualitative Data

In analysis of qualitative data, patterns and connections within and between categories of data collected will be established. Data was presented in form of notes, word-for-word transcripts, single words, brief phrases and full paragraphs (Powell & Renner, 2003). Data was interpreted by content analysis composing explanations and substantiating them using the respondents open responses. While analysing qualitative data, conclusions were made on how different variables were related.

3.10.3 Measurement of Variables

The variables will be measured using questions developed basing on the nominal and ordinal scales. The nominal scale was to measure questions on background characteristics. This was because the nominal scale helped label or tag to identify study items. On the other hand, the ordinal scale which is a ranking scale and possesses the characteristic of order was used to measure the items of the independent and dependent variables. The scale helps to distinguish between objects according to a single attribute and direction (Smith &Albaum, 2013). The ranking was a five-point Likert Scale (Where 1 = strongly disagree 2 = disagree 3 = undecided 4 = agree 5 = strongly agree).

3.11 Ethical Considerations

A letter allowing the researcher to collect data was obtained from the University introducing him to the Director of Uganda National Medical Stores. Before collecting data from the respondents, they were assured of the confidentiality and guaranteed that data collected was

only for academic purposes. Appointments were made with the selected respondents to allow them select their own convenient time of participating in the study.

CHAPTER FOUR

PRESENTATION, INTERPRETATION AND ANALYSIS

4.1 Introduction

This chapter contains the presentation, analysis and interpretation of the findings on stakeholder involvement and Performance of performance of public institutions in Uganda. Analysis of the study was based on the objectives of the study that sought establish the relationship between stakeholders' in planning and performance of public institutions, find out the relationship between stakeholders' involvement in monitoring and performance of performance of public institutions in Uganda and the relationship between stakeholders' feedback and performance of public institutions in Uganda.

4.2 Response Rate

A total of 142 survey questionnaires were distributed to the respondents but 140 questionnaires were retrieved fully filled. These were considered sufficient respondents because this was a response rate of 0.60 (60.0%) yet Taylor-Powell and Hermann (2000) suggest that a response rate of 0.60 (60%) is acceptable. More data of qualitative nature was collected by interviews with six stakeholders out of the eight projected to provide interview data.

4.3 Background Characteristics

This section presents facts about the respondents, namely; gender, age category, education levels, working experience and positions of the respondents in the organisation. The data on background characteristics of the respondents is given in Table 4.1.

Table 4.1: Respondents Background Characteristics

Item	Categories	Frequency	Percent
Gender of the Respondents	Male	65	46.4
	Female	75	53.6
	Total	140	100.0
Age Category	Below 30 Years	15	10.7
	30-40 Years	42	30.0
	41-50 Years	77	55.0
	Above 50 Years	6	4.3
	Total	140	100.0
Education levels	Diploma	5	3.6
	Bachelor's Degree	122	87.1
	Post Graduate Degree	13	9.3
	Total	140	100.0
Working experience	Less than 5 years	38	27.1
	6-10 years	83	59.3
	10 and above years	19	13.6
	Total	140	100.0
	Total	140	100.0
Positions in the Organisation	Stores and operations	53	37.9
	Procurement	8	5.7
	Sales and Marketing	61	43.6
	Administration	18	12.9
	Total	140	100.0

Source: Primary Data

The results on gender showed that the modal percentage (53.6%) was females with males being 46.4%. This suggested that the larger percentage of the respondents were females. With regard to age category of the respondents in years, the results showed that the modal percentage (55.0%) of the respondents was of those that were between 41-50 years followed by 30.0% who were between 30-40 years, then 10.7% who were below 30 years and the smaller percentage (4.3%) were those above 50 years. This means that most of the respondents were above 30 years. The results on the highest level of education attained by the respondents showed that the modal percentage (87.1%) of the respondents was of those who had bachelor degrees, 9.3% had post graduate qualifications and 3.6% had diplomas. This

suggests most of the respondents had the higher levels of education that is bachelor degrees and post graduate qualifications.

With respect to the working experience of the respondents, the modal percentage (59.3%) had 6-10 years, 27.1% had less than five years and 27.1% had served for 10 and above years. The results mean that most of the respondents had a working experience of more than five years. In relation to positions of the respondents in the organisation, the modal percentage (43.6%) of the respondents was of sales, 37.9% were stores and operations officers, 12.9% were administrators and 5.7% were procurement officers. The results on the positions of the respondents suggest that different categories of staff in the organisation were represented. The above background helped in obtaining data representative of the different categories of people on stakeholder involvement and Performance of Public Institutions.

4.4 Performance of Public Institutions

The self administered questionnaire (see Appendix B) shows that the dependent variable (DV) namely, performance of performance of public institutions was measured using 10 items. The 10 items measuring performance of public institutions were whether purchases and supplies were made in timely manner, purchases were of high quality, carried out efficiently, there were sufficient drugs in the country and whether basic drugs were of sufficient amounts. The items also included whether health centres had drugs, drugs acquired were those needed, all drugs were used for the purpose purchased for and whether in case of emerges drugs could readily available. The above items were scaled using the five-point Likert scale where code 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree. For each of the above items measuring Performance of National Medical Store, descriptive statistics that included frequencies, percentages and means are presented.

Table 4.2: Frequencies, Percentages and Means of Performance of Public Institutions

Performance of National Institutions	SD	D	U	A	SA	Mean
Purchases are made in timely manner	6* 4.3**	16 11.4	59 42.1	35 25.0	21 15.0	3.36
Supplies are made in a timely manner	3* 2.1**	3 2.1	55 39.3	55 39.3	24 17.1	3.67
Medical purchases are of high quality	-	15 10.7	49 35.0	38 27.1	38 27.1	3.71
Purchases are carried out efficiently	4* 2.9**	22 15.7	43 30.7	29 20.7	42 30.0	3.59
There are sufficient drugs in the country	6* 4.3**	18 12.9	65 46.4	27 19.3	24 17.1	3.32
Basic drugs are of sufficient amounts	9* 6.4**	23 16.4	45 32.1	44 31.4	19 13.6	3.29
Health centres have drugs	6* 4.3**	12 8.6	36 25.7	49 35.0	37 26.4	3.71
The drugs acquired were those needed	11* 8.0**	25 18.2	56 40.9	28 20.4	17 12.4	3.48
All drugs are used for the purpose purchased for	14* 10.0**	21 15.0	25 17.9	41 29.3	39 27.9	3.11

* Cells for frequencies

**Cells for percentages

The results in Table 4.2 on whether purchases were made in timely manner showed that the larger percentage (42.1%) of the respondents was undecided, but cumulatively 40.0% agreed while 15.7% disagreed. The mean = 3.36 was close code 3 which on the five-point Likert scale used to measure the items corresponded to undecided (average/ fair). However, the results close to code 3 that is undecided which is the average; this implied that the respondents indicated fairly, purchases were made in timely manner. As to whether supplies are made in a timely manner, cumulatively the larger percentage (56.4%) agreed while 39.3%

were undecided with 4.2% disagreeing. The mean = 3.67 was close to code 4 which corresponded to agreed (good). The results suggested that largely supplies were made in a timely manner.

With respect to medical purchases were of high quality, cumulatively the larger percentage (54.2%) agreed while 35.0% were undecided and 10.7% disagreed. The mean = 3.71 was close to code 4 which corresponded to agreed (good). The results suggested that largely medical purchases were of high quality. This suggested that the respondents indicated that the procurement process was fairly cost effective. Concerning purchases being carried out efficiently, cumulatively the larger percentage (50.7%) agreed with 37.7% undecided while 2.9% disagreed. The mean = 3.59 was close to code 4 which corresponded to agreed. This suggested that the respondents indicated that largely purchases are carried out efficiently. As regards to whether there were sufficient drugs in the country, the larger percentage (46.4%) was undecided while cumulatively 36.4% agreed and 17.1% disagreed. The mean = 3.32 was close code 3 which corresponded to undecided. With the results close code 3 that is undecided which is the average, it meant that the respondents indicated that fairly there were sufficient drugs in the country.

