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Relationship Between Organizational Culture and Quality Service Delivery at Comprehensive Care Centre in Kenyatta National Hospital

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Abstract **Original Research Article**

Quality and well-timed service delivery are always and should always be the focus of any organization. The general objective was to determine the effect of Organizational culture on quality service delivery at Kenyatta National Hospital's comprehensive care centre as moderated by government policies. The purpose of the study was to examine the relationship between organizational culture and quality service delivery at the comprehensive care center. The study was anchored on cognitive dissonance theory. Positivist research philosophy and explanatory research design were used to carry out the study. The target population was 9408 respondents, while the sample size was 499 respondents, calculated using Yamane and Taro's 1967 formula. Participants were selected using a stratified sampling approach. A structured questionnaire was used to collect data from healthcare workers and patients (recipients of care). Data was analyzed using descriptive statistics in the form of frequencies, percentages, central tendency (mean), and Std. Deviation. Correlation analysis was conducted using Pearson correlation to establish the nature of the relationship between study variables. Based on the findings, organizational culture was found to have a positive influence on quality service delivery. The study concluded that proper organizational culture was ideal in determining quality service delivery at Kenyatta National Hospital's comprehensive care centre. The study also recommended that management of the hospital should embrace an organizational culture that promotes employee job satisfaction.

Keywords: organizational culture, quality service delivery.

BACKGROUND OF THE STUDY

In the healthcare sector, quality service delivery has always remained a critical area of concern. The expectations of the patient and health care receivers depend on the quality of the service to enhance their health status (Barbé, Yansouni, Affolabi, & Jacobs, 2017). In the modern world, advancements in medical technology have enhanced the need for efficient healthcare systems. This concept encompasses the provision of healthcare services that are timely, effective, patient-centered, and safe, aimed at meeting the needs of patients. According to Bellio, Buccoliero (2021), the ability of healthcare providers to offer accessible treatment, effective patient management, accurate diagnosis, and continuous support services becomes the main objective of the comprehensive care centres, hence improving the quality-of-service delivery. Healthcare institutions, both private and public, are normally evaluated regularly with an objective of maintaining high standards of service delivery that build and enhance positive health outcomes for patients.

The healthcare sector in Kenya has undergone significant reforms aimed at improving service quality to meet the needs of the patients. The government, through various strategic plans and health policies, focuses on the significance of quality healthcare services in public and private hospitals (Gatukui *et al.,*2024). Despite these efforts, public health facilities continue to face challenges such as long waiting times, inadequate resources, and administrative inefficiencies, negatively affecting service delivery. According to Mised *et al.,* (2017), comprehensive care centres mainly provide specialized services for chronic illnesses such as HIV/AIDS, which require well-coordinated processes and efficient systems that ensure patients receive continuous and quality care.

Quality service delivery at the Comprehensive Care Centre is normally determined through accessibility of healthcare, rate of patient satisfaction, timeliness of services, responsiveness of and overall effectiveness of care (Monroe *et al.,*2019). High-quality service delivery contributes to adherence to treatment, improved patient trust, and enhanced organizational reputation. Equally, poor service delivery may lead to increased complaints from patients, treatment interruptions, patient dissatisfaction, and poor health outcomes (Muhaev & Chubarov, 2024). Given the strategic importance of the Comprehensive Care Centre in the provision of specialized healthcare services, there is a need to continuously assess quality service delivery and strengthen factors that enhance service delivery to meet patient needs.

Effective quality service delivery is influenced by several organizational factors, including organizational culture and human resource capacity. As noted by Muinga *et al.,* (2020). A positive organizational culture promotes commitment and teamwork among employees, while efficient administrative systems enhance coordination and decision-making processes. Additionally, a well-structured organization ensures clarity of roles and responsibilities, which contributes to efficiency in service provision. Human resource capacity, through adequate skills, training, and competence, improves professionalism. Consequently, institutions that strengthen these organizational factors are more likely to achieve improved quality service delivery and higher customer satisfaction.

Purpose of the study

The purpose of the study was the effect of organizational culture on quality service delivery at comprehensive care centre in Kenyatta National Hospital.

