ASSESSMENT OF THE INFLUENCE OF CITIZEN SERVICE CHARTER ON HEALTH SERVICE DELIVERY AT MBAGATHI HOSPITAL

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DECLARATION

I declare that this document and the research that it describes are my original work and that they have not been presented in any other university for academic work.

Signature: Date: 29/06/2026.

CHOPPY ODUNGA

19J03DMGP031

This research thesis was conducted under our supervision and is submitted with our approval as university supervisors.

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DEDICATION

This work is dedicated to my wife Cynthia and my children Savanna, Rio, Remi and Israel, whose continuous support and encouragement have guided me throughout this research journey.

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ABSTRACT

The problem of ineffective service delivery in public hospitals remains a persistent challenge. The main objective of the study was to assess the citizen service charter and its implications for health service delivery in Mbagathi Hospital. Specifically, the study sought to assess the influence of service standards on health service delivery, to determine the influence of procedural clarity on health service delivery, to examine the influence of grievance redressal mechanisms on health service delivery at Mbagathi Hospital and to assess the influence of patients' awareness of rights and responsibilities on health service delivery at Mbagathi Hospital. The study was guided by new public management (NPM) theory and public service motivation theory (PSMT). The study adopted a descriptive research design. The study site was Mbagathi Hospital. The study targeted 1208 daily outpatients at Mbagathi Hospital from whom data were collected using questionnaires and 19 key informants including hospital management staff for interviews. Hence, the sampling frame was 1227, which included both outpatients and hospital management staff. From the sampling frame, the sample size of 189 was selected using both the stratified proportionate random sampling method and purposive sampling. Primary data were obtained using respondent-administered 5-point Likert scale questionnaires and an interview guide. The pilot study was conducted in Mama Lucy Kibaki Hospital to assess the reliability and validity of the research tools. The questionnaires were administered to the outpatients in Mbagathi Hospital. The researcher used a drop-and-pick-up later approach for distributing the questionnaires. The researcher conducted key informant interviews with the help of trained research assistants. The researcher observed different legal and ethical considerations when conducting the study including obtaining informed consent from every participant before the collection of data and informing the participants that they retained the right to rescind participation in the process of data collection. Qualitative data from the open-ended questions and interviews were analyzed through content analysis. Quantitative data were analyzed through descriptive statistics: frequency, percentage, mean and standard deviation. Presentation of the findings was in the form of tables and figures like pie charts and bar graphs. The study established that the R^2 was 0.733, which implies that 73.3% of the variations in health service delivery could be explained by service standards, procedural clarity, grievance redressal mechanisms, patients' awareness of rights and responsibilities in the citizen service charter. Findings showed that service standards (β=0.764; p=0.001), procedural clarity (β=0.643; p=0.000), grievance redressal mechanisms (β=0.712; p=0.011), and patients' awareness of rights and responsibilities (β=0.558; p=0.000) had a significant influence on health service delivery in Mbagathi Hospital. From the interviews, the study established that the citizen service charter is implemented by ensuring it is accessible to everyone within the hospital. This is done by displaying it in key areas such as reception desks, waiting bays and outpatient departments where patients can easily access information. The study concluded that the citizen service charter significantly influenced the health service delivery in Mbagathi Hospital. The study recommended that management in Mbagathi Hospital should strengthen operational efficiency by introducing clear internal performance targets aligned with the charter.

OPERATIONALIZATION OF TERMS

Citizen service charter: Refers to a formal public document outlining the services provided by a hospital in terms of service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities within Mbagathi Hospital.

Grievance redressal mechanisms: Refers to the avenues available for the citizens to voice complaints, report service failures in health, get feedback and access the appeal process within Mbagathi Hospital.

Health service delivery: refers to the organized provision of healthcare services in Mbagathi Hospital intending to promote patient satisfaction, accessibility of services, quality of care and efficiency of services.

Patients' awareness of rights and responsibilities: Refers to how patients in Mbagathi Hospital are informed of their patients' rights, patients' responsibilities, importance of awareness and strategies to enhance awareness.

Procedural clarity: Refers to transparency, simplicity, consistency and communication of steps in Mbagathi Hospital which provides a clear timeline needed when accessing health services.