Regarding whether basic drugs were of sufficient amounts, the larger percentage (45.0%) agreed while 32.1% were undecided with 22.8% disagreeing. The mean = 3.29 was close code 3 which corresponded to undecided. With the results close to code 3 that is undecided which is the average, this suggested that the respondents indicated that fairly basic drugs were of sufficient amounts. With respect to health centres having drugs, cumulatively the majority percentage (61.4%) of the respondents agreed while 25.7% were undecided with 11.9% disagreeing. The mean = 3.71 was close to code 4 which corresponded to agreed. The results thus suggested that largely health centres having drugs. As to whether all the drugs acquired were those needed, the larger percentage (40.9%) was undecided but cumulatively

32.8% agreed while 26.2% disagreed. The mean = 3.48 above code 3 which corresponded to undecided implied that the respondents were undecided. This meant that the respondents indicated that fairly drugs acquired were those needed.

With respect to whether all drugs are used for the purpose purchased for, cumulatively the larger percentage (57.2%) agreed while 17.9% were undecided and 15.0% disagreed. The mean = 3.11 was close code 3 which corresponded to undecided. With the results close code 3 that is undecided which is the average, it meant that the respondents indicated that fairly the drugs acquired were those needed. To establish an overall picture of how the respondents rated performance of national medical store, an average index of Performance of National Medical Store was computed for the 10 items measuring Performance of National Medical Store. The summary of the statistics on the same were the mean = 3.46, median = 3.50 and standard deviation = 0.58. The results showed that mean and the median were almost equal implying normal distribution of the results. Besides the low standard deviation suggested low dispersion and the mean close to code 3 indicated that the respondents were undecided which indicated fair performance of National Medical Store. This meant that the respondents rated performance of National Medical Store as fair. Figure 2 presents a histogram indicating normal distribution of the average index on Performance of National Medical Store.

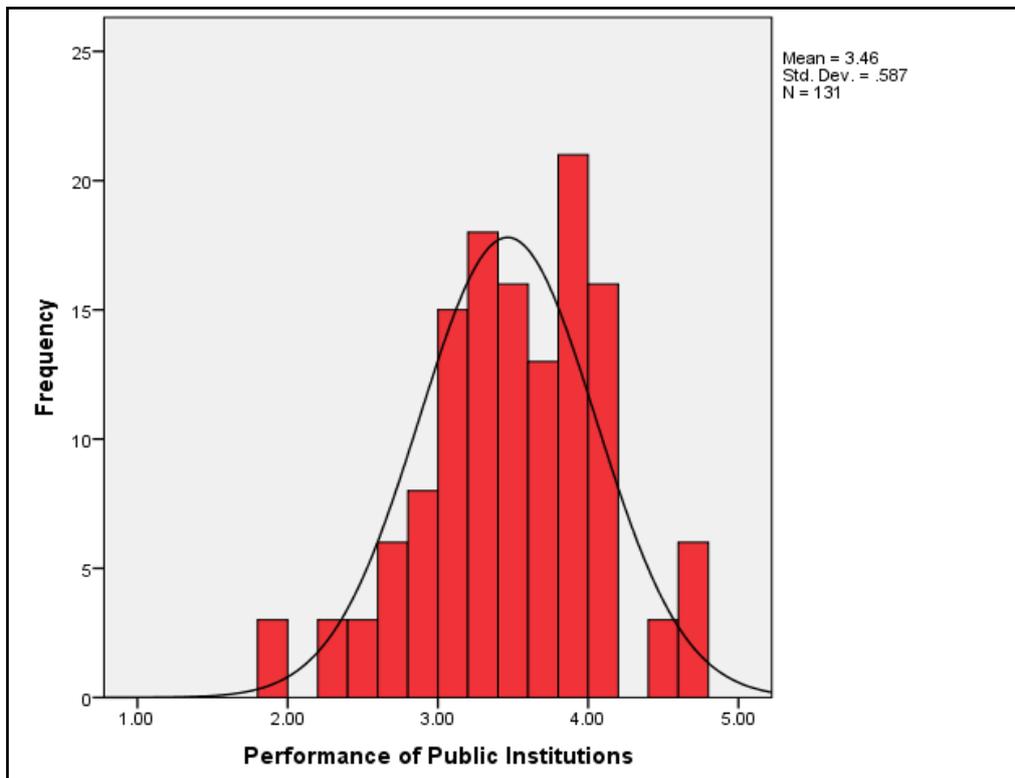


Figure 4.1: Histogram Indicating Performance of National Medical Store

The histogram (Figure 4.1) showed a normal distribution which implies that the index on performance of National Medical Store can be subjected to correlation and linear regression analysis and valid results be obtained.

In the section of the questionnaire requiring the respondents to write down the summary of their opinions about the performance of national medical store, several responses largely indicating that National Medical Store performed were given. One respondent stated, “NMS has really tried its level best to do its mandate of approving, distribution and proper distribution of drugs and medical supplies.” Another respondent noted, “NMs is ensuring that by all means, medicines are delivered on time, in the right quantities and medicines delivered are the one required by the health facilities.” Still another respondent stated, “NMS has efficiently and effectively supplied drugs and medical supplies to healthcare facilities and centres.” Also another respondent remarked, “Performance of NMS is at the top most

performance level as it utilises all the resources at its disposal to achieve its mandate.” However, there was a respondent who stated, “Performance of NMS has improved compared to the previous years.” Another respondent remarked, “There is great improvement and a lot of innovations in the line of supply chain to the last distribution centre have been put in place.” Still one respondent stated;

NMS performance is fair. The performance would be good if there was mutual planning involving all stakeholders especially staff. Others are never thought of. Those that are trained regularly do not transfer the knowledge to the lower staff. All staff should be trained in their specific specialised areas in order to enhance performance. Some staff have not been trained in their specialised areas in the last five years.

Overall, the respondents indicated that performance was good although there is need for more increased stakeholder involvement and human resource improvement.

In the interviews, also a number of responses indicating that NMS was generally performing well were given although a number of respondents indicated that there was still room for improvement. One respondent stated, “Performance of NMS has not attained complete performance levels and a lot still needs to be done. However, for accurate performance to be achieved there is need for more funding from the government.” Another respondent said: “Stakeholders have enabled NMS identify what is needed because of being consulted, this has led to improvement in services delivery of medicines and medical supplies. It has also improved its procurement process and largely NMS procures what is needed.” One respondent said, “A lot is still desired to have total performance by NMS. This is largely because there is a mismatch between funds released by the government and the health sector needs. The budget is never enough.” However, one respondent indicated, “The National Medial Store has to some extent performed well, although, it has sometimes failed to avail drugs and medicines to lower health centres in time. Also delivery schedule at times takes so long for the next delivery to be done which makes most health facilities starve.” Generally,

the results above showed that there was improved performance by NMS although a lot still needed to be done to achieve effective and efficient performance.

4.5 Objective One: To Establish the Relationship between Stakeholders' in planning and Performance of Public Institutions in Uganda

This objective of the study sought to establish whether there was a relationship between stakeholders' in planning and performance of public institutions in Uganda. Question items measuring stakeholder planning were put to the respondents. The items were scaled using the five-point Likert scale where code 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree. Descriptive data is as presented in Table 4.3.

Table 4.3: Frequencies, Percentages and Means for Stakeholder Participation in Planning

Stakeholder Participation in Planning	SD	D	U	A	SA	Mean
Individuals from a variety of sectors participate in deciding medical purchase	23* 16.8**	26 19.0	39 28.5	30 21.9	19 13.9	2.97
Involvement of different stakeholders in planning activities of the National Medical stores has led to taking of quality decisions	5* 3.6**	18 12.9	52 37.1	37 26.4	28 20.0	3.46
Stakeholders participation has enhanced quality assurance of drugs	5* 3.6**	13 9.3	62 44.3	32 22.9	28 20.0	3.46
Different stakeholders support the activities of medical stores	3* 2.1**	9 6.4	37 26.4	51 36.4	40 28.6	3.83
Medical stores activities consider the local needs of the people	3* 2.1**	6 4.3	35 25.0	39 27.9	57 40.7	4.01
There is trust from different stakeholders in the activities of Medical Stores	14* 10.0**	15 10.7	31 22.1	40 28.6	40 28.6	3.55

Source: Primary Data

The results in Table 4.3 regarding whether individuals from a variety of sectors participated in deciding medical purchase cumulatively had equal percentages (35.8%) agreeing and disagreeing respectively while 28.5% were undecided. The mean = 2.97 just below code 3 on the five-point Likert scale used to measure the items corresponded to undecided. The results being just below code 3 that is undecided which is the average; this meant that the respondents indicated to a lesser extent, there was fair participation of individuals from a variety of sectors in deciding medical purchase. In the summary and interview responses, the respondents revealed that there were some key stakeholders who participated in the deciding medical purchase. One respondent stated, “Stakeholders are directly involved in planning activities of NMS since they are always consulted right from the grassroots.” Another respondent stated, “The planning process is highly involving and participatory. Also, another respondent remarked, “stakeholders are widely spread, that involving them all would paralyse activities of NMS. Key stakeholders like health facilities and Ministry of Finance are largely involved when planning. Politicians just meddle into the affairs of NMS with selfish interest.” However, there was one who disagreed, stating that, “NMS planning has remained the prerequisite of senior management. There is no involvement of the operational staff.” The views above mean that some stakeholders were involved in planning; nevertheless operational staff involvement had some shortcoming.

