

**STAFF DEVELOPMENT AND EMPLOYEE PERFORMANCE IN THE HEALTH
SECTOR OF KASESE DISTRICT LOCAL GOVERNMENT, UGANDA**

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**A DISSERTATION SUBMITTED TO THE SCHOOL OF MANAGEMENT
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DECLARATION

I, Rhita Kabugho, declare that this research is original and has not been published and/or submitted for any other degree award to any other university and/or institution of higher learning before. The dissertation has been submitted for examination with the approval of the supervisors and carries their signatures and date.

Signed.....

Date.....

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APPROVAL

This is proof that this dissertation has been submitted with our authorization as supervisors as partial fulfillment for the award of the degree of Masters in Management Studies (Human Resources Management) of Uganda Management Institute.

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Signature Date.....
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DEDICATION

This dissertation is dedicated to my family for their enormous patience towards my whole academic life and success.

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I also acknowledge the all respondents in Kasese District LG Health Sector who participated in this study by responding to providing useful information for data analysis and discussion in this dissertation. If any piece of work comes from anybody whose name has not been mentioned, it is regretted and the omission is inadvertent.

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ABBREVIATIONS

BTC	Belgium Technical Cooperation
KDLG	Kasese District Local Government
MoLG	Ministry of Local Government
MoPS	Ministry of Public Service
NRM	National Resistance Movement
SAPS	Structural Adjustment Programs
SNV	Netherland Development Organization
LG	Local Government
WSP	Water and Sanitation Program
SD	Staff Development

ABSTRACT

Despite the adoption staff development interventions such employee training, employee career development and employee performance management by Kasese District Local Government (LG) poor employee performance in the health sector persisted. Thus, the purpose of the study was to examine the effect of staff development on employee performance in the health sector of Kasese District LG. The objectives were to investigate the effect of employee training on employee performance in the health sector of Kasese District LG, to assess the effect of employee career development on employee performance in the health sector of Kasese District LG and to examine the effect of employee performance management on employee performance in the health sector of Kasese District LG. The study used a case study design that involved quantitative and qualitative approaches. The sample size was 317 respondents but 247 respondents participated in the study. Descriptive statistics (frequencies and percentages) and inferential statistics (Spearman correlation, coefficient of determination and regression) were for quantitative data analysis while content analysis was used for qualitative data. Findings revealed a moderate effect of employee training on employee performance in Kasese district LG health sector. This was because employee training accounted for 27.9% of variance in employee performance. There was a moderate positive effect of employee career development on employee performance in Kasese district LG health sector. This was because employee career development accounts for 31.8% of variance in employee performance. There was a moderate positive effect of employee performance management on employee performance in Kasese district LG health sector. This was because employee performance management accounted for 30.5% of variance in employee performance. It was concluded that staff development significantly affected employee performance. It is recommended that KDLG health sector should improve its employee training to enhance employee performance by first focusing on employee training needs assessment followed by employee training content delivery and employee training evaluation. It should also improve its employee career development to enhance employee performance by first focusing on employee career discussions then employee career counseling. Lastly, it should improve its employee performance management to enhance employee performance by first focusing on goal setting given that it more affected employee performance compared to employee performance appraisal.

CHAPTER ONE

INTRODUCTION

1.1 Introduction

For over two and half decades, decentralization and staff development have become indispensable dimensions (Antwi et al, 2007). For the agenda, staff development under decentralization has become an urgent necessity to improve its socio-economic development. The study investigated the effect of staff development on staff performance in the health sector of Kasese District Local Government (LG) within the context of Uganda's decentralized policy reform. The assumption for this study was that both theoretically and practically, decentralization in Uganda was meant to improve local governance and high quality public services provision that promote citizen's value and welfare. Nevertheless, this was contingent upon staff development capacity required in the implementation of decentralization in Uganda.

The chapter gives the study background, problem statement, purpose, objectives, research questions, hypotheses, conceptual framework, significance, justification, scope and operational definitions of concepts.

1.2 Study Background

The study background has been structured into four main components. These include historical, theoretical, conceptual and contextual backgrounds in accordance with Institute's requirements (UMI, 2011).

1.1.1 Historical Background

The origins of staff development in relation to employee performance are logically connected to humankind history and the required training for enhancing employee performance (Swanson & Holton III, 2001). Staff development is a new term but derived from training which can be traced to the human race evolution. Thus, staff development has gone through many stages (Swanson, 1995). The primitive ancestors practiced the simple form of training in the old days which was highly informal and confined the family or tribe. The transmission of learning through this primitive form of training was through unconscious imitation of elders such as the clan leaders, head of a family or group. Although this training was informal and primitive, education as an essential feature was evident given that it helped children to fit in their physical and social environment after learning from experiences of previous generations (Swanson & Holton III, 2001).

The Greeks and Romans contributed to the development of staff development in the period 100 B.C. - 300 A. D. (Callahan, 2000). Greeks were the first to embrace education for the development of an individual and the elements of their training are still up to day considered vital to individual development (Ruona & Swanson, 1998). The Greek ideals were adopted by Romans who refined and integrated them into Roman ways by establishing laws and institutions. Similar to Greeks, the Roman children acquired manual practical skills from their elders mainly fathers through family apprenticeship that were used to develop the infrastructure of their empire (Swanson & Torraco, 1994).

During 300-1300 A.D., many developments continued to occur during the “Middle Ages” to influence the training goals and methods (Torraco, 1998). Apprenticeship which is an

important informal practice that has contributed to developments in training was embraced to influence workplace development. With its earlier historical roots, apprenticeship training from parent to child and master to apprentice endured various methods for knowledge and skill transfer to the learners (Watkins, 1990).

The period 1400-1800 A.D. brought along with it a new era of scientific and philosophical thinking (Barrie & Pace, 1999). Several figures such as Jean-Jacques Rousseau, Martin Luther, Johan Pestalozzi and John Locke impacted historical developments, like education and training advancements during and after this period.

However, the origin of contemporary staff development was during World War II from 1939 to 1945, the development efforts which occurred in the US (Bierema, 1996). Thus in the 20th century, the development of technical training as a result of these development efforts surrounding America's involvement in the World War emerged in this period. For example, because of the World War, training demands were placed on the educational system. In addition, it was during this period when the American labor movement rose. The World War also initiated the technological innovations that had a great impact of staff development. These development efforts gave birth to systematic (1) work processes improvement, (2) performance-based training, and (3) workplace human relations improvement (Beardwell, Holden, & Claydon, 2004).

During the period between 1940 and the 1960, most of the staff development philosophy and methods were perfected to affect people and work environments (Armstrong, 2006). At the same time, parallel developments occurred which included (1) a shift to HRs school of thought, (2) laboratory training growth, (3) survey research application and

feedback, (4) increased action research utilization (problem solving techniques), (5) socio-technical systems acknowledgment and work life quality, and (6) a new emphasis on strategic transform (Armstrong, 2006).

1.1.2 Theoretical Background

This study will adopt Schultz's Human Capital Theory (HCT) pioneered in 1961 (Fugar, shiboe-Mensah, & Adinyira, 2013) and developed by (Becker, 1992) to explain the effect of staff development on employee performance. According to Dobbs, Judy and Roberts (2008), HCT is a foundation for staff development that well-accepted in research and practices. HCT advocates that employees/workers gain useful knowledge and skills from staff development which helps to increase their job performance (Fugar et al, 2013). According to Becker (1992), there is a difference between general and specific human capital. General human capital is general skills valuable across board got during staff development. Specific human capital refers expertise knowledge specific to a particular firm (context-specific skills or firm-specific) acquired through staff development.

The assumption underpinning HCT is that when organizations investment in people through staff development, economic benefits are gained by individuals and the whole society (Sweetland, 1996). Psacharopoulos and Woodhall (1997) and Sakamota and Powers (1995) explained that assumption behind HCT is that staff development is greatly influential and necessary for a person performance capacity improvement. To summarize, the argument by human capital theorists is that a worker whose capabilities, skills, knowledge and potential are developed performs better in terms of efficiency and effectiveness in achieving set organizational objectives compared to that worker lacking such development (Olaniyan & Okemakinde, 2008).

1.1.3 Conceptual Back Ground

Staff development refers to the incorporated use of organizational, career and training development for individual improvement and institutional effectiveness (Armstrong, 2006). According to Chalofsky (1992) and Solkhe and Chaudhary (2011), staff development a process that involves management decisions for increasing learning capacity (performance) of persons and groups of individuals in institutions through learner-based interventions. Swanson (1995) defined staff development as a process of organization development and personnel training, and development that develops and unleashes human expertise for performance improvement. In addition, staff development is viewed as the process helps organizations to acquire and increase the number of workers with an education including the skills and experience critical for employee performance enhancement (Sharma, 2004). Staff development activities include staff career development, coaching, staff training, performance management and development, key staff identification, succession planning, mentoring and organization development (Armstrong, 2006). In this study, staff development will relate to the processes of employee training, employee career development and employee performance management.

Employee training is which is systematic, planned and results activity for improving the employees' knowledge, skill level and competency for effective work performance (Gordon, 1992). It is used to systematically plan employee behavior modification through learning events, activities and programs necessary for trainees to achieve the required knowledge, competencies, abilities and skills to perform their work effectively (Beardwell, Holden, & Claydon, 2004). In this study, employee training focused on

employee TNA, employee training contents delivery and employee training assessment. Bernes & Magnusson cited in (Kirk, Downey, Duckett, & Woody, 2000) described employee career development as a process that helps employees achieve specific employees goals and organization goals, including job satisfaction promotion, employees career information provision, helping employees advancement opportunities identification, and employee productivity improvement. In this study, employee career development focused on employee career counseling and employee career discussions. Employee performance management is a process that helps employees to establish a shared workforce perceptiveness on what is required to be achieved in an institution (Armstrong, 2006). In this study, employee performance management focused on employee goal setting and employee performance appraisal.

Employee performance in the past related to assessments of how well employees performed assigned tasks. Employee performance refers to employees' outcome or contribution towards goal attainment (Afshan, Sobia, Kamran, & Nasir, 2012). Normally, task outcomes are used in describing employee performance. However, behavior is also used when referring to employee performance (Armstrong, 2000). Armstrong (2000) was of the view performance standards set by the organization can be used in describing and measuring employee's performance. Other measures taken into consideration when measuring employee performance include work quality, efficiency, productivity, effectiveness, and profitability measures (Ahuja, 2006). In this study, employee efficiency and effectiveness will be applied to measure employee performance. Capacity to generate preferred results with fewer resources is employee efficiency while the capacity of workers to meet desired objectives is effectiveness (Armstrong, 2006).

1.1.4 Contextual Background

This study posited that the ways public sector workers are managed to improve their performance measured in terms of efforts towards government goals achievement (Guest, 1999) are crucial. However, when public sector reforms are designed and implemented little consideration is taken care of with regards the management public sector workers. The central focus has been on pay enhancement in these reforms downplaying other staff issues of necessary for improving public employee performance. Despite the importance of human resource, critical picture in Uganda's Public Service shows that staff is poorly managed and the same time performance of public employees is below expectations (Government of the Republic of Uganda, 2005).

There have been numerous public sector reform initiatives in Uganda since independence in 1962. Government of Uganda (GoU) together with the active involvement of donors has designed very ambitious reform agendas (GoU, 2005). New public management approaches first introduced in 1989 presently have inspired reform efforts in Uganda. The aim of reforms has been to increase accountability, effectiveness, and efficiency of public sector (Therkildsen, 2001), which include relevance staff development features, which include decentralization of staff management, pay reforms, refocusing public sector programmes on core activities, and performance management.

In Uganda, efforts have been directed towards improved staff development to enhance public employee performance. For example, an important element in Uganda's current public sector reform efforts has been employee performance management which tries to connect increased emphasis on outputs with increased managerial freedom. "The requirement of these reforms from public managers, public employees and public

organizations is to work towards performance targets and productivity objectives which describe personal tasks” (Larbi, 2006). Performance of public workers to be rewards is then linked to individual employees’ achievements.

In the early 1990s, Uganda increasingly emphasized using “Performance Management Systems (PMS)” to enhance staff development which among other interventions emphasized career development, staff training and appraisals, and monitoring and evaluation systems (GoU, 2005). In the 1996, there was a shift from using Performance Management Systems (PMS) to Result Oriented Management (ROM) to enhance staff development with the same goal of improving employee performance. However, ROM as an intervention for staff development has been not successful because poor follow-up and poor budget allocations and it is still acknowledged that if the mentioned shortfalls are addressed, this public sector reform can help in improving employee performance (GoU 2005).

Thus, ROM has been used in staff development to enhance performance by translating it into individual work plans for each employee whose targets are connected to the company’s strategic plans. These employee work plans are applied to assess performance of individual employees during the Open Performance Appraisal Systems (OPRAS) (Government of the Republic of Uganda, 2005). The OPRAS were introduced a couple of years, but are still new to many public institutions and their staff. To strengthen staff development in the Public Service, Government introduced Performance Agreements to be signed by all Senior Managers (Circular Standing Instruction No. 1 of 2010)

However, despite these efforts as highlighted in this section of this study, Okidi and Guloba (2006) assert that Uganda's LGs suffer from capacity constraints due to the inability of staff and community leaders to prioritize, plan and implement staff development programs. Furthermore, Bashaasha, Mangheni and Nkonya (2011) postulate that in Uganda, LGs suffer from human resource challenges such as unqualified and inexperienced staff and limited employee training opportunities that compromise employee performance. However, efforts are continually being sought by both central and LGs to increase the capacity of LGs through training for administrative and support staff. As a LG, Kasese District LG (KDLG) provides a typical case for studying the effect of staff development on staff performance in LGs in its health sector. It equally provides a platform for the description of the effect of employee training, career development and employee performance management on staff performance in the health sector of LGs.

1.3 Problem Statement

To enhance employee performance (that employee efficiency and effectiveness) through staff development like staff training, staff career development and employee performance management in the health sector, Kasese District LG has partnered with development agencies such as Belgium Technical Cooperation (BTC) to offer capacity building financing to its employees. In addition, some district employees in the health sector are given study leave within the limits of public service regulations for self-education while workshops and trainings are also conducted (Kasese District LG, 2013). Further still, district workers in the health sector are allowed to learn on the job through performance of duties under the supervision of senior officers.

Despite the adoption of various measures including staff development through employee training, employee career development and employee performance management by Kasese District LG towards employee performance in the health sector, there is little known on staff development and its effect on employee performance. However, evidence has been given regarding poor public employee performance in the health sector. For example, in KDLG, poor employee performance in the health sector occurs when employees fail to meet set targets, produce poor quality work and fail to deliver on time leading to inefficient and ineffective healthy service delivery in the communities. A report by the KDLG Officer revealed unprofessional conduct among health workers devoting less and less time to health work and misbehavior at work in the health centers (Kasese District Local government, 2014a). Apparently, one wonders why poor employee performance persists despite the various staff development interventions that have been adopted in the health sector of Kasese District LG. This identified gap is therefore the focus of this study.

1.4 General Objective

To scrutinize the impact of staff development on employee performance in the health sector of Kasese District LG.

1.5 Specific Objectives

The study was directed by the objectives below:

1. To investigate the impact of employee training on staff performance in the health sector of Kasese District LG.
2. To evaluate the effect of staff career development on staff performance in the health sector of Kasese District LG.

3. To examine the effect of employee performance management on staff performance in the health sector of Kasese District LG.

1.6 Research Questions

The study answered the questions below:

1. How does employee training affect employee performance in the health sector of Kasese District LG?
2. To what extent does employee career development affect employee performance in the health sector of Kasese District LG?
3. Does employee performance management affect employee performance in the health sector of Kasese District LG?

1.7 Hypotheses

The study tested the following hypotheses;

1. Employee training has a significant effect on employee performance in the health sector of Kasese District LG.
2. Employee career development has a significant effect on employee performance in the health sector of Kasese District LG.
3. Employee performance management significantly affects employee performance in the health sector of Kasese District LG.

1.8 Conceptual Framework

The study focused on a conceptual framework showing a hypothesized effect of staff development on employee performance as depicted in Figure 1.