Service standards: Refer to a set of guidelines such as timeliness, quality, responsiveness and professionalism that define the quality of services delivered to the public in Mbagathi Hospital.

ABBREVIATIONS & ACRONYMS

CSC: Citizen Service Charter

ENT: Ear, Nose, and Throat

HoDs: Head of Departments

KCAA: Kenya Civil Aviation Authority

KRA: Kenya Revenue Authority

KWSC: Kirinyaga Water and Sanitation Company

MDAs: Ministries, Departments and Agencies

NACC: National Aids Control Council

NACOSTI: National Commission for Science, Technology & Innovation

NCWSC: Nairobi City Water and Sewerage Company

NPM: New Public Management

PSMT: Public Service Motivation Theory

SERVICOM: Service Compact with All Nigerians

SPSS: Statistical Package for Social Sciences

USA: United States of America

VHA: Veterans' Health Administration

CHAPTER ONE

INTRODUCTION

1.1 Background to the Study

Service delivery is important in any organization since it directly affects the loyalty and satisfaction of customers and also the organizational success (Swallehe, 2021). According to Asamoah (2025), health service delivery in hospitals refers to the organized provision of healthcare services to promote health among individuals and communities. Effective service delivery is attributed to accessibility, timeliness, quality, efficiency, equity and patient satisfaction (Chowdhury & Abdullah, 2024). According to Kaphle (2024), health service delivery encompasses various activities including prevention, diagnosis, treatment, rehabilitation, and palliative care which are delivered through health facilities. Sherstha (2018) noted that effective health service delivery systems are characterized by accessibility, quality, efficiency, equity, and responsiveness to the needs of the population.

Health service delivery involves coordinated efforts among healthcare providers to ensure that essential services are available and affordable to improve health outcomes and enhance the well-being of society (Ntelela, 2022). As argued by Phelan, Yates and Lillie (2022), hospital service delivery, especially in developing countries, faces different challenges including growing concerns in regard to quality, transparency and accountability of services delivered. This has prompted hospitals to implement governance tools like citizen service charters to ensure effective service delivery (Kaphle, 2024). Service charters are used by hospitals as a governance tool to formalize service standards including available services, wait times, costs and complaint procedures (Schedler & Helmuth, 2023). The

primary goal of a citizen service charter is bridging the gaps between service providers and citizens (Deep, 2021).

The citizen service charter entails different aspects including service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities (Jaymariel Frecy & Alan, 2025). Service standards ensure that public institutions remain accountable and responsive by setting out clear expectations for the provision of services to citizens (Nayan & Pandey, 2020). On the other hand, procedural clarity makes sure that citizens have a clear map and idea of where to access different services and how to engage with public service providers (Drewry, 2021). Further, grievance redressal mechanisms are crucial tools for offering citizens clear channels to raise complaints and seek clarification regarding the services provided (Pande & Hossain, 2023). As argued by Kumar (2021), an effective grievance mechanism has different components including channels for users to lodge complaints, steps followed in lodging complaints and the set timelines for grievance redressal

From a global perspective, organizations in the private and public sector have been using service charters as a governance tool to enhance delivery of services (Deep, 2021). In the USA, most public and private hospitals have implemented principles of citizen service charters under the *Patient's Bill of Rights* framework. Hospitals under the Veterans Health Administration (VHA) have integrated service charters into operations to enhance responsiveness and patient-centered care (Campaña-Castillo, Paloma-Castro & Romero-Sánchez, 2024). In Iran, hospitals under the Ministry of Health are required to adopt the *Patient's Rights Charter*, which highlights the commitments to ethical conduct, quality

care and respect for cultural and religious values (Sharifi, Gooshki, Mosadeghrad & Jaafaripooyan, 2021).

Regionally in Africa, citizen service charter (CSC) plays important roles in promoting transparency and responsiveness in an effort to enhance the quality and efficiency of service delivery (Mdibwa, 2019). In Nigeria, the implementation of service charters in public hospitals has led to gradual improvements in patient engagement and expectations (Abah, 2022). In Rwanda, strong political will and decentralized health governance have ensured service charters enhance hospital accountability. King Faisal Hospital regularly reviews service performance against charter commitments, leading to reduced complaints and better staff-patient relationships (Bob & Kebede, 2025). Uganda has implemented Citizen Service Charters in every government hospital, which give details on patient rights, staff obligations and feedback mechanisms (Nambassa & Mutiarin, 2024).