Statement of the problem

Quality and well-timed service delivery are always and should always be the focus of any organization. Proper organizational culture can be an ideal pillar in terms of improving the quality of service provided by health institutions. The national government policies, if well implemented, can enable an organization to use the plan to attain quality service delivery (Muya, 2019). According to Abor (2019), the health sector remained the key sector that required continuously improved quality service delivery. According to the Kenya Vision 2030, it identified HIV and AIDS as a human rights issue that needed quality integrated services. In this case, quality service delivery should be improved if organizational culture is moderated by the relevant government policies addressing the health sector comprehensively.

Public Health State Department Professional Standards (2023–2027) notes that nearly 70% of clinical cases presented in hospitals are preventable, indicating a significant shortfall in primary and preventive healthcare initiatives. These challenges are compounded by inequitable resource allocation, workforce imbalances, and infrastructure disparities across counties. This continues to persistent systemic inefficiencies that undermine progress in delivering equitable Universal Health Coverage (UHC). Addressing these gaps calls for a deeper understanding of how government policies are being implemented and measured at various administrative levels. There appears to be a disconnect between established policies and actual practice. Although strategic plans exist, their execution is hindered by internal organizational challenges. This gap justifies a focused study of organizational culture, which can be optimized to improve the delivery of services.

Theoretical review

Cognitive Dissonance Theory

Cognitive dissonance describes a condition of conflicting attitudes, beliefs, or behaviors, resulting in psychological discomfort. This discomfort prompts a change in one of the attitudes, beliefs, or behaviors to alleviate the distress and regain balance. Leon Festinger proposed the theory in 1957, which connects human behavioral change with social behavior. Festinger suggested that cognitive dissonance occurs when individuals are confronted with realities that challenge their beliefs (Yahya, 2020). Cognitive dissonance theory assumes that people have an inborn determination for consistency in their attitudes, beliefs, values, knowledge, and perceptions. Discrepancy among cognitions results in mental suffering, recognized as cognitive dissonance.

However, the theory has been criticized for presenting errors that pose questions about the methodology supporting the theory and its validity. In conclusion, we encourage the field to embrace these significant challenges as opportunities for advancement, aiming to enhance and refine the entire theory. Secondly, the nonexistence of standardization, both in the ways of encouraging and assessing the theory (Vaidis *et al.,* 2019). Aronson criticized dissonance as a contradiction between an individual's self-concept and a perception about their behavior, which brands dissonance as appearing more like guilt. Cognitive Dissonance theory was employed in this study to tackle people's morals, opinions, surroundings, knowledge, and ultimately attitudes, which are critical for quality service delivery. It is also relevant in addressing the issue of organizational culture and how it influences service delivery.

Empirical literature review

Halil et al. (2025) examined how demographic characteristics shape service sector employees' perceptions of organizational culture. Their study was carried out in the Ministry of Culture and Tourism–licensed five-star thermal hotel in Afyonkarahisar, Turkey. Data collection was done using a questionnaire survey. The target population was 120 respondents. Only

99 questionnaires were returned of the 12 distributed. Results revealed that the hotel employees were a relatively young yet experienced workforce, with 91.8% of respondents under 40 years old; 56.1% were male and 43.9% female. Most employees had at least three years of tenure, which strengthened the reliability of the data on organizational culture values. Reliability coefficients were very high overall (α = 0.980), with sub-dimensions also demonstrating strong consistency: Involvement (α = 0.942), Consistency (α = 0.929), Adaptability (α = 0.920), and Mission (α = 0.953). The study concluded that demographic factors significantly influence how employees perceive organizational culture in their workplace. However, the study was specific to higher learning institutions, which may not directly apply to the health sector.

Rana *et al.,*(2019) examined how organizational culture impacts service delivery in Jordan. The target population was 152 top managers selected from the main city of Jordan. Data was gathered through surveys. Collected Descriptive statistics, and Smart PLS 3.0 software aided in data management. The results indicated that organizational culture significantly enhanced service delivery. Thus, policymakers and top management officials should embrace organizational culture for better services. Results by Oyemomi *et al.,*(2019) support this narrative that strategic dimensions are essential for an organization's effectiveness in service delivery. Conceptually, the study considered only organizational culture and failed to consider other significant concepts that determine service delivery. They include work conditions and job security, which will be moderated in the present study.