IV (staff development)

DV

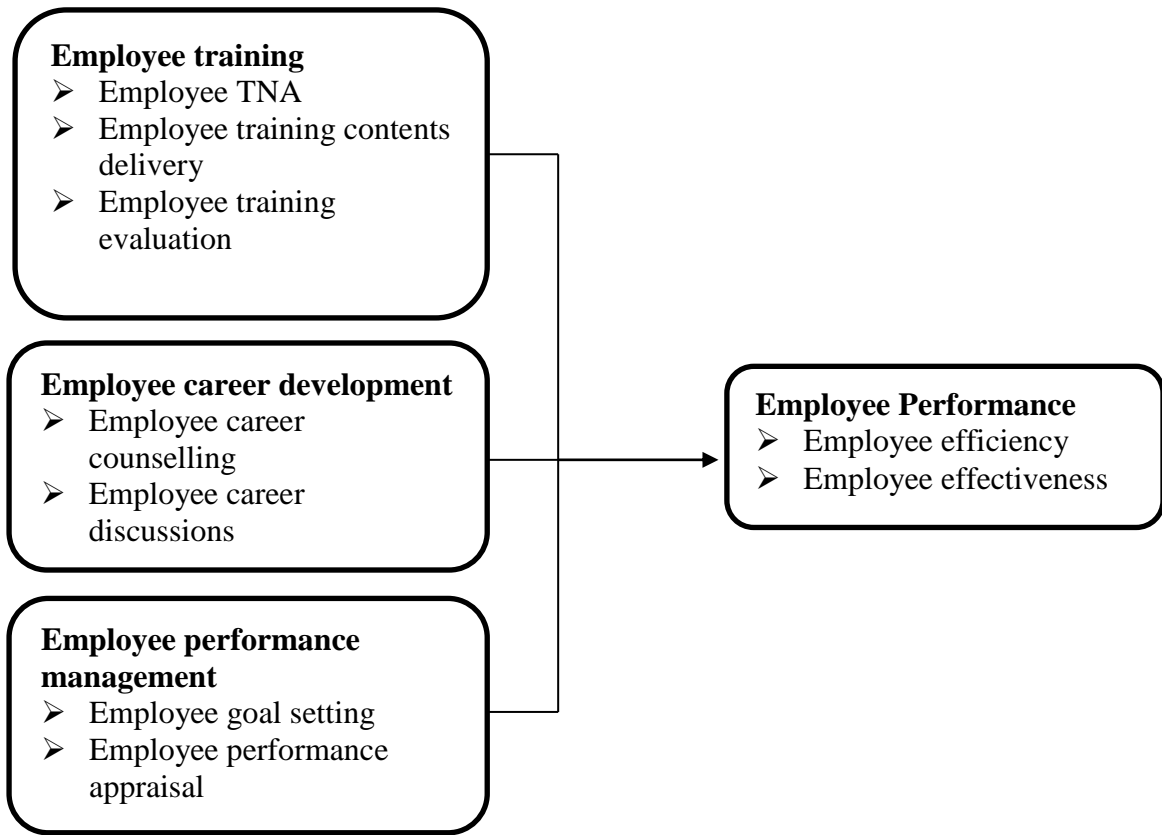


Figure 1: Effect of staff development on employee performance

Source: Resource-based theory (RBT) by Rizov and Croucher (2008) and tailored by the researcher according to objectives of this study

The conceptual framework shows the hypothesized effect of staff development on employee performance. Staff development was the IV and staff performance was the DV. The independent variable was measured by employee training, employee career development, and employee performance management while the DV was measured by employee efficiency and effectiveness. Efficiency focused on how employees completed tasks in the least amount of time possible with the least amount of resources possible through using certain time-saving techniques. Effectiveness focused on the level of results and the quality results from the actions of employees. The study postulated that staff development in the health sector of Kasese District LG directly affected the performance of employees. It therefore followed that employee development measured by employee

training, employee career development, and employee performance management directly affected the staff efficiency and effectiveness.

1.9 Significance

The study might more specifically be significant as explained below: The study findings might be useful to Kasese District LG administration in informing their staff development policy. The findings may provide significant information for policy input. Further-more, the study and particularly its recommendations may be useful information on human resource training practices in the district which may be helpful in improving performance. The study may provide critical information for students and academics interested in studying the relationship between human resource training and development in Kasese district.

1.0 Justification of the Study

Concern from various stakeholders employee performance in Kasese District LG such as the local community members and local leaders have been raised about the health sectors employee performance given that employees are efficient and willing to work towards health sector's goals. This has had a negative image from stakeholders on both the employees and the health sector. Yet Kasese District LG health sector has tried to improve employee performance through staff development. The research aim was to establish how staff development like training, career development and employee performance management are impacting on employees' performance in Kasese District LG health sector where no similar research has ever been undertaken in the same context. This study will particularly be of practical guidance in improving and implement staff development programs, as it will contribute to the available limited knowledge on

influence development on employee performance in Uganda local government health sector.

1.11 Scope of the Study

This study has well defined content, time, geographical and methodological scopes.

1.11.1 Content Scope

The content scope of this study focused on staff development and employee performance. Staff development focused on employee training, employee career development and employee performance management. Employee performance focused on employee efficiency and effectiveness.

1.11.2 Time Scope

The study period was between 2008 and 2014. This is because Amin, (2005) recommends for information collected from the field to be reliable, a period of not less than five years is appropriate.

1.11.3 Geographical Scope

In terms of geographical scope, the study was limited to Kasese District LG (KDLG). This was because KDLG is among LG in Uganda that has embraced reform policies in staff development to improve employee performance but this has not been the case.

1.12 Operational Definitions

Employee career development referred to the KDLG process of that involved employee career counseling and employee career discussions.

Employee performance management referred to the KDLG process for employee goal setting and employee performance appraisal.

Employee performance referred to employee efficiency and effectiveness in KDLG.

Employee training referred to the KDLG process that involved employee training needs evaluation, employee training contents delivery and employee training assessment.

LG according to the LG Act 1997 refers to district LGs and other lower LGs within that district. In this study, a LG will relate to KDLG.

Staff development referred to a process of developing human expertise through employee training, employee career development and employee performance management for improving performance in KDLG.

CHAPTER TWO: LITERATURE REVIEW

2.1 Introduction

It gives an analysis of existing literature on the effect of staff development on employee performance. It is presented as a critical appraisal pointing to gaps and weaknesses in available knowledge. This review has relied on journals, online sources, textbooks and other literature sources. The chapter has been structured to contain a theoretical review and literature review following study objectives. It is concluded with the summary of literature review.

2.2 Theoretical Review

Human Capital Theory (HCT) originated from Friedman's neoclassic ideas in 1976 and the Chicago-School economics approach and thereafter, Shultz, Mincer, and Becker developed the HCT core elements (Cornachione, 2010). The economic aspect of human behavior of HCT was emphasized in Becker' (1992) discussions which highlighted his argument that education and training investments are the most relevant human capital investments types. Nevertheless, this was not the first time that human capital investments aroused interest in the economics literature given that this kind of staff development investment had been discussed in 1964 by Harbison and Myers as the process of increasing people' knowledge, skills, and capacities in a society (cited in Cornachione, 2010). During this period (1964), Harbison and Myers were exploring the relevance of Marshal's 1930's idea of the importance in investing in human beings to improve their performance.

Becker viewed human capital investment means of production (which in this study are in form of employee training, employee career development and employee performance

management) as not different from physical capital investment means of production (such as investments in factories and machines) (Fugar et al, 2013). His argument was that, output will rely partially on the rate of return on the investment in either human capital or physical capital (Fugar et al, 2013). Therefore, human capital is a way of production, in which extra investment gives extra output.

The application of HCT in explaining the effect of staff development on employee performance has been criticized being too simplistic. Levin and Kelley (1994) observed that one of the criticisms is that HCT proponents focus of positive outcomes that can arise from increased staff development ignoring other complimentary inputs such as employee attitudes, contract terms, employee working environment and management practices that should be taken into consideration for staff development to improve employee performance. According to Thurow (cited in Fugar et al, 2013), staff performance is influenced by numerous job characteristics rather than workers, for example, investing in an uneducated employee may not lead to better employee performance while investing in an educated employee may lead to better employee performance yet HCT ignores the importance of education level. Despite these criticisms, Becker's HCT has been remained relevant for understanding the need human capital investment to improve employee performance (Bassi & McMurrer, 2006).

2.4 Employee Training and Employee Performance

Theoretically and practically, training is recognized as a means to achieving high performance by employees in providing high quality public services that are valued by citizens (Antwi, 2007). Yet, it's also known to help LG employees' access and become successful in available positions (CGSDS, 2008; Ishikawa, 2007). Therefore, it is

essential for LGs to appreciate training and retraining in order to achieve better performance (Ndanyi, 2013). Because of these values, it becomes necessary to harmonize the nature of training and training content offered by different stakeholders contributing to LG human resource capacity building (Antwi, 2007). Thus, this study sought to find out whether employee training at Kasese District LG had been used as a means to achieving high performance by employees and whether it synchronized the nature and content of training offered to employees. This was expected to show whether Kasese District LG appreciate training and retraining of its employees.

Employee training is very important in improving employee performance evidenced in existing literature (Purcell, Kinnie, Hutchinson, Rayton, & Swart, 2003; Harrison, 2000). Wright and Geroy, (2001) opined efficient training programmes can improve employee's competencies leading to overall employee performance as an employee becomes effective and efficient in performing his/her current job and can further enhance an employee's job knowledge, skills and attitude essential for the prospective job. Therefore, this study sought to find out whether findings that were obtained from Kasese District LG were supported by the existing literature showing proof of existence of the impact of employee training on staff performance.

There has been evidence indicating how employee training contributes employee performance improvement as well as organization performance improvement as has a positive effect derived from the development of staff knowledge, ability, competencies, skills and behavior (Guest, 1997; Armstrong, 2006). Furthermore, Swart et al. (2005) whose book focused mainly on organizational performance emphasized that employee training is necessary because addresses an organization's skill deficits and employee

performance gaps leading staff performance improvements. Swart et al. (2005) was of the view that “bridging performance gap is when employees participate in training and when they return to work and they apply that learning to their specific roles and this is achieved through implementing relevant training interventions that develop particular employees’ skills and abilities for enhancing employee performance”. He further opined that training is always important because though workers own an amount of knowledge associated to different jobs, such knowledge may not be adequate for them to perform their job effectively and efficiently given that workers should frequently adjust to new job requirements. That is, there is need for organizations to conduct continuous training to avoid skills and performance gaps.

Studies about have been conducted about employee training and employee performance in the Ugandan context. For example, Yos (2016) conducted a study among a sample size of 130 of academic staff in the college of education in Makerere University about training and job performance. In this study, the content scope of training was restricted on two dimensions which include on-job training and off-job training whose indicators included extent to which the two dimensions were provided to employees, frequency of the dimensions when there were provided to employees, including their relevancy, timeliness, appropriateness and adequacy in meeting employees' training needs. On the other hand, employee performance was measured in terms of task performance, contextual performance, adaptive performance and counterproductive work behavior. The study findings revealed that both dimensions of training significantly affected job performance of the academic staff in the college of education in Makerere University. The difference from this study to Yos’ study was in the measurement of both training and employee performance but the results proved a significant effect though of a similar magnitude.

In a study by Abigaba (2016), one of the objectives focused on how employee training affected attainment of business objectives in Kampala District Local Government. Employee training/development was measured in terms of knowledge improvement and skills development while attainment of business objectives was measured in terms of enhancing service delivery, enhancing employee satisfaction and improving customer and shareholder satisfaction. Abigaba's dependent variable is also a measure of employee performance and hence a similarity to this study. Abigaba's findings also established a significant effect of employee training/developments on business objective attainment.

Thus, this study sought to find out whether employees at Kasese District LG had benefited from the training offered by the LG and the ways they had benefited. This helped to know how training benefits contributed to employees' performance in the context of Kasese District LG because questions were developed with guidance of had been reviewed in this literature.

2.4.1 Employee Training Needs Assessment and Employee Performance

Training Needs Assessment (TNA) is the process of collecting data to decide (an assessment of) staff and company knowledge, skills, and abilities, to recognize any areas of needed for developing during training to aid employees and the company achieve their goals and objectives (Bersin, 2006). Training assessment helps company determine employees' current levels of skills, knowledge, ability and competence in performing their required job roles or tasks to achieve organization's goals and objectives (Buckley & Caple, 2000). Therefore, according to Goldstein and Ford (2002), a TNA is an important process for designing an employees' training program and affects effectiveness of

training programmes and Wagonhurst (2002) added that effectiveness of training programmes affects employees' performance. This study sought to find out whether Kasese District LG conducted a TNA to determine the employees' training requirements to improve performance at work.

TNA is associated with several benefits (Buckley & Caple, 2000). It prevents inadequate training may not provide the required skills, abilities, knowledge and competence to employees for performing required job roles/tasks and prevents excess training which leads to overtraining condition. TNA relays the basis for guidelines for designing the employee training program as it produces enabling objectives and learning points if well conducted. TNA clarifies the training goals that used for reference by trainers and trainees, which are used to determine the success of the training programme in terms of knowledge, ability, skills, competence and attitude projected of the trainees with suitable performance principles and circumstances in which performance is assessed. An efficient TNA guides and serves as a base for designing, developing, delivering and measuring employee training program given that assists in identifying, assessing and comparing what the institution is doing with employees' knowledge, skills and behaviors required in enhancing their performance as well as that of the organization (Bersin, 2006). TNA helps organizations in determining relevant features for the execution and assessment of training programs given that it identifies employee performance gaps by determining current (actual) employees' performance levels in terms of knowledge, competence, skill and ability compared to the expected employees' performance levels on the same dimensions (Buckley & Caple, 2000). Furthermore, TNA allows organizations to be able to determine the desired or necessary conditions for improving employee performance and organizational performance by focusing on the necessary job tasks/standards,

knowledge, abilities and skills needed to accomplish employee and organizational goals and objectives (Bersin, 2006; Buckley & Caple, 2000). This study sought to find out whether the TNA by Kasese District LG guides and serves as a base for design, development, delivery and assessment of the training programme. If this is the case, then it should lead to improved employee performance.

Moreover, the comprehensiveness of TNA affects the effectiveness of the employee training program because research has established the relation between comprehensive of TNA and its effect on training outcomes (Bersin, 2006). Lack of comprehensive TNA contributes to an ineffective training program which does not help employees achieve organizational goals. Therefore, designing a comprehensive training program requires an training needs assessment at employee level as well as at an company level to recognize employment necessities to be trained and recognize employees that need to be trained and the kind if training to be delivered (Wagonhurst, 2002). This study sought to establish the comprehensiveness of TNA by Kasese District LG to determine the effectiveness of training offered to employees to their performance.

2.4.2 Employee Training Contents Delivery and Employee Performance

Researchers have seen the seen the potential of training content delivery on employee performance given that a specific task, the training content delivery approaches may be more effective in enhancing employee performance while for another task such training content delivery approaches may be more ineffective. Yet training delivery approaches are supposed to be capable communicating specific competencies, skills, behaviors, knowledge, attitudinal or task information to trainees which necessitates organizations to

adopt and apply different training delivery approaches to deliver different training contents (Otuko, Chege, & Musiega, 2013).

The effective training delivery approaches depends on the extents it addresses the employees' skills and tasks characteristics (Wexley & Latham, 2002). Therefore, organizations using employ training for staff development should ensure that training content is pertinent to employees' skills and tasks characteristics. This helps training programs to communicate particular skill and activity information to trainees. Furthermore, when considering skills in training content, there should differentiated such the both the people skills or technical skills are captured given that this is crucial in designing training programmes (Gagne, Briggs & Wagner, 1997; Poon & Othman, 2000),. This study sought to establish the training content delivery approaches used by Kasese District LG and their effectiveness in improving employee performance.

Employees perform poorly because there are not trained in relevant skills in communicating, listening, dialogue engagement, feedback, cooperating, problem solving and conflict resolving (Coates, 2004) to mention some. According to (Menguin, 2007), people skills training is beneficial to employees because (1) provides a podium to display practical skills; (2) brings out the required employee qualities; and (3) helps employee personal growth. Thus, organizations should always assess employee skills in advance of the training programmes using supervisors and subordinates who are able to identify such skills. Companies must ensure that employees have relevant technical training skills to help them update their existing skills to suit the organization's goals and objectives (Otuko, Chege, & Musiega, 2013). This study sought to establish whether employees of

Kasese District LG had enough training in skills which really matter for them to improve their performance.

Several researches have offered proof of positive effects of skills training. Among these effects is that it helps employees to be more competent at work (Remmen, et al., 2001) and improves employees' performance (Bradley & Bligh, 1999). It projects a positive attitude towards the role playing method during training resulting into an increase in employee's commitment and performance (Nikendei et al., 2005). This study sought to establish whether the findings that were obtained from Kasese District LG agreed with the mentioned academicians/research on the positive effects of technical skills training on staff performance.

“Training delivery methods employed change as training content areas” (Poon & Othman, 2000). “Teams have become more and more accepted in organisations of all types and industries because the several executives think that they offer improved results for example enhancing productivity, creativity, minimizing response times and enhancement of decision making” (Hartenian, 2003). “Team training is a delivery method of training where individuals are trained work well in problem - solving groups, where direct observation and feedback is required in the training process” (Forbush & Morgan, 2004). This study sought to establish the training delivery approaches used by Kasese District LG and their effectiveness in improving employee performance.

“Mentoring is a method of training, where mentors are people with firm-specific of knowledge, skills and abilities in conflict management, goal setting and planning” (Hartenian, 2003). Mentoring was for assisting others in learning business-related

concepts with minimal risk and based on 2 individuals who have a lot in common. “Currently, it is anything that sustains career and professional development to exploit learning and development” (Miller, Devaney, Kelly & Kuehn, 2008). “Mentoring relationships have been proved with many positive results, including improved staff performance” (Ostroff & Kozlowski, 1993; Viator & Scandurs, 1991). This study sought to establish whether mentoring was used as delivery approach of training by Kasese District LG and its effectiveness in improving employee performance.