Locally in Kenya, citizen service charters are anchored within a broader policy and legal framework aimed at enhancing accountability, transparency, efficiency and citizen-centered public service delivery. The Kenya Vision 2030 puts emphasis on the transformation of public institutions through efficient and responsive service delivery systems that meet citizens' expectations (Thuo *et al*., 2024). This is complemented by the Huduma Bora Initiative and Huduma Kenya reforms which promote quality customer care, timely service provision and public feedback mechanisms within the institutions of government (Mutia, 2018). In addition, there are Public Service Commission guidelines that require public institutions to establish and display service charters outlining services offered, timelines, costs and complaint-handling procedures. This strengthens accountability and performance management. Further, Article 46 in the Constitution of

Kenya 2010 provides a strong constitutional foundation for service charters and guarantees consumer rights, including protection of consumers' economic interests and access to health (Kibet, 2020).

As argued by Ndege (2020), a citizen service charter is a significant tool of governance used by public and private institutions to enhance health service delivery in Kenya. The implementation of citizen service charters has been driven by the wider public sector reform agenda aimed at enhancing efficiency and customer satisfaction (Thuo, Kithuka & Rucha, 2024). According to Ogolla (2021), health service delivery in Mbagathi Hospital is poor, characterized by frequent shortages of essential medical supplies and drugs, understaffing and poor infrastructure. To address some of these challenges, the hospital has adopted a citizen service charter that outlines patient rights, emergency response timelines and grievance redress procedures.

Mbagathi Hospital has a problem characterized by persistent complaints from patients regarding long waiting times, unclear service procedures, inconsistent communication and limited awareness of service standards outlined in the charter (Chepkonga & Nyaga, 2019). Although citizen service charters are widely recognized as tools that enhance transparency, accountability, and responsiveness in public institutions, there is limited empirical evidence on how effectively these charters influence actual health service delivery outcomes within public healthcare facilities in Kenya. This study seeks to bridge this gap by assessing the citizen service charter and its implications for health service delivery in Mbagathi Hospital.

1.2 Statement of the Problem

Public hospitals in Kenya are expected to provide timely, efficient, transparent and patient-centered healthcare services. However, health service delivery in Mbagathi Hospital remains inconsistent (Kasandi, 2024). This is attributed to long queues, delays, staff absenteeism, lack of accountability, inadequate communication with patients and struggles to meet the expectations of citizens (Abdi, 2024). These inefficiencies have significantly eroded public confidence and satisfaction with the services. At least 66% of the patients in Mbagathi Hospital voiced complaints regarding inadequate services and poor infrastructure, leading to a deterioration in the quality of care as noted by Mwihoti (2015).

In response to this, Mbagathi Hospital has adopted a citizen service charter as a governance tool to promote transparency, accountability, and responsiveness. The citizen service charter outlines the service standards expected by the citizens, including service procedures (Kasandi, 2024). A citizen service charter is a statutory mechanism that promotes subnational accountability and public participation. However, despite the widespread implementation of citizen service charters, the delivery of services still remains poor (Thuo *et al*, 2024). This may be attributed to factors such as inadequate implementation of citizen service charters. This study is therefore necessary because, despite the existence of a citizen service charter, public hospitals in Kenya continue to face challenges such as long waiting times and complaints regarding service quality.

The existing studies have exhibited various research gaps. For instance, there were contextual gaps as the existing studies (Ferdous, 2021; Abdi, 2024) focused on central government ministries and not devolved county health facilities. In addition, Laikera (2023) failed to focus on devolved facilities, as well as omitting service standards and

procedural clarity as key aspects on citizen service charter. Moreover, Thuo, *et al.* (2024) focused only on patients' rights charter adoption and did not attempt to link it to health service delivery in devolved health facilities. Generally, the existing literature exhibited a contextual gap as it failed to establish how citizen service charter influences health service delivery in devolved health facilities. Hence, this study intended to bridge this gap by assessing the influence of the citizen service charter on health service delivery in Mbagathi Hospital.