Mohammed *et al.,*(2020) assessed the impact of organizational culture and service delivery in Kuwait. A convenience sampling method was utilized to choose a sample. The questionnaire aided in primary data collection from the Ministry of Trade and Industry. From the finding's organization's culture had a positive and significant impact on quality service delivery by the Ministry as well as quality service to clients. The study recommended the inclusion of employees in decision-making and the allocation of some powers. The study, however, failed to include a control variable to check the association. The current study utilizes government policies as a control variable to mitigate the gap.

Semente *et al.,*(2021) evaluated how organizational culture influences the delivery of service in the public sector institutions in Namibia. SERVQUAL model was utilized in analyzing aspects such as assurance, reliability, empathy, and responsiveness. The sample respondents were 106 employees and customers. The findings demonstrated a positive relationship between organizational cultures and the delivery of service within these public sector institutions. Another reason for poor service delivery was the nonexistence of assurance and empathy caused by the institution's ranking culture. The current study will employ McKinsey's Seven S's Model, cognitive dissonance theory, and competence theory to mitigate this gap. Moreover, the moderating role was also not considered in the study.

Ngugi *et al.,*(2021) examined the influence of organizational culture on service delivery within higher learning institutions. It utilized both descriptive and causal research designs, targeting 2,475 teaching staff from 23 chartered public universities and 17 chartered private universities in Kenya. The sample included 225 teaching staff from two licensed public universities and two chartered private universities in the country. Organizational culture was found to significant influence on service quality in public colleges. The research also highlighted a strong and favorable link between organizational culture and service quality in both public and private institutions in Kenya. Furthermore, organizational culture was identified as a critical factor in predicting service quality in these institutions. However, the study was specific to higher learning institutions, which may not directly apply to the health sector.

Conceptual Framework.

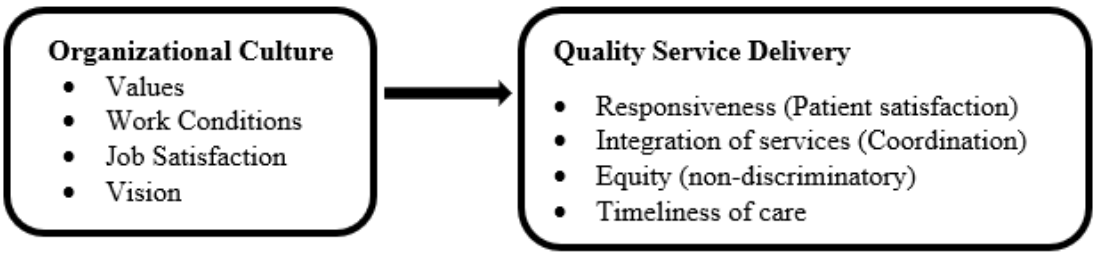

Figure 1: Conceptual Framework

RESEARCH METHODOLOGY

The study employed positivist philosophy because it aims at getting new knowledge based on empirical facts that can be verified and the reality of the phenomena under study (Ali, 2024). Positivism is ideal in this study since it follows scientific processes that was followed in generating the relations from hypothesizing the variables then the deductions that were made and observations based on the data collected to determine

reality whether true or false on the basis of the hypothesis.

The research used positivist's philosophy where researchers use social reality and observation to establish the reality to back the hypothesis and support quantitative statistical analysis (Maretha, 2023). The positivist philosophy is best for data collection and hypothesis testing. Considering the quantitative nature of the study and it follows the scientific nature which the philosophy of positivism advocates. Further, the study is deductive in nature; the conclusion is generalizable, thus making the philosophy most appropriate. The philosophy has been applied by (Park *et al.,*2020 and Kaluarachchi, 2025), this approach assumes that the research variables are known. In this case, positivism is appropriate for the present study.