2.4.3 Employee Training Evaluation and Employee Performance

“The choice of assessment method is a decision which should be made when evaluating the success of training on staff performance” (Otuko, Chege, & Musiega, 2013). “However, Employee training evaluation (ETA) is a complicated task” (Arthur & Bennett, 2003) but a significant function in a training procedure because it is the ultimate systematic stage; and companies must evaluate their training efforts logically. “The chief objective of ETA is to confirm that training has taught what was planned including the course contents for future use” (Goldstein, 1993). “Though new methods to employee training assessment were proposed” (Day, Arthur & Gettman, 2001), “but 4 level form of employee training assessment continue to be the most popular” (Winfrey, 1999; Salas & Canon - Bowers, 2001; Van Buren & Erskine, 2002). Winfrey, (1999) opined that “there are 4 levels for categorizing training methods and trainee reactions, which each level represents a more precise evaluation of the effectiveness of training programme on employee performance, and it needs a rigorous and time-consuming analysis”.

Evaluation - reaction level is defined through asking workers how they liked the training, what reactions are expressively based on views. All training programmes must be

assessed at this level to offer for improvement of a training programme, where knowledge and skills components as articulated in training objectives. “Also assess the training approaches used and trainer who delivered it; the general learning conditions and environment; and the level to attitudinal objectives of training programs have been achieved” (Hamid, 1987). This study sought to establish the evaluation criteria used by Kasese District LG and their effectiveness in improving employee performance.

There are a number of techniques to ensure training transfer, for example, connecting training objectives to strategic objectives of the company; exploit comparison between training content and work environment; supervisors encouraging staff to employ acquired skills; choose trainees who are dedicated to training transfer; and grow re-entry strategy for trainees.” Employee training evaluation is an application to work tasks which define training efficiency” (Alliger, Tannenbaum & Bennett, 1995). “Therefore, most of organizations do not carry out a systematic staff training assessment with only rating sheets filled by trainees at the close of a training programme” (Saari, Johnson, McLaughlin & Zimmerie, 1998). This study sought to establish the employee training evaluation strategies used by Kasese District LG and their effectiveness in improving employee performance.

2.5 Employee Career Development and Employee Performance

Pareek & Rao (2010) agreed that “career development of staff ought to be an investment, not a cost; and that bad performance, ignorance and low dedication for duty are expensive to a company”. It is stated that performance lies in employees ready to work, well managed, led, motivated and are always re-skilling.

2.5.1 Employee Career Counseling and Employee Performance

Career counseling is an opportunity for staff to evaluate their career requirements with an aim of improving their performance (Ombayo, 2013). An effective career counseling program not only helps a company in singling out staff with high performance potential but also helps staff in mapping out realistic career chances (Shujaat, Sana, Aftab, & Ahmed, 2013). It gives staff a chance to know, and define their goals in the course of their careers. Equally, it will give management a chance to evaluate staff requirements to attain equilibrium with those of the company. This study sought to establish whether Kasese District LG offered career counseling to its employees and its effectiveness in improving employee performance.

Whereas it looks obvious that career counseling will help staff in attaining their personal needs, it is not certain who ought to do the counseling as it can have a positive or negative result of staff performance (Lingham, 2000). In most institutions, career counseling activities are usually given to staff inside the company, by either a specific counseling personnel or the worker's direct supervisor. They are always familiar with the worker's abilities, experience and skills. In addition, they have an understanding of the work environment and developmental activities inside the company. They are capable to supervise staff growth and offer advice on career tips (Oduma & Were, 2014). Nevertheless, several workers may not wish to open-up to their supervisors and can be concerned on ramifications of their counseling sessions (Adelle, Lisa, & Leisa, 2004). Staff may also have a tough time taking seriously advice which is from an amateur. Additionally, a broad attempt to interest and educate supervisors in career counseling can be very expensive to a company. This study sought to establish whether Kasese District LG to offered career counseling to its employees including the competence of such

people in offering career counseling and their effectiveness in improving employee performance.

Experts can be well equipped to assess staff strengths and weaknesses than the supervisor, which lead to enhanced employee performance (Barnett & Bradley, 2007). In addition, given that they do not work with the staff they counsel, they are capable creating an ambiance of greater ease and openness. Furthermore, the employees counseled feel that an expert knows more and as a consequence, can be taken more seriously. This study sought to establish the people used by Kasese District LG to offer career counseling were trained professionals. If this was the case, employee performance was more likely to be improved.

In general, the career counseling procedure can be tricky, particularly if staff exhibit unrealistic career aspirations leading to poor staff performance (Baruch, 2006). The individual conducting the career counseling session(s) should be ready to give an open evaluation of staff career possibilities. However, it is very significant that the individual doing the session and the staff arrive at an understanding to the practical expectations staff must hold concerning career opportunities in the company (Baruch, 2006). This study sought to establish whether the people used by Kasese District LG to offer career counseling gave an open evaluation of staff career opportunities. If this was the case, employee performance was more likely to be improved.

For effective career counseling, one should have high-quality counseling skills and have information on staff being counseled that is, aptitudes, motives, experience, work characteristics and capabilities (Baugh & Suvillivan, 2005). This information can be got

from a worker's self-assessment on their personal needs, values, and personal goals. Extra information results from staff performance appraisals and other parties in position to make suitable judgments on the worker (Janet, Ronald, & Randall, 2009). This study sought to establish whether the people used by Kasese District LG to offer career service possessed good counseling skills and had information concerning the staff counseled. If this was the case, employee performance was more likely to be improved.

2.5.2 Employee Career Discussions and Employee Performance

Several references exist in the literature on deliberations between staff and supervisors which are helpful to staff career with an aim of improving employee performance. "They are frequently associated to performance appraisals and have a prospective focus in that they look at behaviors and predictive evaluations" (Krumboltz & Vidalakis, 2000). This study sought to establish whether Kasese District LG encouraged discussions among workers and supervisors which encourage staff career with an aim of enhancing staff performance.

The reason of career associated discussion among supervisors and staff is recognized in several professional fields as a way of assisting staff steer towards other work opportunities in a company in which they are presently working (Maurice, 1999). Deliberations are inclined to be associated with performance evaluations which provide an assessment of worker's skills and look at growth of goals and a plan for individual development to realize these goals (Harold & Kumar, 2011). This study sought to establish whether discussions by Kasese District LG helped staff steer towards other employment opportunities in the company in which they are now employed.

“These conversations are generally part of the yearly performance appraisal procedure and utilized as a way of developing staff personal development plans or training plans during the next 12 months” (Thite, 2001). Career conversations consist of having a corrective spotlight as well as a chance to focus on development of staff potential (Baruch, 2006). The phrase “career conversations” is not usually used to describe this process in HR literature, but it includes the implication which is associated with other concepts used in the literature. This study sought to establish whether discussions were element of annual performance review procedure at Kasese District LG or whether the procedure of these deliberations were standardized and connected to institutional strategic plan and job profiles. If this was the case, it was expected to improve employee performance.

“Career conversations by management for workers were argued as resultant in several benefits for the company and the staff”. Walker (cited in Armstrong, 2006) described how staff career conversations and company development are equally beneficial. Career conversations can improve communication among supervisors and staff (Kirk et al, 2000). “Organizations can also comprehend job related performance objectives and standards” (Fitzgerald, 1995). This will establish whether the findings obtained from Kasese District LG concurred with what the various authors in this paragraph have said.

2.6 Employee Performance Management and Employee Performance

Armstrong & Baron, (1998) was of the view that “PM is a strategic and an incorporated approach in delivering successful results in companies through enhancing the performance and developing the capabilities of teams and individuals”. PM is a continuing communication procedure which is conducted between managers and workers

throughout the year. It involves, goal setting, performance appraisal and utilization of appraisal results.

There is some local literature about employee performance management and employee performance. For example, Kanyiginya (2014) conducted a study about performance management and employee motivation in the Uganda Electricity Transmission Company Limited. This study was relevant to this study on the aspect of employee performance management. It helped on conceptualizing employee performance management. Based on the reviewed literature, this study sought to establish whether PM was a strategic and an incorporated mechanism in delivering successful outcomes by Kasese District LG through enhancing performance and developing the capacities of teams and individuals.

2.6.1 Employee Goal Setting and Employee Performance

Goals have an invasive effect on staff behavior and performance in institutions and management practice (Locke & Latham, 2002). Almost all current institutions have some way of goal setting in action and thus this study sought to investigate the form of goal setting KDLG. “Executives broadly admit goal setting as a way to enhance and sustain employee performance” (DuBrin, 2012). In business, goal setting encourages participants to put in considerable effort. “Goals are therefore an important instrument for managers, since goals have the capacity to function as a self-regulatory means which helps staff prioritize tasks” (Shalley, 1995). This study sought to establish whether Kasese District LG set goals for its employees and their effectiveness in improving employee performance.

Basing on hundreds of researches, the key result of goal setting is that people who are offered with particular, complex but realistic goals do well compared to those given easy, vague goals. At the same time, though, they should have enough ability, accept the goals, and get

feedback associated with performance (Latham, 2003). This study sought to establish whether Kasese District LG provided employees with specific, difficult but attainable goals to improve their performance.

Under right conditions, goal setting can be a great method for motivating workers. “The following are practical suggestions for managers to reflect on when trying to use goal-setting to improve motivation and performance” (DuBrin, 2012; Greenberg, 2011; Newstrom, 2011). This study sought to establish whether there were right conditions in Kasese District LG for setting goals for its employees to improve their performance.

Goals are milestones which can give staff a sense of achievement (Locke, 1996). A supervisor who works with his staff to develop goal-setting plans gives them motivation to do well at work. Supervisors and owners have to understand the consequence of goal-setting on staff performance to create effective goal programs. “It involves establishing specific, measurable, achievable, realistic and time-targeted (S.M.A.R.T) goals” (Latham & Locke, 2002). “This theory was developed by Edwin A. Locke in the 1960s” (Schweitzer, Ordóñez & Douma, 2004). His primary article on *Goal Setting Theory* was “Towards a Theory of Task Motivation and Incentives” published in 1968. It laid a base for goal setting theory and recognized a positive relationship among noticeably recognized goals and performance. “Goals are a type of motivation which sets the standard for self-satisfaction with performance” (Lee, Kennon & Turban, 2003). This study sought to establish whether goals were milestones that gave an employee a sense of accomplishment in Kasese District LG and whether the goals were S. M. A. R. T.

According to Mawoli and Babandako (2011), “if a manager aids a staff to set goals, and outlines to the worker on how those individual goals assist the rest of the organization to attain production goals, the worker understands how doing his job assists to move the organization forward and promotes its growth”. Abdulsalam, Damisa and Iliyasu (2007) also observed that “goal setting is a powerful way of motivating people and the value of goal setting is so well recognized that entire management systems, like Management by Objectives, have goal setting basics incorporated within them”. This study sought to establish whether supervisors in Kasese District LG helped employees in setting goals and whether they outlined to employees how personal goals assist the rest of the organization to attain production objectives.

On the other hand, Kim & Hamner, (2006) emphasized that how goals are set determine employee performance. Poorly set goals will not motivate employees while well set goals will motivate employees. Thus, Locke and Latham (2002) observed that to motivate employees, organizations should set goals that are SMART.

The following must be considered during goal setting: clarity, challenge, commitment, feedback and task complexity. Wright (2003) explained “how these can contribute to employee performance. When a goal is unclear, it has less motivational value”. This study sought to establish whether Kasese District LG considered clarity, challenge, commitment, feedback and task complexity while setting goals for employees in order to improve their performance.

Wright, (2004) observed that “one of the most important characteristics of goals is the level of challenge”. Miñambres (2011) argued that “rewards typically increase for goals that are more difficult”. If employees deem they will be well remunerated, it will improve

their passion and their drive to get it done. Anderson, Deker & Sedatole, (2010) emphasized that “when setting goals, make each goal a challenge”. However, Bush (1998), cautioned that it is crucial to strike an equilibrium between a demanding goal and a practical one. Challenging and realistic goals are achievable. The study sought to ascertain a point of challenge in goals set for employees in Kasese District LG in order to improve their performance.

“Relating to commitment, goals have to be understood and agreed upon if they are to be effective” (Hsiaw, 2009). However, Suvorov & van de Ven, (2008) observed that “this does not mean that every goal has to be negotiated with and approved by employees”. When a simple goal is set, employees do not require much motivation to achieve it. When employees are working on a difficult assignment, they will likely encounter challenges that require a deeper source of inspiration and incentive (Hsiaw, 2009). Anderson, Deker and Sedatole (2010) were of the view that as organizations use goal setting in their workplace, they should make an appropriate effort to include employees in their own goal setting. Organizations should support staff to widen their own goals, and keep them knowledgeable on what is going elsewhere in the company. This study sought to establish whether the goals were understood and agreed upon with the employees in Kasese District LG in order to improve their performance.

“Adding to selection of the right kind of goal, a successful goal programme should include feedback” (Miñambres, 2011). It gives chance to elucidate expectations, alter goal complexity, hence, gaining recognition. It is vital to give yardstick targets, for people to decide for themselves how they are doing. Thus, organizations ought to break down goals in tiny bits, and connect feedback to the transitional milestones. This study sought to

establish whether the right type of goals was selected for the employees in Kasese District LG in order to improve their performance.

Task complexity in goal setting introduces two more requirements for employee performance. For those which are extremely difficult, companies ought to take particular care in ensuring that work does not turn out to be excessively irresistible. Individuals working in challenging roles have a higher level of motivation. “Nevertheless, they can work so hard if procedures are not built into goal expectations to explain for the difficulty of the assignment” (Wright, 2004). It is thus significant to offer an individual enough time to meet a goal and give sufficient time to apply what is estimated for efficiency. This study sought to establish whether there was task complexity in goal set for the employees in Kasese District LG in order to enhance their performance.

2.6.2 Staff Performance Appraisal (PA) and Employee Performance

PA is a technique of assessing behavior of staff at work, usually with the quantitative and qualitative aspects of work performance. It is a logical and objective method of assessing work-related behavior and potential of staff. This study sought to establish whether performance appraisal was a technique of assessing the behavior of workers in Kasese District LG in order to enhance performance.

It could be carried out for assessing employee performance and developing them. It is of two types: informing the employees where they stand and using this data for individual decisions on pay, confirmation, deployment, promotions to mention some. This study sought to establish the types of performance appraisal for employees in Kasese District LG in order to improve their performance.

“Although there is need for ongoing informal review, formal evaluation is an important element of a PM system and PA is one of the regular vehicles for reviewing performance against objectives” (Redman, 2001). Performance review is seen as serving a number of functions (Milliman *et al*, 2002; Shen, 2004). This study sought to establish whether formal assessment was important element of PM system and appraisal for employees in Kasese District LG in order to improve their performance.

In the growing age of business, HR is a big asset of a company; if it is not trust by its employees, then it could be in problems, as staff is a major feature in company progress of the company. “To have productivity, employees ought to be motivated and contented with their jobs be loyal to the company” (Atkinson & Shaw, 2006). HR experts motivate workers through PAS through offering them fair appraisals depending on their performance in a specific period. “It has been noticed that there is a strong relationship between PA and motivation” (Bonnie, 2002). “Putting aside the major objectives of PA, it can be used as a means to make a completion between staff to accomplish the task with all the linked targets and benchmarks” (Robert, 1984). This study sought to establish whether employee were motivated and contented with their job and had loyalty with Kasese District LG in order to improve their performance.

It is also compulsory that staff obtain accurate performance appraisal results for motivation, when feedback of appraisal is matches with employee performance over a period of time that will be an enormous source of motivation to them. “A staff expects that the assessor recognizes his efforts and accomplishment in professional life and to aid him to overcome failure and allow a chance to make improvement on his performance in

future” (Bonnie, 2002). This study sought to establish whether employees got the accurate performance appraisal in Kasese District LG in order to improve their performance.

“In addition, employees can lose interest in the affairs of the company” (Robert & Kim, 2007). The study sought to establish whether performance appraisal had some shortcoming in Kasese District LG.

Accurate PA is always preferred but if there is any error then workers desire to have accurate performance appraisal without hikes in rewards but not a faulty system which doesn't recognize their hard work. “Therefore, the process should be fair as this is the ultimate system to motivate” (Storey & Sisson, 1993). This study sought to establish whether performance appraisal in Kasese District LG was accurate in order to improve their performance.

2.7 Summary of Literature Review

The literature so far reviewed indicates that staff development contributes in many significant ways to employee performance in LGs. Particularly, human resource training based on identified capacity gaps may be critical in improving employee performance in LGs in Uganda. We also learn from the literature that career development is a management approach based on giving career information to staff, aiding them to recognize advancement opportunities, promote job satisfaction, and enhancing their output. Furthermore, we learn from the literature that career development interventions lead to employee motivation thus increased productivity. The literature clearly points out the significance of employee performance management specifying that clear goal setting and objective appraisal process motivates employees thus improving their performance.