In the interviews, the respondents also indicated that there was participation of a variety of key stakeholders. One respondent said;

A variety of stakeholders participate in NMS planning. These include Ministry of Health Officials, Fuel Group/ Pharmaceutical Healthcare Distributors, Makerere University and the Infectious Disease Institute, Donors such as USAID and NGOs working on behalf of donors such as Management Sciences for Health (MSH) and lower local governments. This has produced pharmaceutical supply chain stability and sustainability and improved capacity of NMS.

Another respondent stated, “Stakeholders have helped NMS to identify what is needed because of being consulted. This has led to improvement in services delivery of medicines and medical supplies because we procure what is needed.” Therefore, the above results showed that there was involvement of some key stakeholders in the planning of medical purchases.

Regarding involvement of different stakeholders in planning activities of the National Medical stores leading to taking of quality decisions, cumulatively the larger percentage (46.6%) of the respondents agreed with 37.1% being undecided while 16.5% disagreed. The mean = 3.46 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly involvement of different stakeholders in planning activities of the National Medical stores leading to taking of quality decisions. In relation to the above, with respect to whether stakeholders’ participation had enhanced quality assurance of drugs, larger percentage (44.3%) of the respondents was undecided but 42.9% agreed while 12.6% of the respondents disagreed. The mean = 3.46 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly stakeholders participation had enhanced quality assurance. In the interviews the respondents revealed that stakeholder involvement had improved decision making and quality assurance of drugs, one respondent stated, “NMS is not an Island and has many stakeholders ranging from financiers, government agents and even beneficiaries whose views improves decision making. For medical stores to derive quality decisions on which to base purchase decision, different stakeholders’ views contributes a lot and enhanced quality assurance.” Another respondent stated;

Stakeholders influence on decision making has helped NMS to make good decisions on procuring and stocking of right medicines and supplies in sufficient quantities for the various levels of care. Their participation in decision making also helps NMS to fully utilize the limited resources available. Besides, participation acts a check and balance which helps in quality assurance.

Therefore, from the results above it can be deduced that involvement of different stakeholders in planning activities of the National Medical stores leading to taking of quality decisions.

With respect to different stakeholders supporting the activities of medical stores, cumulatively the majority percentage (65.0%) agreed with 26.4% undecided and 8.5% disagreeing. The mean = 3.83 close to code 4 suggested that different stakeholders supporting the activities of medical stores. In the interviews the respondents identified different stakeholders that supported the activities of medical stores. These included Ministry of Health, Ministry of Finance, Donors and NGOS. With regard to medical stores activities considering the local needs of the people, cumulatively the majority percentage (68.0%) agreed with 25.0% being undecided and 6.4% disagreeing. The mean = 4.01 close to code 4 suggested that National Medical Stores activities considered the local needs of the people. In the open responses, one respondent stated, “meetings are held with key clients and this helps in identifying their needs.” Another respondent stated, “The facilities throughout the year come up with annual requirements and budgets which NMS bases on to plan. This thus helps in identifying the local needs of the people.” Also a respondent revealed, “Through the participation of facility in charges in the development of procurement plans, procurement plans reflect the needs of all health facilities in the country.” The views above mean that National Medical Stores activities considered the local needs of the people and this was possible because of involvement of different stakeholders in the procurement process.

As regards whether there was trust from different stakeholders in the activities of National Medical Stores, cumulatively the majority (57.2%) agreed with 22.1% being undecided while 20.7% disagreed. The mean = 3.55 close to code 4, on the scale used indicated that the respondents agreed. Therefore, it could be concluded that there was trust from different stakeholders in the activities of National Medical Stores. To establish an overall picture of

how the respondents rated stakeholder participation in planning, an average index of stakeholder participation in planning was computed for the six items measuring stakeholder participation in planning. The summary of the statistics on the same were the mean = 3.53, median = 3.50 and standard deviation = 0.76. The results showed that mean and the median were almost equal implying normal distribution of the results. Besides the low standard deviation suggested low dispersion and the mean close to code 4 indicated that the respondents agreed that stakeholder participation in planning was good. This meant that the respondents rated stakeholder participation in planning as good. Figure 4.2 presents a histogram indicating normal distribution of the average index on stakeholder participation in planning.

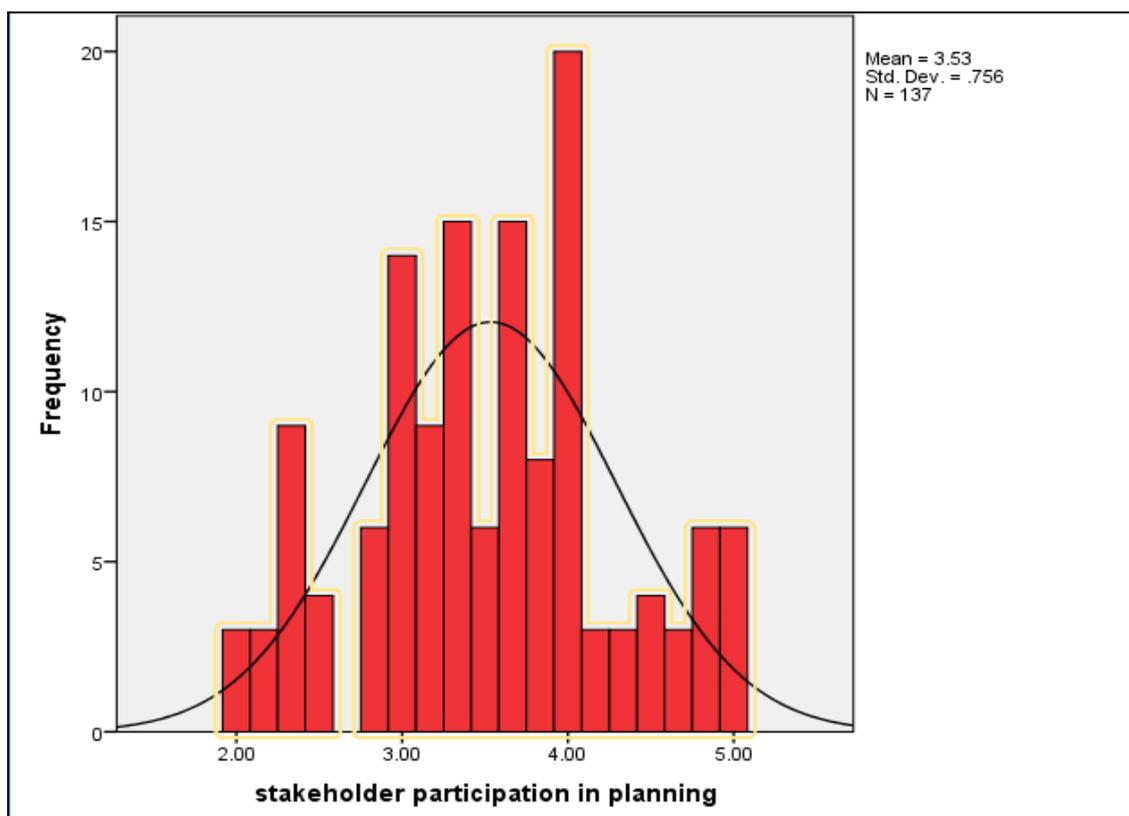


Figure 4.2: Histogram Indicating Stakeholder Participation in Planning

Overall, the results above mean that the respondents revealed that there was stakeholder participating in planning of National Medical Stores activities. This means that the organisation had embraced stakeholder participation in the running of its activities.