The study took place at the CCC in Kenyatta National Hospital, with participants selected from this centre, which caters to an average of 150 patients daily. The unit of observation was individuals concerned with the operations and service delivery at the KNH Comprehensive Care Centre. According to the Ministry of Health (2020), the CCC serves over 7,000 active clients, with 9372 patients recorded in 2023 (CCC Records, 2023) and 36 healthcare workers (doctors, nurses, clinical officers, laboratory technicians, and social workers) giving a total target population of 9,408. The study employed stratified random sampling, where the total population was grouped into two strata, which include health care workers and patients. From the health worker strata 0.5% percent of the target population was sampled for data collection and the 99.5% was from the patient's strata.

In this study 30% was added to the sample size of 384 to carter for non-responses bias and questionnaire that was not completed or filled properly, this then increases the total sample size to 499. Questionnaires well structure were utilized to gather primary data from the respondents. The drop-and-pick later technique was used to administer the questionnaire. The validity of the research was ensured by pre-testing the data collection tools after being scrutinized by the supervisors. A pilot study was carried out at Moi Teaching and Referral Hospital to ascertain the reliability. Data were analyzed using descriptive statistics and inferential statistics. Descriptive statistics were done in the form of frequencies, mean, percentages, and Std. Deviation. The Pearson correlation method was used to analyze the relationships between variables (Dufera, Liu, & Xu, 2023). Meanwhile, inferential statistics were done to establish the strength and direction of the relationship between variables.

Data Analysis

Based on the findings, a total of 499 questionnaires were distributed to the respondents with the assistance of research assistants, out of which 458 (91.78%) questionnaires were returns. Out of these returned questionnaires 443 (97.72%) were usable while 15(3.28%) while 15 (3.28%) were non-unusable. The results are presented in Table 1.

Table 1: Response Rate

	Number	Percent (%)
Distributed Questionnaire	499	100.00
Returned questionnaire	452	90.58
Not returned questionnaire	32	6.41
Non usable questionnaire	15	3.01
Usable questionnaire	443	88.78

Source: Field Data (2026)

Descriptive Statistics

The main objective was to establish the effect of organizational culture on quality service delivery at comprehensive care centre in Kenyatta National Hospital. A total of ten statement related to organizational culture and its relationship with quality-of-service delivery. These statements were analyzed in the form of descriptive statics measured in terms of means and standard deviation.

Table 2: Descriptive statistics on organization culture (N=443)

Statements	N	Minimum	Maximum	Mean	Std. Dev.	Skewness	Kurtosis
My values are aligned with the company's values	443	1.00	5.00	2.5124	1.29101	.521	-.775
There is a conducive and positive work environment	443	1.00	5.00	2.5643	1.15821	.387	-.631
The institution has formulated clear procedures and standards to ensure employees consistently demonstrate the desired values and conduct	443	1.00	5.00	2.3183	1.11360	.562	-.371
The company offers a good compensation benefit and job security	443	1.00	5.00	2.3183	1.02251	.683	.161
Hospital employees perform their assigned roles and responsibilities with enthusiasm and a constructive mindset	443	1.00	5.00	2.8262	1.26170	.331	-.892

The Vision and Mission statements are well displayed	443	1.00	5.00	2.2122	.96553	.807	.591
The Values are well defined and displayed for all to see	443	1.00	5.00	2.3950	1.07824	.545	-.272
Organizational norms are well known	443	1.00	5.00	2.3567	1.04821	.443	-.285
The organizational culture set enhance performance hence service delivery.	443	1.00	5.00	1.95124	0.10396	.445	-.457
There are safety measures in place	443	1.00	5.00	2.4470	1.10276	.410	-.546
Average mean				**2.44628**	**1.114573**	**0.5134**	**-0.3477**

Source: Field Data (2026)

The first statement, whether individual values were aligned with the company's values, depicted a mean of 0.5124 and a Std. Deviation (1.29101). This implies that there was moderate agreement with this statement, indicating that stakeholders were somewhat uncertain regarding the value alignment. The Std. Deviation (1.29101) indicated a considerable variation in responses, meaning respondents do not share a uniform perception. The other statement was whether there is a conducive and positive work environment. Result revealed that there was moderate agreement with the statement depicted by the mean of 2.5643, while the Std. Deviation (1.15821) indicated the presence of diverse responses. The variation remained noticeable, indicating mixed experiences among staff.