All these aspects may in one way or the other contribute to employee performance in LGs.

However, staff development in LGs is faced with significant challenges. The impact of public sector reforms on decentralization, the absence of a clear staff development policy, shortages of qualified and experienced staff, limited performance motivation, lack of tools and equipment, and significant labor turnover within districts (Ndanyi, 2013, Bashaasha et al, 2011; Antwi, 2007) may curtail the ability of employees to perform despite staff development efforts. Yet still, the above literature has structural weakness. For example, the cases and samples studied were other areas but not KDLG, data was collected for some studies using secondary data sources. On the background of these gaps, the study was viable to add on existing knowledge with a particular focus on KDLG.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

The section gives the methods which shall be applied during the study. These are; research design, population, sample size selection, sampling techniques and procedure, data collection techniques, data collection tools, pre-testing research tools (and data analysis).

3.2 Research Design

Case study design was applied because only one organization (Kasese District LG) was studied. Kasese District LG was selected among other LGs because it embraced reform policies in staff development to improve employee performance but this had not been the case. The case study design involved an up-close, in-depth, and detailed examination of Kasese District LG's staff development and employee performance as well as they relate in real-life context as suggested by Yin (2004). The case study research was good for modern events because appropriate behavior as related to staff development and employee performance in this study could not be manipulated but this study used a number of proof from various sources, like documents, interviews and questionnaire survey to solicit the necessary information. This design was selected for this research because it permitted the researcher to have adequate time to obtain in-depth information about the staff development and employee performance given that only one LG participated in the study. Amin, (2005) "a case study research analyzes one of a few subjects". Quantitative and qualitative methods were adopted. "It was because quantitative approach permitted the researcher to seek information which was quantified and qualitative allowed the researcher to implore information which was in narrative

format” (Mugenda & Mugenda, 1999). This combination assisted the researcher improve interpretations of study results.

3.3 Study Population

Population is defined as a Universal collection of all components which interest in a particular investigation. A population is a total of objects having one or a number of characteristics of common interest to the researcher from which inferences are made. The study population included the District Health Officer, all hospital administrators and non-administrative staff at the one government hospital (Bwera Hospital) and one government Health Center IV (Rwesande HC IV). The District Health Officer was targeted because he was the manager of both administrative and non-administrative staff in district and therefore was expected to be in position to know about the human resource management practices that affected health worker and their performance on the job. The hospital administrators were targeted because they were policy implementers and managed the day-to-day hospital activities and thus in position to provide relevant information about human resource management practices and employee job satisfaction at the hospital. The non-administrative staffs were those not involved in the management of hospital and Health center IV and included medical officers, nurses, midwives, clinical staff, laboratory officers, social medical workers, therapists, radiographers, records officers, anesthetics, dispensers, and financial officers and all these are targeted because these are the ones who the staff development practices affect. Thus, the total population included eight District Health Office (one District Health Officer, two Assistant District Health Officers, one Principal Health Inspector, one Senior Health Educator, one Bio Statistician/Health Information Scientist, one Cold Chain Technician and one Stores Assistant), 149 Bwera Hospital staff members, 96 Rwesande HC IV staff members and 300 clients (Kasese District LG, 2014b). The target population was 494 whose breakdown

is shown in Table 1. All these were accessible in this study because all were available for during data collection.

3.4 Sample Size and Selection

A sample is a collection of some (subset) elements of a population. “Most statistical investigations generalize the results of the data from the sample to the entire population where the sample was selected” (Amin, 2005). The sample size for this study consisted of the following categories of subjects as shown in the Table 1 below. It was determined by use of Krejcie & Morgan, (1970) sample table.

Table 1: Population, sample size selection and sampling procedures

Employee Category	Target Population	Sample size	Sampling Procedures
District Health Office	8	8	Purposive
Bwera Hospital staff members	149	108	Simple random
Rwesande HC IV staff members	37	32	Simple random
Health center and hospital clients	300	169	Simple random
Total	494	317	

Source: Kasese District LG (2014) statistical abstract

In Table 1, the selected sample size covered seven categories of respondents. Thus, this study targeted a sample of 317 respondents as computed in the table above.

3.5 Sampling Techniques and Procedure

It employed simple random and purposive sampling techniques to select the respondents. The combination of probability and non-probability sampling was aimed at obtaining a representative sample that met the study purpose. District Health Office was selected using purposive sampling to facilitate the selection of those with relevant information (Amin, 2005). A simple random sampling method was applied to choose the Bwera Hospital staff members, health Center IV staff members and clients. It was used to give every person a chance to take part in the research. It also helped to avoid bias in selecting

the person as recommended by Mugenda and Mugenda (1999). It further minimized the time and cost involved while selecting the staff from a large population as recommended by (Amin, 2005).

3.6 Data Collection techniques

3.6.1 Questionnaire Survey

It is used in obtaining information from respondents using standardized questionnaires. They included getting information from a sample of district lower level and sub county technical employees in a systematic way (Creswell, 2003). Amin (2005) recommended using questionnaire survey as it offers a high degree of general capability in representing a large population. Owing to the huge number of respondents in the survey, data being collected has a better understanding of what is being studied. “Owing to the high representativeness caused by the questionnaire survey technique, it is seldom easy to get statistically significant results than other data collecting methods” (Sekaran, 2003). “It was also applied for categories of respondents to save on time because their number was big to interview as recommended” (Amin, 2005). The survey questionnaire was used to collect data from Bwera Hospital staff members, health Center IV staff members and clients. The use of the survey questionnaire facilitated the collection of data from large group of respondents and in a short period. The questionnaire was used because respondents could read and write. A self-administered and structured survey questionnaire with pre-determined answer categories was used for this study to improve the response rate.

3.6.2 Face-to-Face Interview

Key informant interviewing was adopted to collect data from District Health Officers. This method lead to high quality information, flexibility, freedom of probing, and tap the ability to cover issues not originally covered in the questionnaire and document reviews. It helped to establish rapport with these categories of participants and thus get their cooperation. They allowed the researcher to explain unclear answers and get in detail information by inquiry (Creswell, 2006). Semi-structured interviews were designed to obtain data for this study (Mugenda & Mugenda, 1999). Open-ended questions were used so that other valuable questions emerged from the discussion between interviewer and interviewees. “Semi-structured interviews are extensively applied in qualitative studies” (DiCicco-Bloom & Crabtree, 2006). In this study, the probing interviewing tactic was used extensively to obtain a deeper explanation of the issue at hand from the respondents (DiCicco-Bloom & Crabtree, 2006). This was largely due to the fact that participants regularly required stimulus to develop their responses and ideas broadly, for a deeper understanding to be easily reached later in the findings of the study.

3.7 Data Collection Instruments

Two types of data collection tools were applied in the study. These were:- questionnaire and interview guide.

3.7.1 Questionnaires

Self-administered questionnaires (SAQs) were applied to gather quantitative data from a large group of respondents. These saved time because the big number of respondents to interview (Mugenda & Mugenda, 1999). The SAQs had self-administered questions in form of structured or closed ended questions as recommended by Amin (2005). The

standard questionnaire had a list of possible options where participants selected an answer which best suits the situation (Mugenda & Mugenda, 1999). The questionnaire was used to collect numerical data on staff development and employee performance from Bwera Hospital staff members, health Center IV staff members and clients. The researcher used closed-ended questionnaire which enabled coding data for analysis.

3.7.2 Interview Guides

Interview guides were employed to obtain qualitative data from District Health Officers who provided detailed information by inquiry during face-to-face interview (Creswell, 2003). The interview guide included a set of questions which the researcher asked face-to-face during the interview (Kothari, 2004). An interview guide will have structured questions (Mugenda & Mugenda, 1999; Kothari, 2004). Structured interviews require specific responses to a set of predetermined answers. The researcher presented questions to the Senior Managers and their opinions were noted down by the researcher. Data collected from the interview added on what was got by the questionnaire.

3.8 Validity and Reliability of Data Collection Tools

3.8.1 Validity

A validity test was done before using the research tools. It was for establishing if questions were able to capture the intended data. Experts in research looked at the questions to establish if they were able to capture the intended responses. A CVI was calculated to find out the validity of the tool. The following formula the below was used to determine the validity of the tool.

$$\text{CVI} = \frac{\text{Relevant items by all judges as suitable}}{\text{Total number of items judged.}}$$

Findings are presented in the table below:

Table 2: Validity of Questionnaire

Raters	Items rated relevant	Items rated not relevant	Total
Rater 1	27	9	36
Rater 2	30	6	36
Total	57	15	72

Thus, applying the formula, $CVI = \frac{57}{72} \approx .792$

“The CVI was > the recommended .70” (Amin, 2005). Hence, the questionnaire was valid for data collection.

3.8.2 Reliability

Reliability of the questionnaire tool was measured by use of Cronbach’s coefficient alpha. The questionnaire was pre-tested on 20 participants and reliability results were computed using the SPSS package. The formulae below was applied to calculate Cronbach’s coefficient alpha

$$\alpha = \frac{k}{k-1} \left(1 - \frac{\sum SDi^2}{\sum SDt^2} \right)$$

Where α = coefficient alpha

$\sum SDi^2$ = sum variance of items

$\sum SDt^2$ = sum variance of scale

Results are presented in the following table.

Table 3: Reliability of questionnaire

Variable	Alpa	No. of items
Employee training	. 875	20
Employee career development	. 880	12
Employee performance management	. 700	28
Job satisfaction	. 772	12

“The Cronach’s Alpha coefficient for the questions in the questionnaire was above .70” which is recommended by Nunnally cited by Kent (2001). The questionnaire was hence taken as reliable for data collection.

3.9 Data Collection Procedure

Upon approval of the proposal from UMI, the researcher obtained a letter of introduction to Kasese DLG authorities. This secured permission to conduct a study in this institution. The researcher then handed a letter of consent to participants, and later, questionnaires were circulated. Respondents were allowed time in which they would return the completed questionnaires. Dates were also set for the interviews with the key informants. After filling questionnaires, the researcher gathered, sorted and coded them.

3.10 Data Analysis

“A process of transforming raw data into functional information, presented in a form of published analytical article, to add value to statistical output” (Amin, 2005). Two types of analyses were done and these were quantitative and qualitative analyses.

3.10.1 Quantitative Data Analysis

This is involved descriptive statistics and inferential statistics. Frequencies and percentages were used to establish participants’ views on SD and employee performance. “It is recommended that with an ordinal scale, Spearman rank order correlation is appropriate for establishing relationships because it does not entail means and SD, which are meaningless with ordinal data” (Amin, 2005). The significance of the correlation coefficient (p) was used to determine the confidence in result. The regression coefficient (R) established the linear relationship between variables. It was then squared and used to

establish how much variance in the DV was caused by the dimensions of the IV as per hypothesis.

3.10.2 Qualitative Data Analysis

It consisted content analysis, that was applied to edit qualitative data and adjust it into significant short sentences. In other word, a thematic method was applied to scrutinize qualitative data where themes, categories and patterns were identified. The recurring themes that emerged in relation to each question from interviews were presented in results, with selected direct quotations from respondents presented as demonstrations.

3.11 Measurement of Variables

Questionnaires had an ordinal measurement that categorized and ranked variables. Hence a Likert scale was utilized to gather opinions on study variables using five scales: 5 = strongly agree; 4 = agree; 3 = undecided; 2 = disagree; 1 = strongly disagree.

3.12 Ethical Considerations

The identity of people who participated in the study was obtained and kept strictly confidential. The consent form was read and signed by the respondents before and the introductory part of the questionnaire had such a provision to help in motivating the respondents to actively participate in this study. Protecting the dignity and rights of all people who took part in this study was considered through concealing any information to any one till the study was complete and ready for everyone's consumption. Personal consent from the participants of this study was obtained first through signing of a consent form. This ensured observation of their rights as employees and human beings. Respondents informed of the nature of the study, risks, benefits and options, with an

option to ask questions concerning research. The researcher ensured honesty during the research process. Quotations and sources consulted were acknowledged by means of citations. An authorization letter from school of management science was given to get permission to carry out the study. A cover letter followed research tools explaining why the study was being done and questionnaires were distributed directly to the participants in their individual areas for filling and were collected immediately the filling was completed. The cover letter was useful to get accessibility to interview process, which was by appointment.

CHAPTER FOUR

PRESENTATION, ANALYSIS AND INTERPRETATION OF FINDINGS

4.1 Introduction

The chapter analyzes and interprets results. It is made up of 5 major sections. The initial section gives results about the response rate. The next section gives results about respondents' background. The third section presents results about employee training and employee performance. The fourth section presents results about employee career development and employee performance. The fifth section presents results about employee performance management and employee performance.

4.2 Response Rate

Response rate in survey research is the number of people who responded, the survey divided by the number of people in the sample (Johnson & Owens, 2003). It is expressed in form of percentage. A low response rate gives increases sampling bias if the non-response is not equal amongst the respondents on exposure and outcome. In the study, the sample was 317 respondents but the researcher managed to get 247 respondents. The break down is shown in the table below:

Table 4: Response rate

Category of population	Sampled size	Responses received	Percentage %
District Health Offices	8	3	38
Bwera Hospital staff members	108	97	90
Rwesande HC IV staff members	32	28	88
Health center and hospital clients	169	119	70
Total	317	247	78

Source: Data from the field

Thus, the response rate of 79% was above the recommended 67% response rate (Amin, 2005; Mugenda & Mugenda, 1999). Therefore, the results were considered representative of what would have been obtained from the population.

4.3 Background Characteristics of Respondents

Respondents' demography is a study of the composition of a social body in terms of its members' attributes (Guest, 2002). The researcher usually includes factors that are believed to have descriptive value in research. Kasese District LG health sector employees and clients' background included their gender, education level, tenure and age. Findings are presented in the following sub sections.

4.3.1 Respondents by Gender

Gender is a vital variable in a given social condition that is variably affected by any social or economic phenomenon (Guest, 2002). Research studies have shown that gender determines the way male and female respondents thinking thus affecting survey results and because of this respondents should proportion by gender to the population from which they are drawn. Hence, Kasese District LG health sector employees and clients were asked about their gender. Findings are provided in Table 5.

Table 5: Respondents by gender

	Employees		Clients	
Gender	Frequency	Percent	Frequency	Percent
Male	76	60.8	73	61.3
Female	49	39.2	46	38.7
Total	125	100.0	119	100.0

Source: Data from the field

Findings in Table 5 show that most of the Kasese District LG health employees (60.8%) and clients (61.3%) who participated in this study were male compared to the proportion of female Kasese District LG health sector employees and clients. This is because Kasese DLG health sector is dominated by male employees and clients.

4.3.2 Respondents by Level of Education

Education is one of the most significant characteristics which might affect an individuals' attitude and the way of perceiving specific social phenomena (Konrad & Hartmann, 2002). The reaction of the participant depends on his educational background and thus, it becomes crucial to know the educational status of the participants. Therefore, Kasese District LG health sector employees and clients were asked about their education. Findings are given in Table 6.

Table 6: Respondents by level of education

Level of education	Employees		Clients	
	Frequency	Percent	Frequency	Percent
Primary	0	0	0	0
O-Level	0	0	5	4.2
A-Level	0	0	4	3.4
Tertiary	76	60.8	91	76.5
University	49	39.2	19	16.0
Total	125	100.0	119	100.0

Source: Data from the field

Findings in Table 6 show that most of the Kasese District LG health employees (60.8%) and clients (76.5%) who participated in the study had a tertiary level of education followed by proportion of the Kasese District LG health sector employees and clients who had a university level of education. This suggests most Kasese District LG health sector employees and clients who participated in the study were literate and understood issues that were asked

4.3.3 Respondents by Length of Time Health Staff and Clients Had Engaged With LG Health Sector Services

Length of period of respondents with an organization has a bearing on the way they respond to certain issues that happen in an organization. The time taken in a company determines the growth of shared understandings and experience (Edgar & Geare, 2004).

Research suggests that increased length of period in a company is positively related to the workers' knowledge about what takes place within an organization (Konrad & Hartmann, 2002). Thus, Kasese District LG health sector employees and clients were asked about their length of time they had engaged with LG health sector services.

Table 7: Respondents by length of time they had engaged with LG health sector services

Tenure	Frequency	Percent	Frequency	Percent
Less than 1 Year	8	6.4	7	5.9
1-2 Years	30	24.0	29	24.4
3-5 Years	31	24.8	29	24.4
6-10 Years	20	16.0	20	16.8
Over 10 Years	36	28.8	34	28.6
Total	125	100.0	119	100.0

Source: Data from the field

Findings in Table 8 show that most Kasese District LG health employees (69.6%) and clients (69.7%) who participated in the study had engaged with LG health sector services for at least three years. Thus, this implies Kasese District LG health sector workers and customers who took part the study had engaged with LG health sector services for some time and thus knew what happened including issues related to human resource development and employee performance. Thus, information obtained from them was dependable.