4.5.1.1 Correlation Analysis between Stakeholder Planning and Performance of Public Institutions

To establish whether there was a relationship between stakeholder planning and performance of public institutions, a correlation analysis was carried out. The results are presented in Table 4.4.

Table 4.4: Correlation Results on Stakeholder Planning and Performance of Public Institutions

		Stakeholder Planning	Performance of Public Institutions
Stakeholder Planning	Pearson Correlation	1	0.313** 0.000
	Sig. (2-tailed)		
Performance of Public Institutions	Sig. (2-tailed)	0.313** 0.000	1

****.** Correlation is significant at the 0.05 level (2-tailed).

The results in Table 4.4 suggest that there is a positive significant relationship between stakeholder planning and performance of public institutions ($r = 0.313$, $p < 0.000$). The critical value was significant at below 0.05 level indicating the acceptance of the research hypotheses that there is a positive significant relationship between stakeholder planning and performance of public institutions.

4.5.1.2 Linear Regression Model for Prediction of Performance of Public Institutions using Stakeholder Planning

At the confirmatory level, to ascertain whether stakeholder planning predicted performance of public institutions, the dependent variable namely, performance of public institutions was regressed on stakeholder planning the independent variable. The results are represented Table 4.5.

Table 4.5: Regression of Performance of Public Institutions on Procurement Planning

Model	Standardised B	Sig. P
Stakeholder Involvement in planning	0.313	0.000

Adjusted R² = 0.091

F = 13.700, p = 0.000

a. Dependent Variable: Performance of Public Institutions

The results in Table 4.5 show that, stakeholder planning explained 9.1% of the variation in performance of public institutions, (adjusted R² = 0.091). This means that 89.1% was accounted for by other factors not considered in this study. The regression model was good (F = 13.700, p = 0.000 < 0.05). These results showed that stakeholder planning ($\beta = 0.313$, p = 0.000) significantly predicted Performance of Public Institutions.

4.6 Objective Two: To Find Out the Relationship between Stakeholders’

involvement in monitoring and Performance of Public Institutions in Uganda

This objective of the study sought to establish whether there was a relationship between stakeholders’ involvement in monitoring and performance of public institutions. A number of items seeking to establish how stakeholders’ involvement in monitoring was carried out were put to the respondents. The above items were scaled using the five-point Likert scale where code 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree. Data is presented starting with quantitative and then qualitative data. Descriptive data is as presented in Table 4.6.

Table 4.6: Frequencies, Percentages and Means for Stakeholders’ Monitoring

Stakeholders’ Monitoring	SD	D	U	A	SA	Mean
Stakeholders monitor efficiency in the procurement and supply of drugs	-	12* 8.6**	46 32.9	76 54.3	6 4.3	3.54
Individuals from different sectors monitor activities National Medical Stores	2* 1.4**	15 10.7	55 39.3	41 29.3	27 19.3	3.54
Monitoring by different stakeholder has led to accountable use of resources	6* 4.3**	37 26.4	18 12.9	53 37.9	26 18.6	3.40
Stakeholders act as checks and balances in the use of resources by National Medical Stores	5* 3.6**	28 20.0	37 26.4	48 34.3	22 15.7	3.39
The stakeholders ensure that National Medical Stores fulfils its role	8* 5.7**	46 32.9	32 22.9	36 25.7	18 12.9	3.07

Source: Primary Data

The results in Table 4.6 on whether stakeholders’ monitored efficiency in the procurement and supply of drugs showed that cumulatively, the larger percentage (58.6%) of the

respondents agreed, while 32.9% were undecided and 8.6% disagreed. The mean = 3.54 was close code 4 which on the five-point Likert scale used to measure the items corresponded to agreed. This implied that the respondents indicated that stakeholders monitored efficiency in the procurement and supply of drugs. In the open responses of the questionnaire survey and interviews the respondents gave views supporting the effect that stakeholders' monitored efficiency in the procurement and supply of drugs. One respondent stated;

Stakeholders are extremely and highly vital. Stakeholders such as the public play a vital role in monitoring activities because they are the customers. They provide feedback which NMS uses to effectively offer better services. The stakeholders are empowered to know what belongs to the people.

Another respondent remarked, "Stakeholder feedback enables NMS to know whether their targets are being met or there are many activities not yet carried." A respondent also reported that, "NMS comes up with a financial report annually which is scrutinized by the Auditor General and then later the parliament. This is monitoring that puts checks and balances promoting efficiency in procurement." And another respondent said, "NMS activities are strongly monitored by stakeholders because NMS accounts for all the money it spends." Also, one respondent stated, "Efficiency and effectiveness has been generally achieved in the delivery and supply of medical supplies by NMS because of increased stakeholder monitoring." The results above on the whole showed that stakeholders monitored efficiency in the procurement and supply of drugs.

With respect to whether individuals from different sectors monitored activities of National Medical Stores, cumulatively the larger percentage (48.6%) of the respondents agreed while 39.3% were undecided and 11.8% disagreed. The mean = 3.54 was close code 4 which corresponded to agreed. This implied that the respondents agreed that individuals from different sectors monitor activities National Medical Stores. In the open responses of the questionnaire survey and interviews the respondents concurred that individuals from different sectors monitored activities of National Medical Stores. The respondents revealed that this

included the public, newspapers, local governments, health facilities, government agencies and oversight bodies such as the Inspectorate of Government and the Auditor General. One respondent stated;

A good number of stakeholders are interested in NMS activities and knowledgeable about what it does. For instance, whereas the media is not part of direct stakeholder of NMS, it has done a lot in monitoring activities of NMS and influences certain decisions especially in the purchase and supply of drugs.

Another respondent stated, “All stakeholder requirements may not participate fully be met for instance all required medicines due to budget constraints. However, constant proper stakeholder involvement helps keeping stakeholders informed.” Overall, the results above showed that individuals from different sectors monitored activities of National Medical Stores.

As to whether monitoring by different stakeholders had led to accountable use of resources, cumulatively the larger percentage (53.5%) of the respondents agreed while 30.8% disagreed and 12.9% were undecided. The mean = 3.40 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly monitoring by different stakeholders had led to accountable use of resources. Relatedly, as to whether stakeholders acted as checks and balances in the use of resources by National Medical Stores, cumulatively the larger percentage (50.0%) of the respondents agreed while 26.4% were undecided and 23.6% disagreed. The mean = 3.39 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly stakeholders acted as checks and balances in the use of resources by National Medical Stores.

As regards the stakeholders ensuring that National Medical Stores fulfilled its role, cumulatively the equal percentage (38.6%) of the respondents agreed and disagreed

respectively with 22.9% being undecided. The mean = 3.07 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly the stakeholders ensured that National Medical Stores fulfilled its role. This means that stakeholders ensured that National Medical Stores fulfilled its role. To present an overall image of how the respondents rated their stakeholder participation in monitoring, an average index of stakeholder participation in monitoring was computed for the five items measuring stakeholder participation in monitoring in Table 4.4. The summary of the statistics on the same were the mean = 3.39, median = 3.30 and standard deviation = 0.693. The results showed that mean and the median were close suggesting normal distribution of the results. Besides the low standard deviation suggested low dispersion while the mean close to code 3 indicated that the respondents were undecided. This meant that the respondents rated stakeholder participation in monitoring as being fair. The curve in Figure 4.3 suggested normal distribution of the average index on stakeholder participation in monitoring.