The third statement was whether the institution has formulated clear procedures and standards to ensure employees consistently demonstrate the desired values and conduct. The results revealed that there was a moderate agreement with this statement, with a mean of 2.3183, while the Std. Deviation 1.11360 indicated the presence of diverse responses by the respondents; this lower mean indicates limited agreement, suggesting that employees are not strongly convinced that policies are clear. The dispersion shows some inconsistency in perceptions. On the statement whether the company offers good compensation benefits and job security, results revealed that there was low satisfaction with compensation and job security, depicted by a mean of 2.3183, while the Std. Deviation (1.02251) indicated minimal of diverse responses and consistency.

The fifth statement was whether hospital employees perform their assigned roles and responsibilities with enthusiasm and a constructive mindset, and the results revealed that there was a more favorable perception of staff attitude depicted by the mean of 2.8262, while the Std. Deviation 1.26170 indicated diverse responses and opinions among respondents. The next statement was whether the Vision and Mission statements are well displayed, with a mean of 1.2122, which revealed that respondents strongly agreed with the statement. This was supported by the Std. Deviation (0.96553) shows very minimal diverse responses, implying that the visibility of vision and mission statements was inadequate. The next statement was whether the Values are well defined and displayed for all to see, the mean of 2.3950 indicated that there was moderate agreement, suggesting that organizational values are not clearly communicated to all employees, while the Std. Deviation (1.07824). Showed some presence of variations in perceptions.

Respondents were asked to respond whether organizational norms are well known to them, the results revealed that the majority indicated, by a mean of 2.3567, moderately agreed to this statement, while the Std. Deviation (1.04821) indicated the presence of diverse responses. Showing some limited agreement. Also, they asked to indicate whether organizational culture sets enhance performance, hence service delivery, results revealed that shows a mean of 1.95124 and a Std. Deviation (0.10396) revealed that the majority of respondents agreed to the statement that organizational culture significantly enhances service delivery. While the Std. Deviation (0.10396) indicates very minimal diverse responses; the majority of responses were in agreement. The respondents were asked to respond whether there are safety measures in the workplace, with the majority moderately agreeing that there were safety measures within the facility, as revealed by the mean of 2.4470 while Std. Deviation (1.10276) indicates a very minimal diverse response. Thus, this indicates that there were safety measures. The average mean of 2.44628 indicated that there was moderate agreement with most of these statements m, meaning that there is a significant relationship between, organizational culture and service delivery. While the overall Std. Deviation (1.1145) indicated some moderately divergent responses regarding the variable.

Correlation analysis

Correlation was conducted to check whether there is a relationship between the study variables. Also, to establish the direction of the relationship (Dufera, Liu, & Xu, 2023). Based on the findings, there is a moderate positive correlation between organizational culture and Quality Service Delivery ($r= 0.328$, p-value = 0.000 <0.005). This is confirmed by the correlation coefficient value being less than 0.5, which means that effective organizational culture tends to be linked with better Quality Service Delivery.

Table 3: Correlations Analysis Correlations

	Organizational Culture	**Quality Service Delivery**

Organizational Culture	Pearson Correlation	1	.328**
	Sig. (2-tailed)		.000
	N	443	443
Quality Service Delivery	Pearson Correlation	.328**	1
	Sig. (2-tailed)	.000	
	N	443	443
**. Correlation is significant at the 0.01 level (2-tailed).			

Source: Field Data (2026)

Inferential Statistics

The main objective of the study was to establish the effect of organizational culture on quality service delivery at the Comprehensive Care Centre in Kenyatta National Hospital. Three outputs were established that is the model summary to check model fitness, the ANOVA table to check whether your overall regression model is statistically significant, and lastly the coefficient table to check the strengths and direction of the relationship. From this objective the following hypothesis was formulated

H_{01} There is no statistically significant effect of organizational culture on quality service delivery at comprehensive care centre in Kenyatta National Hospital. The results are presented in the following table 4.

Table 4: Model Summary Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics				
					R Square Change	F Change	df1	df2	Sig. F Change
1	.828[a]	.685	.566	.44901	.685	53.258	1	441	.000
a. Predictors: (Constant), Organizational Culture									

Source: Field Data (2026)

Results in table 5 indicate that the model summary and that the model was statistically significant at p-value=0.000. Thus, organizational culture was found to be moderately associated with quality service delivery. The R-square value of 0.685 revealed that 68.5% (percent) of the variation in the quality-of-service delivery can be accounted for by the organizational culture. While 31.5% can be associated with other factors not included in the model. In other words, 31.5% of the variation in the quality-of-service delivery is unexplained.