4.3.4 Respondents by Age

Age of respondents is one of the most significant characteristics in considering their opinions on particular problems. Age shows the level of maturity of respondents (Gibb, 2001). In that sense, age becomes more important to examine the response about a particular problem. Kasese District LG health sector employees and clients were asked about their age. Findings are presented in Table 8.

Table 8: Respondents by age

Age	Frequency	Percent	Frequency	Percent
20-30 years	34	27.2	33	27.7
31-39 years	60	48.0	57	47.9
40-49 years	26	20.8	24	20.2
Above 50 years	5	4.0	5	4.2
Total	125	100.0	119	100.0

Source: Data from the field

Findings in Table 7 show that over half of the Kasese District LG health employees (72.8%) and clients (72.3%) who took part in the study were aged over 30 years. The implication is that information was obtained from mainly employees and clients who were mature in thinking and reasoning. Thus, this implies that most of the Kasese District LG health sector employees and clients applied thinking and reasoning while responding to questions about HRD and staff performance.

4.4 Employee Performance in Kasese District LG

Kasese District LG health sector employees and clients responded to 12 items about employee performance in Kasese District LG by indicating their agreement using a five-point Likert scale as indicated in Table 9. The items are presented in the first column and the proportion of Kasese District LG health sector employees and clients to the responses on each of the items is presented in form of frequencies and percentages in columns 2 to 6. The last column presents the total percentage of Kasese District LG health sector employees and clients on each of the items. The analysis and interpretation of findings follows the presentation of findings in Table 9.

Table 9: Findings about employee performance in Kasese District LG

Items about employee efficiency	SD	D	NS	A	SA	Total
1. LG health sector workers always do not waste time doing tasks given to me at my workplace	11%	21%	9%	20%	39%	100%
2. LG health sector workers always do not waste time achieving targets set for me at my workplace	11%	24%	8%	24%	33%	100%
3. LG health sector workers have made the health sector lose financially while doing tasks given to me	23%	49%	5%	16%	8%	100%
4. LG health sector workers have made the health sector lose financially while achieving targets set for me at my workplace	22%	39%	6%	16%	18%	100%
5. LG health sector workers use less time to do work tasks compared to my workmates at my workplace	18%	42%	6%	24%	10%	100%
6. LG health sector workers use less time to achieve work targets compared to my workmates at my workplace	14%	36%	5%	25%	20%	100%
Items about employee effectiveness	SD	D	NS	A	SA	Total
7. LG health sector workers always achieve all work targets set for me at my workplace	11%	37%	7%	27%	18%	100%
8. LG health sector workers always do all tasks given to me at my workplace	21%	37%	5%	23%	14%	100%
9. LG health sector workers always solve all work problems at my workplace	13%	51%	6%	19%	11%	100%
10. LG health sector workers achieve more work targets compared to my workmates at my workplace	12%	37%	7%	26%	18%	100%
11. LG health sector workers do more work tasks compared to my workmates at my workplace	7%	47%	11%	19%	15%	100%
12. LG health sector workers solve more work problems compared to my workmates at my workplace	13%	31%	10%	34%	12%	100%

Source: Data from the field

Key: SD = Strongly Disagree, D = Disagree, NS = Not sure, A = Agree, SA = Strongly Agree

To analyze findings, Kasese District LG health sector employees and clients who strongly disagreed and those who disagreed were integrated into one category who “opposed” the items. Additionally, Kasese District LG health sector employees and clients who strongly agreed and those who agreed were combined into another category who “concurred” with the items. Thus, three categories of Kasese District LG health sector employees and clients were compared, which included “Kasese District LG health sector employees and clients who opposed the items”, “Kasese District LG health sector employees and clients not sure on the items” and “Kasese District LG health sector employees and clients who concurred with the items”.

Employee efficiency

Findings in Table 9 show; fewer Kasese District LG health sector employees and clients opposed three items about employee efficiency (that is items 1 and 2) compared to LG health sector employees and clients who concurred to these items while a very small percentage of LG health sector employees and clients were not sure about these items. A comparison on these items shows that the percentages of LG health sector employees and clients that opposed ranged from 32% to 35% while the percentages of LG health sector employees and clients that were not sure ranged from 8% to 9% and the percentages of LG health sector employees and clients that concurred ranged from 57% to 59. Findings show most LG health sector employees and clients were of that the view that LG health sector workers always did not waste time doing tasks given to them at their workplace and always did not waste time achieving targets set for them at their workplace.

However, findings show that most Kasese District LG health sector employees and clients opposed four items about employee efficiency (that is items 3, 4, 5 and 6) compared to LG health sector employees and clients who concurred to these items and LG health sector employees and clients who were not sure about these items. A comparison on these items shows that the percentages of LG health sector employees and clients that opposed ranged from 50% to 72% while the percentages of LG health sector employees and clients that were not sure ranged from 5% to 6% and the percentages of LG health sector employees and clients that concurred ranged from 24% to 45%. Findings show most LG health sector employees and clients were of that the view that LG health sector workers did not make the health sector lose financially while doing tasks given to them and achieving targets set for them at their workplace, that they use more time to do work tasks compared to their workmates at their workplace but used less time to achieve work targets compared to their workmates at their workplace.

Employee effectiveness

Findings in Table 9 further show that most Kasese District LG health sector employees and clients opposed five items about employee effectiveness (that is items 1 to 5) compared to LG health sector employees and clients who concurred to these items while a very small percentage of LG health sector employees and clients were not sure about these items. A comparison on these items shows that the percentages of LG health sector employees and clients that opposed ranged from 48% to 64% while the percentages of LG health sector employees and clients that were not sure ranged from 5% to 11% and the percentages of LG health sector employees and clients that concurred ranged from 30% to 45%. Findings show most LG health sector employees and clients were of view LG health sector workers rarely achieve all work targets set for them at their workplace, did all tasks given to them at their workplace and solved all work problems them at their workplace. In addition, most LG health sector employees and clients were of view that LG health sector employees and clients did not achieve more work targets and did not do more work tasks compared to their workmates them at their workplace.

However, findings show that fewer Kasese District LG health sector employees and clients opposed one item about employee effectiveness (that is item 6) compared to LG health sector employees and clients who concurred to this item and LG health sector employees and clients who were not sure about this item. A comparison on these items shows that the percentage of LG health sector employees and clients that opposed was 44% while the percentage of LG health sector employees and clients that were not sure was 10% and the percentage of LG health sector employees and clients that concurred was 46%. Thus, from this analysis, the following is the interpretation. Findings show

most LG health sector employees and clients were of that the view that LG health sector workers solved more work problems compared to their workmates at their workplace.

4.5 Employee Training and Employee Performance in Kasese District LG

Before determining the effect of employee training on employee performance, descriptive statistics for employee training are presented to show the respondents views on this variable.

4.5.1 Employee Training in Kasese District LG

Three dimensions were used to measure employee training and these were employee TNA, employee training contents delivery and employee training assessment. Kasese District LG health sector employees were requested to respond to 20 items by indicating their agreement using a five-point Likert scale as illustrated in Table 10.

Table 10: Findings about employee training in Kasese District LG

Items about employee training needs assessment	SD	D	NS	A	SA	Total
1. The LG health sector always conducts an employee training assessment to find out skills/expertise employee lack	18%	38%	6%	24%	14%	100%
2. The LG health sector employee training assessment successfully identify the employee training skills/expertise requirements	29%	39%	5%	21%	6%	100%
3. The LG health sector employee training assessment provides guidelines for the training course design	13%	53%	6%	18%	10%	100%
4. The LG health sector employee training assessment is based on realistic activities	22%	32%	4%	26%	16%	100%
5. The LG health sector employee training assessment is based on appropriate standards	7%	51%	10%	22%	10%	100%
Items about employee training content delivery	SD	D	NS	A	SA	Total
6. The LG health sector employee training objectives are clear	10%	31%	10%	26%	23%	100%
7. The LG health sector employee training covers the skills and tasks to be trained	10%	33%	10%	28%	19%	100%
8. The LG health sector employee training content delivery approach is appropriate	12%	48%	7%	24%	9%	100%
9. The LG health sector employee training content delivery approach communicate required skills to trainees	10%	43%	6%	23%	18%	100%
10. The LG health sector employee training content delivery approach communicate required knowledge to trainees	14%	44%	6%	28%	8%	100%
11. The LG health sector employee training content delivery approach communicate required attitudinal behavior to trainees	10%	40%	2%	30%	18%	100%
12. The LG health sector employee training content delivery approach communicate required task information to trainees	10%	49%	6%	22%	13%	100%
Items about employee training evaluation	SD	D	NS	A	SA	Total
13. The LG health sector conducts employee training evaluation after training	10%	31%	9%	17%	33%	100%
14. The LG health sector employee training evaluation proves that the training has taught what was planned	11%	34%	9%	20%	26%	100%
15. The LG health sector employee training evaluation has been used to improve course contents for future use	12%	50%	5%	16%	17%	100%
16. Employees are asked how they liked and felt about the LG health sector training	10%	42%	6%	16%	26%	100%
17. The LG health sector training methods used are evaluated	14%	44%	5%	24%	13%	100%
18. The LG health sector trainer who delivered the training is evaluated	10%	38%	3%	26%	23%	100%
19. The general learning conditions and environment of the LG health sector training are evaluated	10%	48%	7%	17%	18%	100%
20. The degree to objectives of the LG health sector training programmes have been achieved is evaluated	21%	49%	6%	14%	10%	100%

Source: Data from the field

Key: SD = Strongly Disagree, D = Disagree, NS = Not sure, A = Agree, SA = Strongly Agree

Employee training needs assessment

Findings in Table 10 show that most Kasese District LG health sector employees opposed five items about employee training needs assessment (that is items 1 to 5) compared to LG health sector employees who concurred to these items and LG health sector employees who were not sure about these comparisons, it can be seen that the percentages that opposed the items were higher compared to the percentages for those who were not sure and the percentages that concurred. Thus, from this analysis, the following is the interpretation. Findings show that most LG health sector employees were of the view that the LG health sector rarely conducted an employee training assessment to find out skills/expertise employee lack, the employee training assessment did not successfully identify the employee training skills/expertise requirements and employee training assessment did not provide guidelines for the training course design. In addition, most LG health sector employees were of the view that the LG health sector employee training assessment was not based on realistic activities and appropriate standards. Thus, these findings show poor employee training needs assessment of the LG health sector employees in Kasese District. Poor employee training needs assessment can contribute to poor employee performance.

Like the above results, interview findings indicated that employee training needs assessment for LG health sector in Kasese District was not conducted well. Key informant A revealed the following:

So far, basing earlier training session, there is little expectation to be achieved at the end of the training. Standards should be reached to confirm level of competence among the participants. There rarely a provision of a platform to show technical skills (Interview with key informant A conducted on 23rd November 2016).

During the interview key informant C revealed the following related to poor TNA, “Sometimes there is no clear view of training objectives in conducting training program.

In such a situation the training objectives do not help participants to be focused (Interview conducted on 24th November 2016)". Similarly, key informant B had this say:

The training objectives are rarely used as the basis for measuring effectiveness of the training in knowledge, skills and attitudes expected of trainees. Furthermore, we are not sure whether the training objectives link the training needs and training delivery or whether they clarify for trainers and trainees precisely what their goals were in training (Interview with key informant C conducted on 24th November 2016).

Therefore, the following can be deduced from the findings. On overall, findings suggest that TNA was rarely done before real training for the LG health sector employees in Kasese District.

Employee training content delivery

In addition, findings in Table 10 show that most Kasese District LG health sector employees opposed five items about employee training contents delivery (that is items 8 to 12) compared to LG health sector employees who concurred to these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show that most LG health sector employees were of the view that the LG health sector employee training content delivery approach was inappropriate and that the employee training content delivery approach did not communicate required skills, knowledge, attitudinal behavior and task information to trainees. This shows several shortcomings in the training contents delivery that can contribute to poor employee performance. During the interview, key informant A reported on the relevance of the trainings health sector employees received to their work as shown in the following, *"Health workers have reported ineffectiveness of these trainings on their work (Interview with key informant A conducted on 23rd November 2016)*". This result is in line with the result earlier reported by respondents who answered the questionnaire. This indicates that KDLG health sector did not put a lot of emphasis on training that would add value to and thus relevant to the current work for those selected

for training. Key informant B reported on the quality of the training programmes for which employees participated as he had this to say, *“The majority of the health sector employees are not contented with the quality of the training programmes for which they participated (Interview with key informant B conducted on 24th November 2016)”*. This result indicates a lack of deliverance of training content and/or substance to the trainees during the training programme.

However, findings in Table 10 show that that fewer Kasese District LG health sector employees opposed two items about employee training contents delivery (that is items 6 to 7) compared to LG health sector employees who concurred to these items while a smaller percentage of LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show that most LG health sector employees were of the view that the LG health sector employee training objectives were clear and the employee training covered the skills and tasks to be trained. These were strengths in training contents delivery, which could have helped enhanced employees performance. However, given that they were fewer compared to the shortcomings in training contents delivery, their positive effect on employee performance can be compromised.

Employee training evaluation

Findings in Table 10 show that most Kasese District LG health sector employees opposed five items about employee training evaluation (that is items 15, 16, 17, 19 and 20) compared to LG health sector employees who concurred to these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show that most LG health sector employees were

of the view that the LG health sector employee training evaluation had not been used to develop the course contents for future use, employees were not asked how they liked and felt about the training and that the training methods used were not evaluated. In addition, most LG health sector employees were of the view that the general learning conditions and environment of the training and the degree to objectives of the training programmes had been achieved was not evaluated. All these shortcomings in the training evaluation can contribute to poor employee performance.

However, findings in Table 10 show that that fewer Kasese District LG health sector employees opposed three items about employee training evaluation (that is items 13, 14 and 15) compared to LG health sector employees who concurred to these items while a smaller percentage of LG health sector employees who were not sure about these items.

Thus, from this analysis, the following is the interpretation. Findings show that most LG health sector employees were of the view that the LG health sector conducted employee training evaluation after training, which proved that the training had actually taught what was intended and the trainer who delivered the training was evaluated. Under these circumstances employee performance can be improved.

4.5.2 Correlation between Employee Training and Employee Performance

Hypothesis one stated, “*Employee training has a significant effect on employee performance in the health sector of Kasese District LG*”. Spearman rank order correlation coefficient (*rho*) was used to determine the strength of the relationship between employee training and employee performance. The coefficient of determination was used to determine the magnitude of variance in staff performance accounted for by employee training.

Table 11: Correlation between employee training and employee performance in Kasese District LG

	Employee training
Employee performance	$rho = .528$ $rho^2 = .279$ $p = .000$ $n = 125$

Source: Data from the field

Findings in Table 11 show that there was a positive moderate correlation ($rho = .528$) between employee training and staff performance. Since the correlation causal-effect as stated in the first objective, the coefficient of determination, which is a square of the correlation coefficient ($rho^2 = .279$), was computed and expressed as a percentage to establish the variance in staff performance due to employee training. Because this significance of the correlation is less than the recommended critical significance, the hypothesis “*Employee training has a significant effect on employee performance in the health sector of Kasese District LG*” was accepted.

The connotation of these findings is that the moderate effect implied that a change in employee training contributed to a moderate change in employee performance. The positive nature of the effect meant that the change in employee training and employee performance was in the same direction whereby better employee training contributed to better employee performance and poor employee training contributed to poor employee performance.

A further analysis using regression was conducted to determine the effect of the three dimensions of employee training (that is employee TNA, employee training contents delivery and staff training evaluation) on employee performance. Findings are presented in the following table.

Table 12: Effect of dimensions of employee training on employee performance

<i>Regression Statistics</i>					
Multiple R		.618			
R Square		.382			
Adjusted R Square		.367			
Standard Error		5.911			
Observations		125			

<i>ANOVA</i>					
	<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>Sig F</i>
Regression	3	2612.9	871.0	24.9	.000
Residual	121	4227.7	34.9		
Total	124	6840.6			

	<i>Coefficients</i>	<i>Standard Error</i>	<i>Beta</i>	<i>t Stat</i>	<i>P-value</i>
Intercept	18.68	2.23		8.38	.000
Employee training needs assessment	.85	.16	.56	5.40	.000
Employee training content delivery	1.05	.30	.75	3.47	.001
Employee training evaluation	.70	.25	.67	2.81	.006

Source: Data from the field

Findings in Table 12 show a strong linear regression coefficient (Multiple R = .628) between dimensions of employee training (employee TNA, employee training contents delivery and employee training assessment) on staff performance. In order to determine the effect of the dimensions of employee training (employee TNA, employee training contents delivery and employee training assessment) on staff performance, the regression coefficient was squared (R Square = .382) and then adjusted (Adjusted R Square = .367) to take into consideration the deviations of points that fall off the linear line. The Adjusted R Square (.367) was then expressed as a percentage to determine the effect of the dimensions of employee training (employee TNA, employee training contents delivery and employee training evaluation) on employee performance. Thus, findings show that the dimensions of employee training (employee TNA, employee training contents delivery and employee training assessment) accounted for 36.7% variance in staff performance.