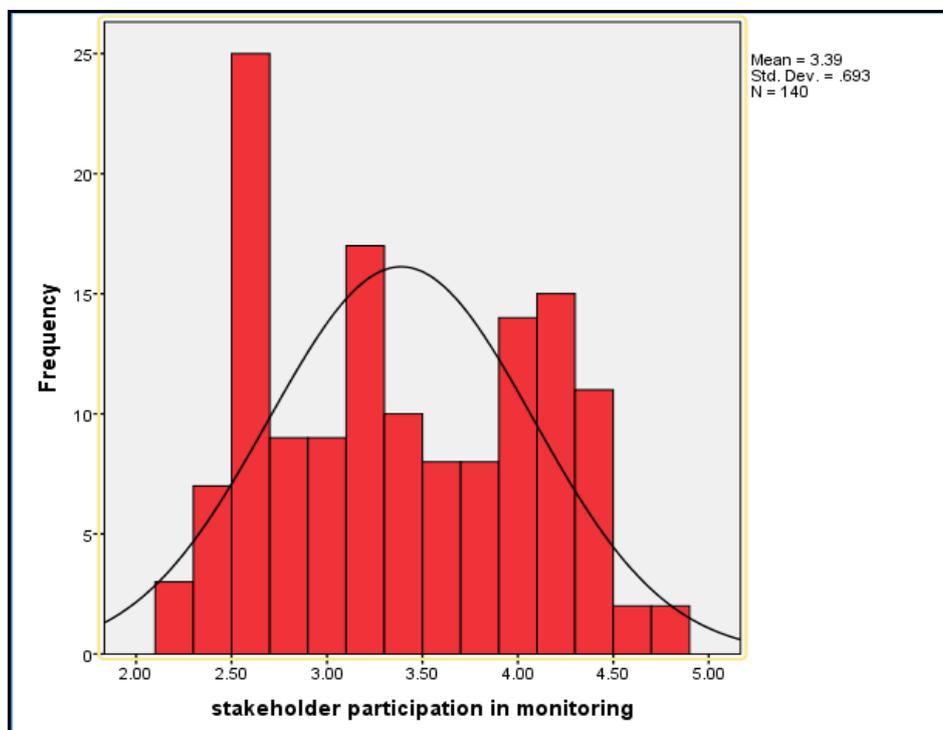


Figure 4.3: Histogram Indicating Stakeholder Participation in Monitoring

Overall, the results above mean that the respondents revealed that there was stakeholder participation in monitoring. This means that stakeholders were involved monitoring the activities of National Medical Stores.

4.5.1.1 Correlation Analysis between Stakeholder Monitoring and Performance of Public Institutions

To establish whether there was a relationship between stakeholder monitoring and performance of public institutions, a correlation analysis was carried out. The results are presented in Table 4.7.

Table 4.7: Correlation Results on Stakeholder Monitoring and Performance of Public Institutions

		Stakeholder Monitoring	Performance of Public Institutions
Stakeholder Monitoring	Pearson Correlation Sig. (2-tailed)	1	0.261** 0.007
Performance of Public Institutions	Sig. (2-tailed)	0.261** 0.007	1

****.** Correlation is significant at the 0.05 level (2-tailed).

The results in Table 4.7 suggest that there is a positive significant relationship between stakeholder monitoring and performance of public institutions ($r = 0.261$, $p < 0.007$). The critical value was significant at below 0.05 level indicating the acceptance of the research

hypotheses that there is a positive significant relationship between stakeholder monitoring and performance of public institutions.

4.5.1.1 Linear Regression Model for Prediction of Performance of Public Institutions using Stakeholder Monitoring

At the confirmatory level, to ascertain whether stakeholder monitoring predicted performance of public institutions, the dependent variable namely, performance of public institutions was regressed on stakeholder monitoring the independent variable. The results are represented Table 4.8.

Table 4.8: Regression of Performance of Public Institutions on Procurement Planning

Model	Standardised B	Sig. p
Stakeholder Involvement in planning	0.325	0.000
Adjusted R ² = 0.089		
F = 13.140, p = 0.000		

a. Dependent Variable: Performance of Public Institutions

The results in Table 4.8 show that, stakeholder planning explained 8.9% of the variation in performance of public institutions, (adjusted R² = 0.089). This means that 91.1% was accounted for by other factors not considered in this study. The regression model was good (F = 13.140, p = 0.000 < 0.05). These results showed that stakeholder monitoring ($\beta = 0.313$, p = 0.000) significantly predicted performance of public institutions.

4.7 Objective Three: To Establish the Relationship between Stakeholders' Feedback and Performance of Public Institutions in Uganda

This objective of the study sought to establish whether there was a relationship between stakeholders' feedback and performance of public institutions. A number of items seeking to establish how stakeholders' feedback was carried out were put to the respondents. The items were scaled using the five-point Likert scale where code 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree. For each of the above items measuring stakeholder participation in planning, descriptive statistics that include frequencies, percentages and means are presented. Data is presented starting with quantitative and then qualitative data. Descriptive data is as presented in Table 4.9.

Table 4.9: Frequencies, Percentages and Means for Stakeholders' Feedback

Stakeholders' Feedback	SD	D	U	A	SA	Mean
There is timely stakeholder feedback about performance of National Medical Stores	5* 3.6**	21 15.0	30 21.4	66 47.1	18 12.9	3.51
There is increased prominence of stakeholder voice	5* 3.6**	16 11.4	67 47.9	39 27.9	13 9.3	3.28
Public views influence activities of the National Medical Stores	7* 5.0**	20 14.3	52 37.1	34 24.3	27 19.3	3.39
Public concerns are the basis for activities of the National Medical Stores	2* 1.4**	3 2.1	47 33.6	60 42.9	28 20.0	3.78
Attitudes of stakeholders are put in consideration when implementing programmes of National medical stores	7* 5.0**	54 38.6	21 15.0	36 25.7	22 15.7	3.09
Consider the stakeholders perspectives of the activities	13* 9.6**	13 9.6	59 43.7	29 21.5	21 15.6	3.24

Source: Primary Data

The results in Table 4.5 on whether there was timely stakeholder feedback about performance of National Medical Stores showed that cumulatively, the majority percentage (60.0%) of the respondents agreed, while 21.4% were undecided and 18.6% disagreed. The mean = 3.51 was close code 4 which on the five-point Likert scale used to measure the items corresponded to

agreed. This implied that the respondents indicated that there was timely stakeholder feedback about performance of National Medical Stores. In relation to the above, the results in Table 4.5 on whether on whether there was increased prominence of stakeholder voice indicated that the larger percentage (47.9%) of the respondents were undecided while cumulatively 37.1% agreed and 14.0% disagreed. The mean = 3.28 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly there was increased prominence of stakeholder voice. In the open responses of the questionnaire and interviews, regarding whether there was timely stakeholder feedback about performance of National Medical Stores and increased prominence of stakeholder voice, the respondents gave a number of related responses which were in agreement. For instance, one respondent stated that “To a large extent because NMS hold stakeholders consultation meetings and works on integrating their views in its planning process.” Another respondent stated that “NMS usually makes regional consultation meetings with regional stakeholders and acquires regular feedback regarding performance. Besides, NMS has regional offices to ensure that needs of the different stakeholders especially the beneficiaries are catered for.” It was also revealed that NMS received feedback from government agencies such the auditor general, parliament and Inspectorate General of Government and also from local governments and the health facilities and all these influenced its activities. However, one respondent stated;

Stakeholder – especially operational staff are never consulted even on most critical activities. Despite the fact that the operational staff do a lot of work where the senior management bases their decisions, the influence of operational staff on some decisions is minimal and never considered at all.

The results above suggest that there was timely stakeholder feedback about performance of National Medical Stores and increased prominence of stakeholder voice. However, somehow, internal stakeholders that are the staff were not being fully involved in providing feedback to management of the organisation.

With respect to public views influencing activities of the National Medical Stores, cumulatively the larger percentage (43.6%) of the respondents agreed with 37.1% being undecided while 18.3% disagreed. The mean = 3.39 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that respondents indicated that fairly public views influencing activities of the National Medical Stores. Related to the above, regarding whether public concerns are the basis for activities of the National Medical Stores, cumulatively the majority percentage (60.9%) of the respondents agreed while 33.6% were undecided and 3.5% of the respondents disagreed. The mean = 3.78 was close code 4 which corresponded to agreed. This implied that the respondents indicated that public concerns were the basis for activities of the National Medical Stores. In the open responses of the questionnaire and interviews, concerning whether public views influenced activities of the National Medical Stores and concerns were the basis for activities of the National Medical Stores, several views agreeing to same were provided. It was revealed that feedback from different sectors such as the public and the media influenced activities of NMS. For instance, one respondent stated, “To a greater extent, stakeholder feedback influences NMS performance in a way that medicines and other medical supplies are procured and supplied basing on their needs.” Another respondent indicated, “To a great extent stakeholders’ feedback influences NMS activities because it highlights the customer needs, the areas that require improvement of both NMS and the country as a whole. There was also a respondent who stated, “After receiving feedback NMS responds positively according to what is lacking in accordance with the feedback received.” Generally, the views above showed that public views influenced activities of the National Medical Stores and concerns were the basis for activities of the National Medical Stores.