Table 5: ANOVA ANOVA[a]

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	10.738	1	10.738	53.258	.000[b]
	Residual	88.912	441	.202		
	Total	99.649	442			
a. Dependent Variable: Quality Service Delivery						
b. Predictors: (Constant), Organizational Culture						

Source: Field Data (2026)

Analysis of variance (ANOVA) was carried out to establish whether your overall regression model is statistically significant to ascertain if the study variables have significant differences among them. On whether the variation in the data is primarily due to differences between the groups or if it can be attributed to random variability within the groups. The ANOVA was conducted at a 95% confidence level.

Analysis of variance shows that the calculated F-value = 53.258 at P-value 0.000<0.05 with the critical value of F (1, 441) =3.346. Since the calculated value F (75.300) is greater than the critical value (3.86), implying that given that the F-value is greater than the critical value (3.86). The hypothesis that there is no statistically significant effect of organizational culture on quality service delivery at comprehensive care centre in Kenyatta National Hospital is rejected. Thus, there is a significant relationship between organizational cultures and quality service delivery.

Table 6: Coefficients Table Coefficients[a]

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.523	.103		14.835	.000

	Organizational Culture	.334	.041	.328	7.298	.000
a. Dependent Variable: Quality Service Delivery						

Source: Field Data (2026)

A coefficient table was generated from the simple linear regression to establish the strength and direction of the relationship. Table 6 displays the coefficient estimates to show the changes in the dependent variable that result from the changes in the independent variable.

Based on the findings revealed, a unit change in organizational culture will lead to a 0.334 positive change in quality service delivery at the Comprehensive Care Centre in Kenyatta National Hospital, given other factors held constant. This was revealed by the beta value of 0.334.

QSD = 1.523+0.334 (OC)
Where QSD is Quality of service delivered and OC is organizational culture.

The findings from this research indicated that organizational culture had a positive influence on the quality of service delivered. Thus, organizational culture depicted a positive and significantly determined the Quality of service delivered in general. One unit change in organizational culture when other factors are held constant improves the controlled influences Quality of service delivery to a tune of 33.4%. Further, organizational culture accounts for 68.5% variation in the quality-of-service delivery. Thus, the results indicated that a well-planned and followed organizational culture guides employee behavior, enhances employee motivation for improved teamwork within an organization, and positively contributes to better decision-making.

These results are supported by result by other researchers. Rana *et al.,*(2019) examined how organizational culture impacts service delivery in Jordan, which has to be grounded on proper followed organizational culture. Effectively and in detail, organizational culture makes the operational processes within the organization compliant with the service needed, and thus it improves the quality of services within the health facilities. Mohammed *et al.,*(2020) also found that organizational culture influences other subsequent elements of the strategic implementation dimensions. Moreover, organizational culture impacts the values, work conditions, job satisfaction, and vision. Each of the elements has diverse effects on organizational culture and ultimately the quality of services provided within the health facility.

Conclusion of findings

The hypothesis was that there is no statistically significant effect of organizational culture on quality service delivery at the Comprehensive Care Centre in Kenyatta National Hospital. Given the finding, it was revealed that organizational culture depicted a positive and significant influence on quality service delivery (sig 0.000<0.05); therefore, the null hypothesis was rejected, as organizational culture was found to positively influence quality service delivery in the health sector. Thus, these results underscore the essence of having and following organizational culture, guided by the principles that organizations are built on. Thus, in conclusion, organizational culture stands to be a significant determinant of quality service delivery at Kenyatta National Hospital's comprehensive care centre.

Recommendations

Given the fact that the results depicted a positive relationship between organizational culture and quality service delivery. The study recommends that the management of the Comprehensive Care Centre at Kenyatta National Hospital should embrace and strengthen a supportive organizational culture by promoting employee job satisfaction, shared values, reinforcing the organization's vision, and improving working conditions among staff members.

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