However, since the 36.7% variance in employee performance was a combined effect of the dimensions of employee training (employee TNA, employee training contents delivery and employee training evaluation), the coefficients statistics were used to determine which of the dimensions of staff training significantly affected employee performance. On the other hand, where p-value is greater than .05, it indicated that that the dimension did not significantly affect employee performance. Thus, from the table, it is shown that all three dimensions, employee training needs assessment, employee training contents delivery and employee training evaluation, significantly affected employee performance, because their p-values (.000, .001 and .006) were less than the critical significance at .05. Of these three dimension, employee training needs assessment more affected employee performance because it had the largest t-value (t-value = 5.40), followed by employee training content delivery (t-value = 3.47) and employee training evaluation (t-value = 2.81), respectively.

4.6 Employee Career Development and Employee Performance in Kasese District LG

Before determining the effect of employee career development on employee performance, descriptive statistics for employee career development are presented to show the respondents views on this variable. Two dimensions were used to measure employee career development and these were employee career counseling and employee career discussions. Findings are presented in the following sub sections.

4.6.1 Employee Career Development in Kasese District LG

Kasese District LG health sector employees were requested to respond to 12 items about employee career counseling by indicating their agreement using a five-point Likert scale as shown in Table 13.

Table 13: Findings about employee career counseling in Kasese District LG

Items about employee career counseling	SD	D	NS	A	SA	Total
1. The local government health sector provides career counseling to employees	10%	29%	10%	27%	25%	100%
2. The local government health sector career counseling allows employees the opportunity to recognize their goals during the course of their careers	10%	31%	11%	27%	20%	100%
3. The local government health sector career counseling allows employees the opportunity to define their goals during the course of their careers	12%	47%	7%	24%	10%	100%
4. The local government health sector career counseling assists employees in achieving their individual needs	10%	39%	8%	24%	18%	100%
5. The people who conducts The local government health sector career counseling team members are competent	14%	42%	7%	30%	8%	100%
Items about employee career discussions	SD	D	NS	A	SA	Total
6. The local government health sector supervisors always conduct career discussions with the employees to improve their performance	10%	48%	6%	16%	19%	100%
7. The local government health sector conduct career discussions usually focus on employee skills/behaviors	21%	47%	6%	13%	14%	100%
8. The local government health sector conduct career discussions focus on work related feedback	13%	57%	6%	8%	16%	100%
9. The local government health sector conduct career discussions focus on employee career development process	12%	40%	6%	18%	24%	100%
10. The local government health sector conduct career discussions focus on employee assessments	7%	50%	10%	14%	18%	100%
11. The local government health sector always conduct career discussions to identify areas of employee weaknesses and strengths	13%	34%	10%	29%	14%	100%
12. The local government health sector conduct career discussions to identify appropriate employee training	10%	46%	9%	14%	21%	100%

Source: Data from the field

Key: SD = Strongly Disagree, D = Disagree, NS = Not sure, A = Agree, SA = Strongly Agree

Employee career counseling

Findings in Table 13 show that most Kasese District LG health sector employees opposed three items about employee career counseling (that is items 3 to 5) compared to LG health sector employees who concurred with these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector career counseling did not allow staff the opportunity to define their goals during the course of their careers, did not assist employees in achieving their individual needs and the career counseling team members were incompetent.

However, findings in Table 13 show that fewer Kasese District LG health sector employees opposed items about employee career counseling (that is items 1 to 2) compared to LG health sector employees who concurred with these items while a small percentage of LG health sector employees were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector provided career counseling to employees and the career counseling allowed staff the chance to recognize their goals in the course of their careers.

Employee career discussions

Findings in Table 13 show that most Kasese District LG health sector employees opposed seven items about employee career discussions (that is items 6 to 12) compared to LG health sector employees who concurred with these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector supervisors rarely conducted career discussions with the employees to improve their performance, the career discussions did not usually focus on employee skills/behaviors, work related feedback, employee career development process and employee assessments. In addition, most LG health sector employees were of view that the LG health sector rarely conducted career discussions to identify areas of employee weaknesses and strengths including appropriate employee training.

Interview with key informants revealed the critical incidents that represent what helped and hindered career discussions in Kasese District LG health sector. The hindering

incidents referred to what was lacking or interfering in the facilitation and development of the career discussion. The following quote describes these outcomes further:

It is hard for some employees to, how do I explain it...it's hard for some employees to move forward because they do not really have anything to base it on when career discussion is opened ended. In such a situation, employees do not know what to take and apply it to what they are doing (Interview with key informant A conducted on 23rd November 2016).

Although career discussions were rare in Kasese District LG health sector, discussing work, goals, and future included helpful topics in the discussion about what the staff presently did for work, their career goals, and career future. The impact of the focus of the discussion on work and career goals is illustrated in the following quotation:

Career discussions get employees reflecting back on what they said and what their career goals are and how they know. They learn that some things that are not being met, how they can change. The discussions just kind of made them really reflect on what they do and, and where they want to be. And the end where the organization could take them (Interview with key informant C conducted on 24th November 2016)

4.6.2 Correlation between Employee Career Development and Employee Performance

Hypothesis two stated, “Employee career development has a significant effect on employee performance in the health sector of Kasese District LG”. Using Spearman rank order correlation coefficient (*rho*) and the coefficient of determination, Table 14 presents the test results.

Table 14: Correlation between employee career development and employee performance in Kasese District LG

	Employee career development
Employee performance	$rho = .564$ $rho^2 = .318$ $p = .000$ $n = 125$

Source: Data from the field

Findings in Table 14 show that there was a moderate positive correlation ($rho = .564$) between employee career development and employee performance. The coefficient of determination ($rho^2 = .318$) shows that employee career development accounted for 31.8% variance in staff performance. These findings were subjected to a test of significance (p) and it is shown that the significance of the correlation ($p = .000$) is less than the recommended critical significance at .05. Because this significance of the correlation is less than the recommended critical significance, the hypothesis “*Employee career development has a significant effect on employee performance in the health sector of Kasese District LG*” was accepted.

The positive nature of the correlation meant that the change in employee career development and employee performance was in the same direction whereby better employee career development contributed to better employee performance and poor employee career development contributed to poor employee performance.

A further analysis using regression was conducted to determine the effect of the two dimensions of employee career development (that is employee career counseling and employee career discussions) on employee performance. Findings are presented in the following table.

Table 15: Effect of dimensions of employee career development on employee performance

<i>Regression Statistics</i>					
Multiple R					.568
R Square					.322
Adjusted R Square					.311
Standard Error					6.165
Observations					125

<i>ANOVA</i>					
	<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>Sig F</i>
Regression	2	2204.4	1102.2	29.0	.000
Residual	122	4636.2	38.0		
Total	124	6840.6			

	<i>Coefficients</i>	<i>Standard Error</i>	<i>Beta</i>	<i>t Stat</i>	<i>P-value</i>
Intercept	19.45	2.23		8.73	.000
Employee career counseling	.56	.17	.30	3.32	.001
Employee career discussions	.37	.09	.35	3.92	.000

Source: Data from the field

Findings in Table 15 show a moderate linear regression coefficient (Multiple R = .568) between dimensions of employee career development (employee career counseling and employee career discussions) on employee performance. The Adjusted R Square (.311) shows that the dimensions of employee career development (employee career counseling and employee career discussions) accounted for 31.1% variance in employee performance.

Thus, it was concluded that the dimensions of employee career development (employee career counseling and employee career discussions) contributed to 31.1% variance in employee performance.

However, since the 31.1% variance in employee performance was a combined effect of the dimensions of employee career development (employee career counseling and employee career discussions), the coefficients statistics were used to determine which of the dimensions of employee career development affected most employee performance.

Thus, from the table, it is shown that both dimensions of employee career development (employee career counseling and employee career discussions) singularly had a significant effect on employee performance, because their p-values (.001 and .000) were less than the critical significance at .05. However, employee career discussions more affected employee performance because it had a larger t-value (t-value = 3.92) compared to that of employee career counseling (t-value = 3.32).

4.7 Employee Performance Management and Employee Performance in Kasese District LG

Before determining the effect of employee career development on employee performance, descriptive statistics for employee performance management are presented to show the respondents views on this variable. Two dimensions were used to measure employee performance management and these were employee goal setting and employee performance appraisal.

4.7.1 Employee Performance Management in Kasese District LG

Kasese District LG health sector employees were requested to respond to 28 items about employee performance management by indicating their agreement using a five-point Likert scale as shown in Table 16.

Table 16: Findings about employee performance management in Kasese District LG

Items about employee goal setting	SD	D	NS	A	SA	Total
1. The local government health sector usually sets for me goals	9%	39%	5%	33%	14%	100%
2. The local government health sector sets goals for me that are specific	16%	49%	3%	22%	10%	100%
3. The local government health sector sets goals for me that are measurable	16%	44%	1%	27%	12%	100%
4. The local government health sector sets goals for me that are achievable	20%	38%	6%	20%	16%	100%
5. The local government health sector sets goals for me that are realistic	22%	40%	13%	21%	4%	100%
6. The local government health sector sets goals for me that are time-targeted	22%	45%	12%	10%	11%	100%
7. The local government health sector sets goals for me that are clear	16%	37%	6%	20%	21%	100%
8. The local government health sector sets goals for me that are challenging	17%	43%	8%	18%	14%	100%
9. There are always deadlines for accomplishing goals the local government health sector sets for me	12%	39%	7%	26%	16%	100%
10. The local government health sector supervisors encourage me to reach goals set for me	14%	43%	4%	26%	13%	100%
11. I participate in setting my goals at the local government health sector	14%	40%	5%	26%	15%	100%
12. I get credit and recognition when I attain goals that the local government health sector sets for me	27%	40%	8%	11%	14%	100%
13. I get feedback indicating how I have achieved goals that the local government health sector sets for me	30%	47%	4%	15%	4%	100%
14. I have suitable/effective action plans for reaching goals that the local government health sector sets for me	18%	50%	10%	15%	7%	100%
15. I am offered opportunity to gain knowledge and ability in attaining goals that the local government health sector sets for me	14%	30%	8%	34%	14%	100%
Items about employee performance appraisal	SD	D	NS	A	SA	Total
16. The local government health sector always appraises me	18%	30%	5%	25%	22%	100%
17. The local government health sector's employee appraisal thoroughly evaluates my work-related behavior	17%	28%	4%	34%	17%	100%
18. The local government health sector's employee appraisal objectively evaluates my work-related behavior	15%	37%	8%	26%	14%	100%
19. The local government health sector's employee appraisal has always enabled to determined how I am performing the job	15%	44%	8%	18%	15%	100%
20. The local government health sector's employee appraisal enabled establishing a plan for my improvement	13%	47%	10%	15%	15%	100%
21. The local government health sector provides me with feedback after conducting the appraisal	21%	30%	3%	25%	21%	100%
22. The local government health sector's employee appraisal process is excellently handled	15%	43%	4%	29%	9%	100%
23. The local government health sector's employee appraisal is reliable	20%	39%	3%	24%	14%	100%
24. I am comfortable with the local government health sector's employee appraisal criteria	25%	30%	9%	21%	15%	100%
25. I have an opportunity to appeal the local government health sector performance rating that I think is biased or inaccurate	20%	42%	6%	18%	14%	100%
26. The performance standards used in the local government health sector appraisal are relevant to me	11%	36%	5%	31%	17%	100%
27. I have confidence in the local government health sector people who appraise me	10%	47%	6%	26%	11%	100%
28. The local government health sector's appraisal outcomes have been used well to motivate me to perform better	22%	32%	3%	31%	12%	100%

Source: Data from the field

Key: SD = Strongly Disagree, D = Disagree, NS = Not sure, A = Agree, SA = Strongly Agree

Employee goal setting

Findings in Table 16 show that most Kasese District LG health sector employees opposed fourteen items about employee goal setting (that is items 1 to 14) compared to LG health sector employees who concurred with these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector rarely set for them goals and the goals were not specific, measurable, achievable, realistic, time-targeted, clear and challenging. Most LG health sector employees were also of the view that there are rarely deadlines for accomplishing goals, the supervisors did not encourage them to reach the set goals and they did not participate in setting their goals. Furthermore, most LG health sector employees were of view that they did not get credit and recognition when they attained set goals, they did not get feedback indicating how they had achieved goals and they did not have suitable/effective action plans for reaching goals that the LG health sector sets for them.

However, findings in Table 16 show that fewer Kasese District LG health sector employees opposed one item about employee goal setting (that is item 15) compared to LG health sector employees who concurred with this item while a small percentage LG health sector employees were not sure about this item. A comparison on this item shows that the percentage of LG health sector employees that opposed was 44% while the percentage of LG health sector employees that were not sure was 8% and the percentage of LG health sector employees that concurred was 48%. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that they were offered opportunity to gain knowledge and ability in attaining goals that the LG health sector sets for them.

Interviews with the three key informants shade some light about goal setting. For example, when asked whether LG health sector set goals for its worker, Key Informant A responded thus, *“I am not happy with goal setting because there is no because there is no clear policy formulation on goal setting (Interview with key informant A conducted on 22nd November 2016)”*. Similarly, Key Informant B answered as follows, *“Goal setting in Kasese district LG health sector in employee training is wanting. This is because of poor implementation policy (Interview with key informant B conducted on 23rd November 2016)”*. However, Key Informant C answered in affirmative as shown in the following, *“The LG health sector sets goals by looking at LG activity plan. The contributions are done by the health departments/units towards achievement of those goals. Then align the departments/units goals to LG goals and allocate them to staff (Interview with key informant C conducted on 24th November 2016)”*.

Thus, from the interview findings it is shown that key informants support LG health sector employees that were of the view that LG health sector sets goals for them because of the similarities in their responses about goal setting for employees. These findings generally suggest that goals are set at LG health sector but there is clear policy guiding the process. If a policy is lacking, goal setting may not be clear to the employees and as such, it compromises their efforts to achieve the goals. When asked how effective had been LG health sector’s goal setting, Key Informant C responded to this question as shown in the following, *“LG health sector has set its goals aligned in line with the vision and mission of the LG (Interview with key informant C conducted on 24th November 2016)”*. This can be interpreted that if the goals were not aligned with the vision and mission of the LG, then they would not be effective.

Thus, from the findings, it is shown that goal setting was done for some employees at the LG health sector but it appears that in particular departments or units of the local government while in other departments or sections, there is goal setting for the staff. Even when goals were set for some staff, among these the goals were not specific, measurable, achievable, realistic, time-targeted, clear and challenging. For some employees, they were not credited and recognized for attaining set goals while for other employees, feedback indicating achievement of set goals was not provided. In such a situation, where goal setting for employees was well handled, employees are likely to perform better while where it was poorly handled, employees are likely to perform poorly.

Employee performance appraisal

Findings in Table 16 show that show that most Kasese District LG health sector employees opposed eleven items about employee performance appraisal (that is items 16, 18 to 25 and 27 to 28) compared to LG health sector employees who concurred with these items and LG health sector employees who were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector rarely appraised them, the LG employee appraisal did not objectively evaluate their work-related behavior and the employee appraisal rarely enabled to determined how they were performing the job. Most LG health sector employees were of view that the LG health sector's employee appraisal did not enable establishing a plan for their improvement, did not provide them with feedback after conducting the appraisal and that the employee appraisal process was not excellently handled and employee appraisal was unreliable. Most LG health sector employees were of view that they were uncomfortable with the employee appraisal criteria, they did not have an opportunity to appeal the performance rating that they

thought was biased or inaccurate, they did not have confidence in the people who appraised them and the appraisal were not used well to motivate them to perform better.

However, findings in Table 16 show that fewer Kasese District LG health sector employees opposed two items about employee performance appraisal (that is items 17 and 26) compared to LG health sector employees who concurred with these items while a small percentage LG health sector employees were not sure about these items. Thus, from this analysis, the following is the interpretation. Findings show most LG health sector employees were of view that the LG health sector's employee appraisal thoroughly evaluated their work-related behavior and the performance standards used in the LG health sector appraisal were relevant to them.