As regards with attitudes of stakeholders being put in consideration when implementing programmes of National medical stores, cumulatively the larger percentage (43.6%) of the

respondents disagreed with 41.4% agreeing while 15.0% were undecided. The mean = 3.09 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that attitudes of stakeholders were put in consideration when implementing programmes of National medical stores. In relation to the above, concerning whether there was considering of the stakeholders perspectives of the activities, larger percentage (43.7%) of the respondents was undecided but cumulatively 37.1% agreed while 19.2% of the respondents disagreed. The mean = 3.24 close to code 3 suggested that the respondents were undecided. Undecided being the average, this meant that there was considering of the stakeholders perspectives of the activities. In the interviews, the respondents gave views that concurred with the above statistical results that the attitudes of stakeholders and their perspectives were put in consideration when implementing programmes of National medical stores. For instance, one respondent revealed, “To a very big extent, stakeholders influence performance of NMS because we keep improving according to what our stakeholders want.” Another respondent stated, “Stakeholder concerns are put into consideration. However, where there are conflicting stakeholder opinions, the mandate of NMS and national policy override.” There was also a respondent who remarked that, “Stakeholder feedback is very important to performance of NMS as it helps its activities since stakeholder feedback streamlines activities.” And also one other respondent said, “Public views and concerns guide the activities undertaken by the NMS because it aims at serving the interests of the people.” Overall, the views above show that the attitudes of stakeholders and their perspectives were put in consideration when implementing programmes of National medical stores.

To establish an overall picture of how the respondents rated stakeholders’ feedback, an average index of stakeholders’ feedback was computed for the 6 items measuring stakeholders’ feedback. The summary of the statistics on the same were the mean = 3.35, median = 3.33 and standard deviation = 0.654. The results showed that mean and the median

were almost equal implying normal distribution of the results. Besides the low standard deviation suggested low dispersion and the mean close to code 3 indicated that the respondents were undecided which indicated that stakeholders' feedback was fair. This meant that the respondents rated stakeholders' feedback from stakeholders of National Medical Store as fair. Figure 4.4 presents a histogram indicating normal distribution of the average index on stakeholders' feedback.

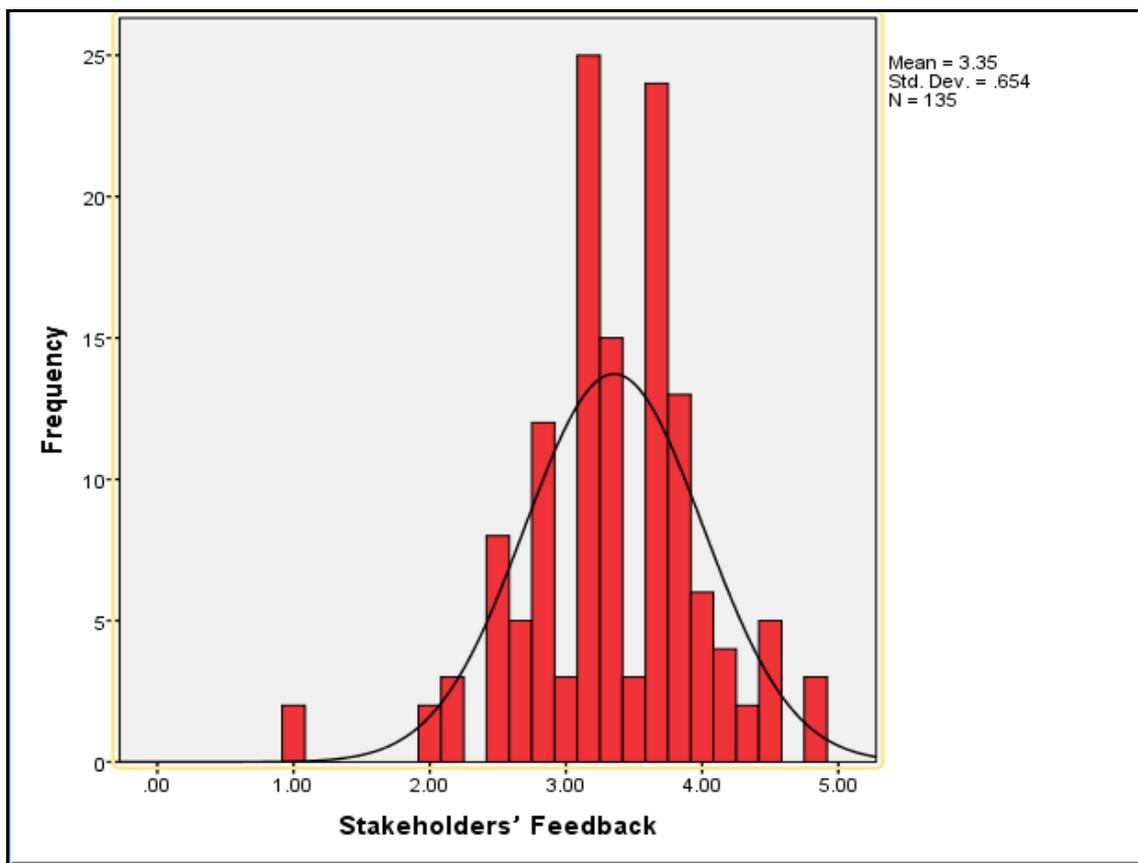


Figure 4.4: Histogram Indicating Stakeholders' Feedback

4.5.1.1 Correlation Analysis between Stakeholder Feedback and Performance of Public Institutions

To establish whether there was a relationship between stakeholder Feedback and performance of public institutions, a correlation analysis was carried out. The results are presented in Table 4.10.

Table 4.10: Correlation Results on Stakeholder Feedback and Performance of Public Institutions

	Stakeholder Feedback	Performance of Public Institutions
Stakeholder Feedback Pearson Correlation Sig. (2-tailed)	1	0.580** 0.000
Performance of Public Institutions Sig. (2-tailed)	0.580**** 0.000	1

****.** Correlation is significant at the 0.05 level (2-tailed).

The results in Table 4.10 suggest that there is a positive significant relationship between stakeholder Feedback and performance of public institutions ($r = 0.580^{**}$, $p < 0.000$). The critical value was significant at below 0.05 level indicating the acceptance of the research hypotheses that there is a positive significant relationship between stakeholder Feedback and performance of public institutions.

4.5.1.1 Linear Regression Model for Prediction of Performance of Public Institutions using Stakeholder Feedback

At the confirmatory level, to ascertain whether stakeholder feedback predicted performance of public institutions, the dependent variable namely, performance of public institutions was regressed on stakeholder feedback the independent variable. The results are represented Table 4.11.

Table 4.11: Regression of Performance of Public Institutions on Procurement Planning

Model	Standardised B	Sig. p
Stakeholder Involvement in planning	0.580	0.000

Adjusted R² = 0.332

F = 62.999, p = 0.000

a. Dependent Variable: Performance of Public Institutions

The results in Table 4.11 show that, stakeholder planning explained 33.2% of the variation in performance of public institutions, (adjusted R² = 0.332). This means that 91.1% was accounted for by other factors not considered in this study. The regression model was good (F = 62.999, p = 0.000 < 0.05). These results showed that stakeholder feedback ($\beta = 0.580$, p = 0.000) significantly predicted performance of public institutions.

CHAPTER FIVE

SUMMARY, DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

Chapter five presents the summaries, discussions, conclusions and recommendations based on the objectives of the study. In addition, the chapter presents limitations of the study and areas for further study.

5.2 Summary of the Findings

Summary of the findings are presented below based on the objectives of the study namely.