1.4 Purpose of the Study

The purpose of the study was to assess the influence of the citizen service charter on health service delivery in Mbagathi Hospital. The study explored how health service delivery is affected by different components of the service charter, including service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities. This highlights the extent to which improvements in the citizen service charter could lead to changes in health service delivery in Mbagathi Hospital.

1.5 Objectives of the Study

1.5.1 General Objective

The main objective of the study was to assess the influence of the citizen service charter on health service delivery in Mbagathi Hospital.

1.5.2 Specific Objectives

The specific objectives guiding the study included:

i. To assess the influence of service standards on health service delivery at Mbagathi Hospital.

ii. To determine the influence of procedural clarity on health service delivery at Mbagathi Hospital.

iii. To examine the influence of grievance redressal mechanisms on health service delivery at Mbagathi Hospital.

iv. To assess the influence of patients' awareness of rights and responsibilities on health service delivery at Mbagathi Hospital.

1.6 Research Questions

The study sought to answer the following questions:

i. How do service standards influence health service delivery at Mbagathi Hospital?

ii. How does procedural clarity influence health service delivery at Mbagathi Hospital?

iii. How do grievance redressal mechanisms influence health service delivery at Mbagathi Hospital?

iv. How does patients' awareness of rights and responsibilities influence health service delivery at Mbagathi Hospital?

1.7 Significance of the Study

As argued by Hiebert, Cai and Hohensee (2022), the significance of the study refers to the value and contribution the research makes to different stakeholders. The study would be significant to policymakers in the Ministry of Health as they can use study insights to formulate policies that promote better enforcement of service charters in public hospitals. Policymakers would use the findings in developing and strengthening policies on citizen service charters and establishing standardized service delivery benchmarks.

The study would also be significant to the management of Mbagathi Hospital as it provides valuable feedback on the efficiency of the existing citizen service charter in shaping staff behavior and service standards. The findings can assist the hospital managers to identify areas to be improved, such as communication mechanisms and feedback systems. The management can apply the findings to improve supervision practices, strengthen patient feedback systems and enhance staff accountability.

Moreover, the study might be significant to patients in Mbagathi Hospital as it explores how citizen service charters can contribute to better health service delivery outcomes such as reduced waiting times, improved staff attitudes, timely medical attention and access to information. The study emphasizes the patient's right to quality care and the hospital's obligation to uphold these rights.

Further, the study would be significant to researchers and scholars as it contributes to the growing body of knowledge on the effects of service charters on health service delivery. The study opens avenues for conducting comparative studies, further research on policy implementation gaps and evaluation of performance management systems in the health sector. The scholars will use the findings on identified gaps as a benchmark for conducting further studies.

1.8 Scope of the Study

Scope of the study, as argued by Akanle, Ademuson and Shittu (2020), refers to the boundaries within which a study is done, including the focus, study area, time period and population being examined. The study focused on assessing the citizen service charter and its implications for health service delivery. The study was done in Mbagathi Hospital.

Specifically, the study established the effects of service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities on service delivery. The study adopted a descriptive research design and targeted patients in Mbagathi Hospital. Data was collected using questionnaires and interviews. The study focused on 2 years of service delivery in Mbagathi Hospital between 2024 and 2025. This was selected because it provides a recent and manageable timeframe that captures the immediate effects of implementing the Citizen Service Charter on service delivery. The descriptive nature of the study informed the choice of this time frame, which offers adequate time for collecting sufficient primary data. Data triangulation was done through the use of both questionnaires and interviews to collect comprehensive data.

1.9 Delimitation of the Study

According to Coker (2022), delimitation refers to a specific scope, boundary and research limitation specifying the inclusions and exclusions of the study. This study delimited itself to Mbagathi Hospital and did not cover other public hospitals in Nairobi. The study did not cover communication channels as an aspect of the service charter. Moreover, the study did not collect data from inpatients and county health officials. The inpatients were excluded to avoid disrupting their treatment and ensure ethical protection of vulnerable groups. The county health officials were also excluded because they do not directly participate in the day-to-day implementation of the service charter.