Interview with key informants were supportive of the findings obtained using the questionnaire. For example, when they were asked whether LG health sector conducted performance appraisal, Key Informant A said, *“Yes supervisor evaluates the supervisee face to face and they agree on performance levels (Interview with key informant A conducted on 22nd November 2016)”*. Key Informant B also answered in affirmative as follows, *“It is through face to face between appraisers and employees in order to agree on performance targets so that employees know what they have to achieve and when the achievement is expected (Interview with key informant B conducted on 23rd November 2016)”*. The third key informant responded as follows, *“The LG health sector conducts performance appraisals through the LG health departments/ and using individual level goals (Interview with key informant C conducted on 24th November 2016)”*. These findings agree with the some of the LG health sector employees that answered positively that the local government conducted performance appraisals. Key informants were then asked about the effectiveness of the performance appraisal. In response, Key Informant A

said, *“It has been inconsistent. It has been conducted as an afterthought but it is part of LG health sector policy that employees have to be appraised after at most three months (Interview with key informant A conducted on 22nd November 2016)”*. If the performance appraisals are inconsistent, then they are unlikely to achieve their objectives. As for Key Informant B, the response was similar to that of Key Informant A. Key Informant C was not any different as shown in following, *“The appraisal is not very effective. It is mainly used for contract renewal while little emphasis has been on using it for training (Interview with key informant C conducted on 24th November 2016)”*. Thus, the interview findings from key informants are similar to the findings obtained from staff using questionnaires in that they both show that LG health sector conducted performance appraisals but they were not effective.

Thus, findings show that performance appraisal was not effective in helping employee at the LG health sector. This is because most employees held a negative view most items about the appraisal. When performance appraisal is not conducive, it can contribute to negative consequences such as poor employee performance. However, this will be confirmed in the following subsection.

4.7.2 Correlation between Employee Performance Management and Employee Performance

Hypothesis three stated, *“Employee performance management significantly affects employee performance in the health sector of Kasese District LG”*. Table 17 gives test results.

Table 17: Correlation between employee performance management and employee performance in Kasese District LG

	employee performance management
Employee performance	$rho = .552$ $rho^2 = .305$ $p = .000$ $n = 125$

Source: Data from the field

Findings in Table 17 shows that there was a fair positive correlation ($rho = .552$) between employee performance management and employee performance. The coefficient of determination ($rho^2 = .305$) shows that employee performance management accounted for 30.5% variance in staff performance. Findings were tested for significance (p) and it is showed that the significance of correlation ($p = .000$) is less than the recommended critical significance at .05. Because the significance of correlation is less than the recommended critical significance, the hypothesis “*Employee performance management significantly affects employee performance in the health sector of Kasese District LG*” was accepted.

Thus, the meaning of the findings was that the moderate effect meant that an alteration in employee performance management contributed to a moderate variance in employee performance. The positive nature of the effect meant that the change in employee performance management and employee performance was in the same direction where better employee performance management contributed to better employee performance and poor employee performance management contributed to poor employee performance.

A further analysis using regression was conducted to determine the effect of the two dimensions of employee performance management (that is employee goal setting and employee performance appraisal) on employee performance. Findings are given in the following table.

Table 18: Effect of dimensions of employee performance management on employee performance

<i>Regression Statistics</i>					
Multiple R		.552			
R Square		.305			
Adjusted R Square		.294			
Standard Error		6.242			
Observations		125			

<i>ANOVA</i>					
	<i>df</i>	<i>SS</i>	<i>MS</i>	<i>F</i>	<i>Sig F</i>
Regression	2	2086.5	1043.2	26.8	.000
Residual	122	4754.2	39.0		
Total	124	6840.6			

	<i>Coefficients</i>	<i>Standard Error</i>	<i>Beta</i>	<i>t Stat</i>	<i>P-value</i>
Intercept	17.64	2.45		7.20	.000
Employee goal setting	.23	.06	.33	3.57	.001
Employee performance appraisal	.22	.07	.29	3.05	.003

Source: Data from the field

Findings in Table 18 show a moderate linear regression coefficient (Multiple R = .552) between dimensions of employee performance management (employee goal setting and employee performance appraisal) on employee performance. The Adjusted R Square shows that the dimensions of employee performance management (employee goal setting and employee performance appraisal) accounted for 29.4% variance in staff performance.

However, since the 29.4% variance in employee performance was a combined effect of the dimensions of employee performance management (employee goal setting and employee performance appraisal), the coefficients statistics were used to determine which of the dimensions of employee performance management significantly affected employee performance. Thus, from the table, it is shown that all two dimensions, employee goal setting and employee performance appraisal, significantly affected employee performance, because their p-values (.001 and .003) were less than the critical significance at .05. However employee goal setting more affected employee performance

because it had a larger t-value (t-value = 3.57) compared to that of employee performance appraisal (t-value = 5.05).

4.8 Conclusions

Findings have shown that employee training, employee career development and employee performance management were conducted by Kasese district LG health sector in an effort to improve employee performance. However, the way in employee training, employee career development and employee performance management were conducted by Kasese district LG health sector was ineffective as they a number of shortcomings in their implementation, which failed in improving employee performance. These shortcomings were in employee TNA, employee training content delivery, employee training assessment, staff career counseling, employee career discussions, employee goal setting and staff performance appraisal.

CHAPTER FIVE

SUMMARY, DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The chapter gives the summary, discussion, conclusions and recommendations. It is divided into 3 sections. The initial one has the summary. The next one gives the discussion. The final section gives the conclusions. The fourth section presents the recommendation.

5.2 Summary of Findings

5.2.1 Employee training and staff performance in Kasese district LG health sector

There was a moderate effect of employee training on employee performance in Kasese district LG health sector. This was because employee training accounted for 27.9% of variance in employee performance in Kasese district LG health sector, whereby better employee training contributed to better employee performance in Kasese district LG health sector and poor employee training contributed to poor employee performance in Kasese district LG health sector. In addition, all three dimensions of employee training (employee TNA, employee training contents delivery and employee training assessment) singularly had a significant effect on employee performance in Kasese district LG health sector, because their p-values (.000, .001 and .006) were less than the critical significance at .05. However, employee training needs assessment more affected employee performance because it had the largest t-value (t-value = 5.40), followed by employee training content delivery (t-value = 3.47) and employee training evaluation (t-value = 2.81), respectively.

5.2.2 Employee career development and employee performance in Kasese district LG health sector

There was a moderate positive effect of employee career development on employee performance in Kasese district LG health sector. This was because employee career development accounts for 31.8% of variance in employee performance in Kasese district LG health sector, whereby better employee career development contributed to better employee performance in Kasese district LG health sector and poor employee career development contributed to poor employee performance in Kasese district LG health sector. Findings further revealed that both dimensions of employee career development (employee career counseling and employee career discussions) singularly had a significant effect on employee performance, because their p-values (.001 and .000) were less than the critical significance at .05. However, employee career discussions more affected employee performance because it had a larger t-value (t-value = 3.92) compared to that of employee career counseling (t-value = 3.32).

5.2.3 Employee performance management and employee performance in Kasese district LG health sector

There was a moderate positive effect of employee performance management on employee performance in Kasese district LG health sector. This was because employee performance management accounted for 30.5% of variance in employee performance in Kasese district LG health sector, whereby better employee performance management contributed to better employee performance in Kasese district LG health sector and poor employee performance management contributed to poor employee performance in Kasese district LG health sector. Furthermore, both dimensions of employee performance management (employee goal setting and employee performance appraisal) singularly had a significant

effect on employee performance in Kasese district LG health sector, because their p-values (.001 and .003) were less than the critical significance at .05. However employee goal setting more affected employee performance because it had a larger t-value (t-value = 3.57) compared to that of employee performance appraisal (t-value = 5.05).

5.3 Discussion of Findings

5.3.1 Employee training and employee performance in Kasese district LG health sector

The research findings on significant positive effect of employee training on employee performance in Kasese district LG health sector support other researchers and scholars such as Ashikhube, Kimani and Musiega (2013). These researchers and scholars also explained that training helps individuals to learn to be more effective on the job through developing knowledge, skills or attitude by learning experience to attain effective performance. These research findings are in line with the HR theory that aids the significance of training where it is perceived as one of the processes in realising company goals through maintaining staff and managing them effectively (Ishikawa, 2007). Specifically, the study established shortcomings in employee training in Kasese district LG health sector, which compromised employee performance.

The results in this study showed there was a positive and significant effect between TNA and staff performance in Kasese district LG health sector (Beta = .56, t = 5.50, p < 0.05). Study findings were constant with what Poon & Othman, (2000) discovered, that TNA positively affects staff performance. They established that 92% of respondents affirmed that their companies conducted formal TNA before carrying out training. TNA is vital in determining what knowledge, skills and abilities are essential for staff to commit in

companies and to do better on their assignments. Employees who attend and participate in training when good training needs assessment has been conducted are able to understand the reason for training for them to attain their goals at work. These results concur with the study by, (Buckley & Caple 2000; Bersin, 2006).

However, this study established poor employee training needs assessment of the LG health sector employees in Kasese District that contributed to poor employee performance. The poor employee training needs assessment arose because of the LG health sector rarely conducted an employee training assessment to find out skills/expertise employee lack, the employee training assessment did not successfully identify the employee training skills/expertise requirements and employee training assessment did not provide guidelines for the training course design. In addition, the LG health sector employee training assessment was not based on realistic activities and appropriate standards.

Several shortcomings in the training contents delivery that contributed to poor employee performance in Kasese DLG health sector were identified in this study. Among these shortcomings were inappropriate employee training content delivery approach, which did not communicate required skills, knowledge, attitudinal behavior and task information to trainees. However, employee training objectives were clear and the employee training covered the skills and tasks to be trained. In relation to inappropriate employee training content delivery approach, Poon and Othman (2000) opined that “an employee must be nurtured and developed but it is not enough just to throw a training program to employees and hoping for the best from them”. The findings of this study concur with Ashikhube et al (2013) who observed that “sometimes, the training is not tied to the organization’s

goals as it is often conducted in a vacuum, which is unrelated to the problems facing the organizations”.

“Hence, whether the employees retain anything or can apply what they have learned from the training to the job, it is immaterial because it is the activity that count and not the results benefited from the training” (Hamid, Salleh & Ismail, 2007). Some managers send their employees for training because they expect to see them to come back and able to perform satisfactorily. However, the manager may not be aware of the purpose of training nor he/she given tools to help in coaching the employees in applying what they have learned in training on the job. Therefore, employees often questioned the value of the relevance of training they received as they returned to work environment that did not support a change, even though they wanted to make some changes in their behaviors and trying out new skills on their works (Lin & Tremblay, 2003).

Results of this study indicated that “training evaluation and employee performance were positive and significant (Beta = .67, t-value = 2.81, $p < 0.05$)”. This shows that “evaluation of content of the training, the methods employed measure performance of knowledge, skills and attitudes against the standard could contribute to enhanced EP at work depending on the choice of evaluation criteria”. The study findings were in agreement with Alliger, Tannenbaum, Bennett, Traver and Shotland (1997) & Lam & Kong (1992) observation that “training evaluation positively influences employee’s performance”. “The effectiveness of training is depending on evaluation of employees by looking at their understanding throughout the training programmes and their ability to transfer the new skills and knowledge into their work tasks” (Lam & Kong, 1992).

Findings in this study showed that the LG health sector in Kasese District conducted employee training evaluation after training. However, it was established in this study that the LG health sector employee training evaluation had not been used to improve the course contents for future use, employees were not asked how they liked and felt about the training and that the training methods used were not evaluated. In addition, the general learning conditions and environment of the training and the degree to objectives of the training programmes had been achieved was not evaluated. All these shortcomings in the training evaluation can contribute to poor employee performance.

5.3.2 Employee career development and employee performance in Kasese district LG health sector

Findings relating to the moderate effect of employee career development on employee performance in Kasese district LG health sector support other academicians (such as Gruman & Saks, 2011). These academicians highlight various aspects of employee career development that contribute to better employee performance of an organization, of which some were fulfilled by Kasese district LG health sector during the employee career development while others were lacking for some employees. These findings concur with literature indicating that “career development practices in the workplace help companies improve performance of their employees” (Simonsen, 1999; Kappia, Dainty & Price, 2007; Laabs, 1996; Sullivan & Mainiero, 2007). Career Innovation Group (CIPD, 2005) “employees are more likely to perform better if offered the opportunity to develop”.

Employee career counseling

Results of this study indicated that “career counseling and employee performance were positive and significant (Beta = .30, t-value = 3.32, $p < 0.05$)”. Stringer & Cheloha, (2003)

who observed that “the amount of career support received by employees was positively correlated to their performance”. “Career counseling for individuals have been found to be effective in fostering the relevant skills and experiences that will be required to perform organizational activities” (Stringer & Cheloha, 2003). This study established that the Kasese District LG health sector provided career counseling to employees. However, the LG health sector career counseling did not allow employees the opportunity to define their goals during the course of their careers, did not assist employees in achieving their individual needs and the career counseling team members were incompetent. These shortcomings compromised employee performance in Kasese District LG health sector.

Results of this study indicated that career counseling and employee performance were positive and significant (Beta = .35, t-value = 3.92, $p < 0.05$). Career discussions by management for employees have been argued as resulting in many benefits for both the organization and the employee. In this study it was established that the LG health sector supervisors rarely conducted career discussions with the employees to improve their performance, the career discussions did not usually focus on employee skills/behaviors, work related feedback, employee career development process and employee assessments. In addition, the LG health sector rarely conducted career discussions to identify areas of employee weaknesses and strengths including appropriate employee training. However, Butterfield, Borgen, Amundson and Erlebach (2007) found that employees were found to perform poorly where career discussions with managers were poor or not occurring.

Findings of this study are similar to other studies which have shown that although the value of career development interventions within the work-place has been demonstrated, this practice has not been widely adopted in organizations. The CIPD conducted a survey

(2005) and found that “one third of senior managers were committed to activities related to career management”.

This study provided some evidence that sharing responsibility with employees for their career development using career discussions between managers and employees is potentially beneficial for all parties. “The results of this study support literature that indicates it is in the organizations and managers’ best interest to support their employees’ career development” (Kidd, Hirsh, & Jackson, 2004). “With more of the recent emphasis on managers to change their management style whereby employees are more involved in the decision-making process and business goal awareness” (Ballout, 2007).

“Career discussions result in employee career development goals that can systematically be utilized to determine professional development activities within the organization” (Grawitch, Gottschalk & Munz, 2006).

5.3.3 Employee performance management and employee performance in Kasese district LG health sector

As indicated earlier, findings of this study revealed poor employee performance management in Kasese district LG health sector. However, literature shows that “in the same way that standard PM provide the opportunity for staff to evaluate the level at which performance goals have been achieved, PAs provide extra opportunity to evaluate an extent at which staff have shown behavioral EP and both parties have been compliant to STAFF development agreement (EDA). Schaufeli & Salanova (2008) “it is necessary to monitor the EDA periodically and potentially readjust goals and resources”.

The performance management should be used by administrators to discuss the importance of employee performance behaviors with employees in addition to how the employee can exhibit such behaviors (such as role expansion, pro-activity, persistence and adaptability). Goals for employee performance behaviors can then be agreed upon and included as part of the EDA. Administrators should also provide some recognition and incentives for employees who exhibit employee performance behaviors.

In this study, goal setting one of the dimensions that measured employee performance management was found poorly handled among some employees in Kasese LG health sector. Yet, employee training is supposed to involve setting goals that outline what employees are expected to accomplish. “Goals are crucial for enhancing employee performance because they stimulate employees’ energy, focus and intensity” (Gruman & Saks, 2011).

In support of this argument, Medlin & Green (2009) examined “the relationships among goal setting, employee performance, workplace optimism and individual performance”. They hypothesized that “goal setting would impact employee performance positively and employee performance would positively impact workplace optimism, which in turn would have a positive relationship with individual performance”. As hypothesized, results showed that “goal setting drove employee performance, which led to optimism and, in turn, influenced performance”. Hence, results of this study regarding the effect of goal setting on employee performance were similar to Medlin & Green’s (2009) findings. Therefore, the researcher of this study suggests that in order to enhance employee performance, Kasese LG health sector and other organizations should implement a goal

setting process satisfactorily because it informs employees of their specific responsibilities.

This study established some effort for Kasese DLG health sector to align goals with its mission. “This was in line with literature emphasizing that in addition to implementing a goal setting process within the organization, there should be an alignment between individual goals and organizational goals in order for improved employee performance to occur” (Macey, Schneider, Barbera & Young, 2009). This is because this alignment ensures that employees engage themselves in tasks that are important to achieve organizational goals. Armstrong, (2006) “employees should be allowed to have a say in setting goals in order to increase the likelihood of better employee performance”.

Findings revealed that performance appraisal was not well conducted, which lowered employee performance in Kasese District LG health sector. For example, findings revealed that administrators in Kasese district LG health sector were rarely fair during performance appraisal and that the kind of relationship between administrators and subordinates in Kasese district LG health sector during appraisal was not conducive. This concurs with Dobbins, Cardy, Fecteau and Miller (1993) who observed that “performance appraisals sometimes evaluate employees on criteria that are irrelevant, or over which they have no control”. “If the relationship between a manager and subordinate lacks trust, they are unlikely to have productive performance discussions that generate positive results” (Pulakos, Mueller-Hanson, & O’Leary, 2008). Macey & Schneider (2008), “trust has a central role in the appraisal process as employees trust that their investment of energy, time and personal resources will be rewarded”. Macey et al. (2009) have stated that “employee performance during performance appraisal cannot exist without trust, as

trust and fairness are the foundation for employees to feel and act. Kahn” (cited in Gruman & Saks, 2011) noted that “situations that promote trust are predictable, consistent, clear and nonthreatening”. He found that “one factor that promotes trust is a supportive management style that is consistent and not hypocritical”.