5.2.1 Objective One: To Establish the Relationship between Stakeholders' in planning and Performance of Public Institutions in Uganda

The study established a positive significant relationship between stakeholder participation in planning and performance of public institutions. Performance of public institutions was shown to be positively predicted by participation in planning.

5.2.2 Objective Two: To Establish the Relationship between Stakeholders' involvement in monitoring and Performance of Public Institutions in Uganda

The results showed that there was a positive significant relationship between stakeholders' involvement in monitoring and performance of public institutions. Performance of public institutions was found out to be positively predicted by stakeholder monitoring.

5.2.3 Objective Three: To Establish the Relationship between Stakeholders' Feedback and Performance of Public Institutions in Uganda

The findings of the study indicated that a positive significant relationship between stakeholders' feedback and performance of public institutions. Performance of public institutions was found out to be positively predicted by stakeholder feedback.

5.3 Discussion

5.3.1 Objective One: To Establish the Relationship between Stakeholders' in planning and Performance of Public Institutions in Uganda

In the first place, the study found out that there was involvement of some key stakeholders in the planning of medical purchases which influenced performance of NMS. This finding concurs with Veronesi and Keasey (2009) who established that increased in stakeholder voice was a fundamental means through which to formulate and implement successful strategies. This means that if there is participation, there will be successful organisational performance. The findings also revealed that involving of different stakeholders in planning activities of the National Medical stores led to taking of quality decisions. This finding is consistent with the finding by Edelenbos and Klijn (2005) that greater input in decision making from a variety of parties generated a variety of ideas and potentially enriched process substance. Therefore, involving of different stakeholders leads to taking of quality decisions.

The study further found out that stakeholders participation enhanced quality assurance. This finding supports the finding by Kessler (2004) if individuals are consulted, they feel the process was fair and their inputs were used, it will ultimately enhance their compliance hence quality assurance. Therefore, to enhance quality assurance, there is need for stakeholder involvement because people will be willing to comply. Still the study established that different stakeholders supporting the activities of the organisation enhanced performance.

This finding is similar to the finding by Kessler (2004) that participants who view the process as legitimate generally feel a strong obligation to comply with the results, even if the mandates contradict their self-interests. Therefore, this will help the organisation to perform because of the unwavering support of the stakeholders.

The study revealed that involvement of the different stakeholders led to the considering the local needs of the people. This finding is consistent with the finding by Riege and Lindsay (2006) that successful public policy depended on effective coordination of many stakeholders, necessitating a chain of processes that involved analysis, evaluation and reconsideration because through information exchange, policies reflected shared values of society. Therefore, local needs can be easily identified through stakeholder involvement. The investigations of the study also revealed that involvement of different stakeholders promoted trust which promoted performance of the organisation. This finding agrees with the finding by Sinclair (2011) that the benefits of stakeholder engagement included enhanced trust and credibility through improved relationships at various levels of the organisation and the faster approval of the projects with stakeholder managers fostering organisational interaction and playing an important role in issues resolution and through dedicated resources and early and open exchange of information. This means that stakeholder involvement was important to enhance trust which is a prerequisite for improved performance.

5.3.2 Objective Two: To Find Out the Relationship between Stakeholders'

involvement in monitoring and Performance of Public Institutions in Uganda

To begin with, the study found out that stakeholders' monitored efficiency in the procurement and supply influencing performance of the organisation. This finding is consistent with the finding by Gaspar et al. (2014) that stakeholders were involved in monitoring government projects and indeed councillors, local government officials, central government and

parliament because of their power and interest demanded performance and this promoted efficiency in projects implementation. This means that stakeholder involvement in monitoring promoted efficiency. Also the findings of the study showed that with stakeholder involvement, individuals from different sectors monitored activities of NMS affecting performance. This finding is similar to the finding by Burns and Zhou (2010) that existence of various inspection teams that inspected local governments' projects to ensure compliance with key financial and revenue targets. This performance of organisation can be enhanced by participation of a variety of stakeholders.

The study found out that stakeholders acted as checks and balances in the use of resources influencing performance. This finding also agrees with Burns and Zhou (2010) who found out that existence of various inspection teams checked on the progress of all indicators and objectives of the organizations. Further, the findings of the study indicated that monitoring by different stakeholders led to accountable using of resources. This finding agrees with the finding by Gibson et al. (2005) that community involvement with citizen committees appointed in specific sectors to provide advice on specific issues promoted accountability because of stakeholder teams inspecting local government projects. Thus, this means that performance of organisations can be promoted by monitoring of different stakeholders because they promote accountability.

Further, the findings of the study revealed that stakeholders ensured that the organisation fulfilled its role. This finding is consistent with the finding by Tooley et al. (2010) that stakeholders placed more importance on what local authorities had achieved or intended to achieve with entrusted resources (financial and non-financial performance), and were less concerned with the stewardship of resources (financial and non-financial position). This means that stakeholder help ensure that organizations succeed in their roles.

5.3.3 Objective Three: To Establish the Relationship between Stakeholders' Feedback and Performance of Public Institutions in Uganda

In the first place, stakeholders provided timely feedback enhancing performance. This finding agrees with Ordenes et al. (2014) who found out that the ability to timely assess customer experience through feedback represented a prerequisite for successful co-creation processes. This means that effective performance of organizations can be enhanced by timely feedback from stakeholder. The findings of the study also revealed that public views influenced activities of the organisation. This finding is similar to the finding by Veronesi and Keasey (2009) that the increased prominence of stakeholder voice positively contributed to bridge the gap between the activities of the board with those of the rest of the organization. This means that stakeholder voice enhanced organizational performance.

The results of the study also indicated that with stakeholder involvement public concerns were the basis for activities of the organisation. This finding is consistent with the findings by Veronesi and Keasey (2009) that increased prominence of stakeholder voice helped to obtain feedback on strategic initiatives and this enabled giving adequate prominence to public views/ concerns. This means that stakeholder involvement led to taking care of public concerns. The findings of the study further showed that stakeholder involvement led to considering of attitudes of stakeholders when implementing programmes hence performance. This finding agrees with the finding by Cengiz (2010) that knowledge of customer or stakeholder perception and attitudes about an organisation's business greatly enhanced its opportunity to make better business decisions because they knew the requirements or expectations of those they serves and could be able to determine if were meeting those requirements. Thus obtaining attitudes and perceptions of stakeholders was important for the performance of organisations.

The study also revealed that with stakeholder involvement, there is considering of the stakeholders perspectives of the activities which influences the performance of an organisation. This finding support the finding by Mackie (2008) carried on a literature review on organisational performance management in the Scottish government context. The results of the review indicated that the stakeholder regular feedback affects government organisations ability to provide quality services. Accordingly, this included issues about the effectiveness of service delivery and overall service and satisfaction. In general, the stakeholder perspective was the primary focus for a public service. This means that stakeholder involvement led to the considering of their perspectives influencing performance of the organisation.

5.4 Conclusions

- i. Regarding hypothesis relating stakeholders' in planning and performance of public institutions, it was concluded that stakeholders' in planning related to performance of public institutions. Accordingly, when stakeholders from a variety of sectors participate in decision making, planning activities and support the organisation's activities there will be improved performance.
- ii. With respect to the second hypothesis relating stakeholders' involvement in monitoring and performance of public institutions, it was deduced that stakeholders' involvement in monitoring related to performance of public institution. With stakeholder monitoring, there was efficiency in the procurement and supply process, accountability in use of resources and fulfilling of organisational roles.
- iii. With regard to the third hypothesis that there is a relationship between stakeholders' feedback and performance of public institutions, it was concluded that stakeholders' feedback related to performance of public institutions. Accordingly, timely stakeholder

feedback, increased prominence of stakeholder voice, public concerns being the basis for activities of the organisation and putting in consideration stakeholders' attitudes and perceptions when implementing programmes influenced performance of the organisation.

5.5 Recommendations

Regarding stakeholder involvement in planning, government organisations and other organisations involvement in provision service should promote involvement of stakeholders in organisational planning. This should be through involving a variety of stakeholders in planning and decision making of the organisation.

With respect to stakeholder monitoring, government organisations and other organisations should entice the different stakeholders to constantly monitor their activities. This can be carried out through making stakeholders monitor efficiency, activities performance and usage of resources.