Maslach and Leiter (2008) have demonstrated that “fairness is associated with employee performance”. Similarly, Moliner, Martínez-Tur, Ramos, Peiró and Cropanzano (2008) found “positive correlations between the three components of justice and employee performance”. Saks, (2006) found that “procedural justice and distributive justice were positively associated with employee job performance and that this form of employee performance was positively associated with individually-oriented organizational citizenship behavior”.

5.4 Conclusions

5.4.1 Employee training and employee performance in Kasese district LG health sector

The first objective of this study investigated the effect of employee training on employee performance in the health sector of Kasese District LG. Thus, it was found out that employee training had a moderate positive significant effect on employee performance in Kasese district LG health sector. This showed that employee training is of great importance to Kasese district LG health sector and other organizations. Thus, it is important for organizations to get skilled and capable employees for better performance, and employees will be competent when they have the knowledge and skill of doing the task, which can be achieved through better employee training. It was established that employee training in Kasese district LG health sector was conducted but not effectively,

which compromised employee performance. Employee training was not effective because of poor employee training needs assessment, training content delivery approach and employee training evaluation. Findings further revealed that employee training needs assessment more affected employee performance, followed by employee training content delivery and employee training evaluation.

5.4.2 Employee career development and employee performance in Kasese district LG health sector

The second objective of this study assessed the effect of employee career development on employee performance in the health sector of Kasese District LG. It was established that there was a moderate positive effect of employee career development on employee performance in Kasese district LG health sector. Poor employee career development compromised the employee performance in Kasese district LG health sector. Poor employee career development arose due to poor employee career counseling and employee career discussions. For example, career counseling did not allow employees the opportunity to define their goals during the course of their careers, did not assist employees in achieving their individual needs and the career counseling team members were incompetent. On the other hand, LG health sector supervisors rarely conducted career discussions with the employees to improve their performance, the career discussions did not usually focus on employee skills/behaviors, work related feedback, employee career development process and employee assessments.

5.4.3 Employee performance management and employee performance in Kasese district LG health sector

The third objective of this study examined the effect of employee performance management on employee performance in the health sector of Kasese District LG. There was a moderate positive effect of employee performance management on employee performance in Kasese district LG health sector. Findings indicated shortcomings in employee performance management, which were in goal setting and performance appraisal. These included performance appraisal inconsistency, little emphasis for using performance appraisal for training, workers rarely getting feedback about the outcome of the performance appraisal exercise, lack of clarity about the appraisal and delayed feedback.

5.5 Recommendations

5.5.1 Employee training and employee performance in Kasese district LG health sector

KDLG health sector human resource department should improve its employee training to enhance employee performance by first focusing on employee training needs assessment given that it more affected employee performance, followed by employee training content delivery and employee training evaluation, respectively. In relation employee training improving the employee performance in Kasese district LG health sector, employee training should be properly conceived and implemented. In their discussion of how to promote employee performance, Schaufeli and Salanova (2007) suggested a “three step process for ensuring clear mutual expectations between an organization and an employee”. Schaufeli & Salanova, (2007) “this process represents a modification of existing performance management processes which places the focus on personal goals (as

opposed to organizational goals) and the resources required to achieve them”. Kasese district LG health sector should first focus on performance appraisals to improve employee performance given that more affected employee performance compared to that of feedback.

5.5.2 Employee career development and employee performance in Kasese district LG health sector

KDLG health sector should improve its employee career development to enhance employee performance by first focusing on employee career discussions given that they more affected employee performance compared to employee career counseling. Based on the findings of this study and discussion, this study recommends that KDLG health sector human resource department should set a definite plan for the employees that needs to be followed after a performance appraisal. The employee career development should cite objective instances of an employee’s performance issues that need to be addressed. It should provide clear expectations, actions and metrics for improvement. A reasonable time frame for the employee’s achievement of plan should be determined.

5.5.3 Employee performance management and employee performance in Kasese district LG health sector

KDLG health sector human resource department should improve its employee performance management to enhance employee performance by first focusing on goal setting given that it more affected employee performance compared to employee performance appraisal. This study also recommends that the following shortcomings in employee performance management should be addressed to enhance employee performance in Kasese district LG health sector. Performance appraisals should be consistent, effort should be made to use performance appraisal for training of employees.

Employees should be provided with prompt feedback about the outcome of the performance appraisal exercise to ensure clarity about the appraisal.

5.5 Limitations of the Study

Some respondents did not respond to the questionnaire because they miss placed them. However, given that the response rate was 89% above the recommended 67%, data obtained from the field was analyzed.

5.6 Contribution to the Study

Although literature exists about the contribution of staff development to employee performance, it was not contextualized to Kasese district LG health sector in Uganda. Thus, apart from achieving the primary objectives, this study has in the process contributed to the body of knowledge in the field of the effect of staff development to employee performance in Uganda with specific reference to Kasese district LG health sector. This will therefore be a reference material for future research.

5.7 Areas for Future Research

This study is not conclusive enough because it only looks at three aspects of staff development which were employee training, employee performance management and employee career development. However, performance management is wide covering aspects such as identifying and providing resources to employees in order for them to become engaged. Thus, studies may be conducted these areas in respect to organization employee performance.

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APPENDICES

Appendix 1: Kejcie and Morgan Table for determining sample size from a given population

N	S	N	S	N	S	N	S	N	S
10	10	100	80	280	162	800	260	2800	338
15	14	110	86	290	165	850	265	3000	341
20	19	120	92	300	169	900	269	3500	246
25	24	130	97	320	175	950	274	4000	351
30	28	140	103	340	181	1000	278	4500	351
35	32	150	108	360	186	1100	285	5000	357
40	36	160	113	380	181	1200	291	6000	361
45	40	180	118	400	196	1300	297	7000	364
50	44	190	123	420	201	1400	302	8000	367
55	48	200	127	440	205	1500	306	9000	368
60	52	210	132	460	210	1600	310	10000	373
65	56	220	136	480	214	1700	313	15000	375
70	59	230	140	500	217	1800	317	20000	377
75	63	240	144	550	225	1900	320	30000	379
80	66	250	148	600	234	2000	322	40000	380
85	70	260	152	650	242	2200	327	50000	381
90	73	270	155	700	248	2400	331	75000	382
95	76	270	159	750	256	2600	335	100000	384

Source: Kejcie and Morgan cited in Amin (2005)

Note: “N” is population size

“S” is sample size.

Appendix 2: Questionnaire for district health staff

Dear respondent,

The purpose of this study is to investigate “*Effect of staff development on employee performance in the health sector of Kasese District LG health sector*”. As a staff of the health sector of Kasese District LG health sector, you have a wealth of important information that is very useful in this exercise. The information collected will be held in strict confidentiality and in no way be personalized. You are therefore requested to respond to the questions below as objectively and as accurately as possible.

Section A: Background Information

Please, tick (✓) in the box against the answer you have selected or fill in the space provided

1. Gender: Male Female (Please tick)
2. Education level (indicate highest)
 Primary O-Level A-Level Tertiary University
 Other (specify) _____
3. Years you have been working with the LG health sector
(Less than 1 year) (1-2 years) (3-5 years) (5-10 years)
(Above 10 years)
4. Age (20-30) (31-39) (40-49) (Above 50)

Section C: Employee training

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Items about employee training needs assessment	SD	D	NS	A	SA
1. The LG health sector always conducts an employee training assessment to find out skills/expertise employee lack	1	2	3	4	5
2. The LG health sector employee training assessment successfully identify the employee training skills/expertise requirements	1	2	3	4	5
3. The LG health sector employee training assessment provides guidelines for the training course design	1	2	3	4	5
4. The LG health sector employee training assessment is based on realistic activities	1	2	3	4	5
5. The LG health sector employee training assessment is based on appropriate standards	1	2	3	4	5
Items about employee training content delivery	SD	D	NS	A	SA
1. The LG health sector employee training objectives are clear	1	2	3	4	5
2. The LG health sector employee training covers the skills and tasks to be trained	1	2	3	4	5
3. The LG health sector employee training content delivery approach is appropriate	1	2	3	4	5
4. The LG health sector employee training content delivery approach communicate required skills to trainees	1	2	3	4	5
5. The LG health sector employee training content delivery approach communicate required knowledge to trainees	1	2	3	4	5
6. The LG health sector employee training content delivery approach communicate required attitudinal behavior to trainees	1	2	3	4	5
7. The LG health sector employee training content delivery approach communicate required task information to trainees	1	2	3	4	5
Items about employee training evaluation	SD	D	NS	A	SA
1. The LG health sector conducts employee training evaluation after training	1	2	3	4	5
2. The LG health sector employee training evaluation proves that the training has actually taught what was intended	1	2	3	4	5
3. The LG health sector employee training evaluation has been used to improve the course contents for future use	1	2	3	4	5
4. Employees are asked how they liked and felt about the LG health sector training	1	2	3	4	5
5. The LG health sector training methods used are evaluated	1	2	3	4	5
6. The LG health sector trainer who delivered the training is evaluated	1	2	3	4	5
7. The general learning conditions and environment of the	1	2	3	4	5

LG health sector training are evaluated					
8. The degree to objectives of the LG health sector training programmes have been achieved is evaluated	1	2	3	4	5

Section B: Employee career development

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Items about employee career counseling	SD	D	NS	A	SA
1. The LG health sector provides career counseling to employees	1	2	3	4	5
2. The LG health sector career counseling allows employees the opportunity to recognize their goals during the course of their careers	1	2	3	4	5
3. The LG health sector career counseling allows employees the opportunity to define their goals during the course of their careers	1	2	3	4	5
4. The LG health sector career counseling assists employees in achieving their individual needs	1	2	3	4	5
5. The people who conducts The LG health sector career counseling team members are competent	1	2	3	4	5
Items about employee career discussions	SD	D	NS	A	SA
1. The LG health sector supervisors always conduct career discussions with the employees to improve their performance	1	2	3	4	5
2. The LG health sector conduct career discussions usually focus on employee skills/behaviors	1	2	3	4	5
3. The LG health sector conduct career discussions focus on work related feedback	1	2	3	4	5
4. The LG health sector conduct career discussions focus on employee career development process	1	2	3	4	5
5. The LG health sector conduct career discussions focus on employee assessments	1	2	3	4	5
6. The LG health sector always conduct career discussions to identify areas of employee weaknesses and strengths	1	2	3	4	5
7. The LG health sector conduct career discussions to identify appropriate employee training	1	2	3	4	5

Section D: Employee performance management

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Items about employee goal setting	SD	D	NS	A	SA
1. The LG health sector usually sets for me goals	1	2	3	4	5
2. The LG health sector sets goals for me that are specific	1	2	3	4	5
3. The LG health sector sets goals for me that are measurable	1	2	3	4	5
4. The LG health sector sets goals for me that are achievable	1	2	3	4	5
5. The LG health sector sets goals for me that are realistic	1	2	3	4	5
6. The LG health sector sets goals for me that are time-targeted	1	2	3	4	5
7. The LG health sector sets goals for me that are clear	1	2	3	4	5
8. The LG health sector sets goals for me that are challenging	1	2	3	4	5
9. There are always deadlines for accomplishing goals the LG health sector sets for me	1	2	3	4	5
10. The LG health sector supervisors encourage me to reach goals set for me	1	2	3	4	5
11. I participate in setting my goals at the LG health sector	1	2	3	4	5
12. I get credit and recognition when I attain goals that the LG health sector sets for me	1	2	3	4	5
13. I get feedback indicating how I have achieved goals that the LG health sector sets for me	1	2	3	4	5
14. I have suitable/effective action plans for reaching goals that the LG health sector sets for me	1	2	3	4	5
15. I am offered opportunity to gain knowledge and ability in attaining goals that the LG health sector sets for me	1	2	3	4	5
Items about employee performance appraisal	SD	D	NS	A	SA
1. The LG health sector always appraises me	1	2	3	4	5
2. The LG health sector's employee appraisal thoroughly evaluates my work-related behavior	1	2	3	4	5
3. The LG health sector's employee appraisal objectively evaluates my work-related behavior	1	2	3	4	5
4. The LG health sector's employee appraisal has always enabled to determined how I am performing the job	1	2	3	4	5
5. The LG health sector's employee appraisal enabled establishing a plan for my improvement	1	2	3	4	5
6. The LG health sector provides me with feedback after conducting the appraisal	1	2	3	4	5
7. The LG health sector's employee appraisal process is excellently handled	1	2	3	4	5
8. The LG health sector's employee appraisal is reliable	1	2	3	4	5
9. I am comfortable with the LG health sector's employee appraisal criteria	1	2	3	4	5
10. I have an opportunity to appeal the LG health sector performance rating that I think is biased or inaccurate	1	2	3	4	5
11. The performance standards used in the LG health sector appraisal are relevant to me	1	2	3	4	5

12. I have confidence in the LG health sector people who appraise me	1	2	3	4	5
13. The LG health sector's appraisal outcomes have been used well to motivate me to perform better	1	2	3	4	5

Section E: Employee performance

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Items about employee efficiency	SD	D	NS	A	SA
1. I always do not waste time doing tasks given to me at my workplace	1	2	3	4	5
2. I always do not waste time achieving targets set for me at my workplace	1	2	3	4	5
3. I have made the health sector lose financially while doing tasks given to me	1	2	3	4	5
4. I have made the health sector lose financially while achieving targets set for me at my workplace	1	2	3	4	5
5. I use less time to do work tasks compared to my workmates at my workplace	1	2	3	4	5
6. I use less time to achieve work targets compared to my workmates at my workplace	1	2	3	4	5
Items about employee effectiveness	SD	D	NS	A	SA
1. I always achieve all work targets set for me at my workplace	1	2	3	4	5
2. I always do all tasks given to me at my workplace	1	2	3	4	5
3. I always solve all work problems at my workplace	1	2	3	4	5
4. I achieve more work targets compared to my workmates at my workplace	1	2	3	4	5
5. I do more work tasks compared to my workmates at my workplace	1	2	3	4	5
6. I solve more work problems compared to my workmates at my workplace	1	2	3	4	5

Thank for Your Cooperation

Appendix 3: Questionnaire for district clients

Dear respondent,

The purpose of this study is to investigate “*Effect of staff development on employee performance in Kasese District LG*”. As a staff of Kasese District LG, you have a wealth of important information that is very useful in this exercise. The information collected will be held in strict confidentiality and in no way be personalized. You are therefore requested to respond to the questions below objectively and accurately as possible.

Section A: Background Information

Please, tick (✓) in the box against the answer you have selected or fill in the space provided

1. Gender: Male Female (Please tick)
2. Education level (indicate highest)
 Primary O-Level A-Level Tertiary University
 Other (specify) _____
5. Years LG have provided services to you
(Less than 1 year) (1-2 years) (3-5 years) (5-10 years)
(Above 10 years)
6. Age (20-30) (31-39) (40-49) (Above 50)

Section E: Employee performance

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Section E: Employee performance

Indicate your disagreement or agreement to the statements by ticking the column boxes against the statements (SD=Strongly Disagree; D= Disagree; NS= Not Sure; A= Agree; SA=Strongly Agree)

Items about employee efficiency	SD	D	NS	A	SA
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1. LG health sector employees always waste time doing tasks given to them at their workplace	1	2	3	4	5
2. LG health sector employees always waste time achieving targets set for them at their workplace	1	2	3	4	5
3. LG health sector employees have made the District lose financially while doing tasks given to them at their workplace	1	2	3	4	5
4. LG health sector employees have made the District lose financially while achieving targets set for them at their workplace	1	2	3	4	5
Items about employee effectiveness	SD	D	NS	A	SA
7. LG health sector employees rarely achieve all work targets set for them at their workplace	1	2	3	4	5
8. LG health sector employees rarely do all tasks given to them at their workplace	1	2	3	4	5
9. LG health sector employees rarely solve all work problems at their workplace	1	2	3	4	5

Thank for Your Cooperation

Appendix 4: Interview Guide for District Officers

Dear respondent,

The purpose of this study is to investigate “*Effect of staff development on employee performance in the health sector of Kasese District LG health sector*”. As a part of the staff of the health sector of Kasese District LG health sector, you have a wealth of important information that is very useful in this exercise. The information collected will be held in strict confidentiality and in no way be personalized. You are therefore requested to respond to the questions below as objectively and as accurately as possible.

Employee training

1. What do you have to say about employee training at the LG health sector?
2. How has employee training at the LG health sector affected employee performance?

Employee career development

1. What is your opinion on employee career development at the LG health sector?
2. How has employee career development at the LG health sector affected employee performance?

Employee performance management

1. Are you satisfied with employee performance management at the LG health sector?
Please briefly explain your opinion.
2. How has employee performance management at the LG health sector affected employee performance?

Thank for Your Cooperation