With regard to stakeholder feedback, government organisations and other organisations should encourage different stakeholders to provide regular feedback about the services of the organisation. This can be done through meeting, the media, consultations and workshops and conferences among others.

5.6 Study Limitations

Whereas this study makes significant contributions as far as suggesting how to use stakeholder involvement to enhance organisational performance, the study still has a number of limitations that cannot be ignored. In the first place the study considered an individual government organisation with a specialised responsibility. Therefore, transferability of the

findings to other government organisations such as local governments may pose a challenge. Also, the study only considered stakeholder involvement ignoring the role extraneous variables namely, government policies, institutional budget, human resource quality and infrastructure development. This thus leaves the gap for further research as suggested here under.

5.7 Suggestion for Further Research

This study looked only at stakeholder involvement in relation to performance of public institutions, specifically NMS. Therefore, further research should be carried out on stakeholder involvement in other institutions to confirm dependability of the findings of this study. Further research should also attempt to relate the extraneous variables namely government policies, institutional budget, human resource quality and infrastructure development to performance of public institutions.

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APPENDICES

APPENDIX A

TABLE FOR DETERMINING SAMPLE SIZE FROM A GIVEN POPULATION

<i>N</i>	<i>S</i>	<i>N</i>	<i>S</i>	<i>N</i>	<i>S</i>
10	10	220	140	1200	291
15	14	230	144	1300	297
20	19	240	148	1400	302
25	24	250	152	1500	306
30	28	260	155	1600	310
35	32	270	159	1700	313
40	36	280	162	1800	317
45	40	290	165	1900	320
50	44	300	168	2000	322
55	48	320	175	2200	327
60	52	340	181	2400	331
65	56	360	186	2600	335
70	59	380	191	2800	338
75	63	400	198	3000	341
80	66	420	201	2500	346
85	70	440	205	4000	351
90	73	460	210	4500	354
95	76	480	214	5000	357
100	80	500	217	6000	361
110	86	550	226	7000	364
120	92	600	234	8000	367
130	97	650	242	9000	368
140	103	700	248	10000	370
150	108	750	254	15000	375
160	113	800	260	20000	377
170	118	850	265	30000	379
180	123	900	269	40000	380
190	127	950	274	50000	381
200	132	1000	278	75000	382
210	136	1100	285	100000	384

Note: *N* = population size
S = sample size

Source: Krejcie and Morgan (1970).

APPENDIX B
SELF-ADMINISTERED QUESTIONNAIRE

Uganda Management Institute
P. O. Box 20131
Kampala

Dear respondent

I am currently undertaking research on the topic “conflict management styles and organisational citizenship behaviour in Uganda: A Case of Kampala capital city authority (KCCA).” The information sought is required only for academic purposes. Participation is entirely out of your free will and necessary for the success of this work. I request you to respond with truthfulness and honesty for the success of the research. Information provided will be treated with maximum confidentiality.

Sincerely

.....

Dan Atwijukire

Section A: Background Information

1. Your Sex

Male	Female

2. Your age group:

20-30 years	31-39 years	40-49 years	50 years and above

3. Your level of education:

Diploma	Bachelors Degree	Post Graduate Degree

4. How long have you worked for the Organisation?

Less than 5 years	6-10 years	10 and above years

5. What responsibility do you hold in the Organisation?

Stores and operations	Procurement	Sales and Marketing	Administration

Section B: Stakeholder Participation (IV)

This section presents items on stakeholder participation. The section divided into three parts, namely; public participation in projects design, public participation in projects management and public participation in resources management. Kindly you are requested to indicate your feelings about your participation and performance of the projects using the scale where, 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree.

B1	Stakeholder Participation in Planning	SD	D	U	A	SA
		1	2	3	4	5
B1.1	Individuals from a variety of sectors participate in deciding medical purchase					
B1.2	Involvement of different stakeholders in planning activities of the National Medical stores has led to taking of quality decisions					
B1.3	Stakeholders participation has enhanced quality assurance of drugs					
B1.4	Different stakeholders support the activities of					

	medical stores					
B1.5	Medical stores activities consider the local needs of the people					
B1.6	There is trust from different stakeholders in the activities of Medical Stores					

B1.11 Briefly, summarise your analysis of stakeholder planning in the activities of the National Medical Store.

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B2	Stakeholder Participation in Monitoring	SD	D	U	A	SA
		1	2	3	4	5
B2.1	Stakeholders monitor efficiency in the procurement and supply of drugs					
B2.2	Individuals from different sectors monitor activities National Medical Stores					
B2.3	Monitoring by different stakeholder has led to accountable use of resources					
B2.4	Stakeholders act as checks and balances in the use of resources by National Medical Stores					
B2.5	The stakeholders ensure that National Medical Stores fulfils its role					

B2.8 In summary, what is your analysis about stakeholder participation in monitoring activities of National Medical Stores?

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B3	Stakeholder Feedback	SD	D	U	A	SA
		1	2	3	4	5
B3.1	There is timely stakeholder feedback about performance of National Medical Stores					
B3.2	There is increased prominence of stakeholder voice					
B3.3	Public views influence activities of the National Medical Stores					
B3.4	Public concerns are the basis for activities of the National Medical Stores					
B3.5	Attitudes of stakeholders are put in consideration when implementing programmes of National medical stores					
B3.6	Consider the stakeholders perspectives of the activities					

B3.6 In summary, what is your opinion on the extent to which stakeholder feedback influences performance of National Medical Stores?

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Section C: Performance of Public Institutions

This section presents items on performance of the district. Kindly requested indicate your feeling about the performance of your business using the scale where, 1 = Strongly Disagree, 2 = Disagree, 3 = Undecided, 4 = Agree and 5 = Strongly Agree.

C1	Performance of National Medical Store	SD	D	U	A	SA
		1	2	3	4	5
C1.1	Purchases are made in timely manner					
CI.2	Supplies are made in a timely manner					

C1.3	Medical purchases are of high quality					
C1.4	Purchases are carried out efficiently					
C1.5	There sufficient drugs in the country					
C1.6	Basic drugs are of sufficient amounts					
C1.7	Health centres have drugs					
C1.8	The drugs acquired were those needed					
C1.9	All drugs are used for the purpose purchased for					
C1.10	In case of emerges drugs are readily available					

C1.11 In summary, how do you assess the performance of the National Medical Stores?

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APPENDIX C

INTERVIEW GUIDE

1. How do individuals from a variety of sectors participate in deciding medical purchase?
2. In what ways has involvement of different stakeholders in planning activities of the National Medical stores led to taking of quality decisions?
3. How is the support of different stakeholders support the activities of medical stores?
4. How has participation of different stakeholders in the activities of medical stores activities considered the local needs of the people?

5. How do different stakeholders show trust in the activities of Medical Stores?
6. How efficient is the procurement and supply of drugs?
7. In what ways do individuals from different sectors monitor activities National Medical Stores?
8. How has stakeholder involvement led to accountable use of resources?
9. How timely is feed from health centres to National Medical Stores?
10. What is the extent of stakeholder voice in the activities of the National Medical Stores?
11. How do public views influence activities of the National Medical Stores?

APPENDIX D

VALIDITY OF STAKEHOLDER PLANNING

Judges	Relevant	Irrelevant
Judge 1	5	1
Judge 2	4	2

6

$$\text{CVI} = \frac{5+4}{2} = 4.5$$

$$4.5 \div 6 = 0.75$$

APPENDIX E: VALIDITY OF STAKEHOLDER MONITORING

Judges	Relevant	Irrelevant
Judge 1	4	1
Judge 2	5	5

5

$$\text{CVI} = \frac{4+5}{2} = 4.5$$

$$4.5 \div 5 = 0.90$$

APPENDIX F: VALIDITY OF STAKEHOLDER FEED BACK

Judges	Relevant	Irrelevant
Judge 1	4	1
Judge 2	4	1

5

$$\text{CVI} = \frac{4+4}{2} = 4$$

$$4 \div 5 = 0.80$$

APPENDIX F

VALIDITY OF INSTITUTIONAL PERFORMANCE

Judges	Relevant	Irrelevant
Judge 1	7	3
Judge 2	9	1

10

$$CVI = \frac{7+9}{2} = 8.0$$

$$8.0 \div 10 = 0.80$$

APPENDIX D
INTRODUCTORY LETTER