1.10 Limitations of the Study

Limitations of the study are defined by Akanle, *et al*. (2020) as the potential weaknesses in the data collection procedures which might impact the validity, reliability and generalizability of the research findings. The study was vulnerable to social desirability

bias where participants may have provided socially desirable answers rather than truthful ones, due to fear of consequences. This was addressed by designing non-leading questions and informing participants that responses would not attract any negative consequences. In addition, the study relied on self-reported data collected through questionnaires, which are subject to social desirability bias. To address this, the researcher assured respondents of confidentiality and anonymity to encourage honest and accurate responses. The study was also limited to descriptive research design, which supports the collection of data at a single point in time, limiting its ability to establish causal relationships among variables. The researcher addressed this limitation by grounding the study in established theories and empirical evidence.

1.11 Assumptions of the Study

As argued by Nkwake (2019), assumptions of the study are defined as the foundational ideas that the researcher accepts as true without proof in order to conduct the research. The study assumed that Mbagathi Hospital has a functional Citizen Service Charter. The study further assumed that the participants answered the questions honestly regarding their experiences and perceptions of service delivery at Mbagathi Hospital. Moreover, the study presumed that any changes in service delivery could be objectively linked to the existence of a service charter.

1.12 Theoretical Framework

Theoretical framework refers to the structure providing a well-grounded explanation of the relationships between the key concepts under investigation based on existing theories (Kivunja, 2018). The study was guided by new public management (NPM) theory and public service motivation theory (PSMT).

1.12.1 New Public Management (NPM) Theory

The new public management (NPM) theory was postulated by Christopher Hood (1991). The theory argues that public sector organizations could enhance efficiency, effectiveness and accountability by adopting management practices and principles from the private sector (Islam, 2015). According to Funck and Karlsson (2020), NPM theory is rooted in neoliberal ideologies and advocates for greater efficiency, effectiveness, and customer-oriented service delivery in the public sector. As argued by Shil and Chowdhury (2023), NPM theory puts emphasis on the need to transform public service provision through incorporation of principles such as decentralization and managerial autonomy. Governments are encouraged to operate more like businesses where outcomes and efficiency are prioritized over procedures and processes (Mauro, Cinquini & Pianezzi, 2021).

The key argument of the NPM is the belief that the public sector can be made more accountable and results-driven through techniques like performance contracts and output-based budgeting (Gerashchenko, 2025). Managers in the public sector are granted more flexibility in decision-making with the expectation of more innovative and responsive service delivery. Moreover, NPM promotes the idea of citizens as "customers" who have a right to high-quality and timely services (Mauro, *et al*., 2021). However, critics argue that the theory tends to prioritize efficiency over equity and may erode the democratic and social functions of public institutions (Reiter & Klenk, 2019).

The theory is relevant to this study as it emphasizes efficiency, accountability and performance measurement in public service delivery. The theory advocates for the establishment of clear service standards and streamlined procedures to enhance

responsiveness and customer satisfaction in hospitals. The theory puts emphasis on the principle of procedural clarity to promote transparency, reduce bureaucratic delays and ensure consistency in service delivery. New Public Management explains procedural clarity through its emphasis on establishing clear rules, transparent guidelines, defined service timelines, standardized operating procedures and digital service platforms that reduce bureaucratic complexity. Service standards and streamlined procedures in citizen service charters serve as tools for promoting transparency and accountability in hospital service delivery. Hence, the theory answers the research questions that sought to ascertain how service standards and procedural clarity affect health service delivery. However, this theory fails to establish how other aspects of service charters, like grievance redressal mechanisms and patients' awareness of rights and responsibilities, affect service delivery. Hence, this theory is complemented by public service motivation theory to address this limitation.

1.12.2 Public Service Motivation Theory (PSMT)

Public service motivation theory (PSMT) was postulated by James L. Perry (1990). The theory asserts that people working in the public sector are motivated by the desire to serve the public and contribute to society. The theory posits that people are motivated by personal gains and the desire to serve the public interest, contribute to society and uphold democratic values (Van Staden & Biljohn, 2020). This form of motivation is rooted in altruism, civic duty, compassion and a commitment to the public good. Individuals with high levels of public service motivation are more likely to perform effectively even in the absence of strong financial incentives (O'Leary, 2022). The critique of the PSM theory is that it

idealizes public servants through the assumption that they are driven by commitment to the public interest, compassion and civic duty (Mobley, 2020).

The theory is relevant to this study as it highlights that individuals working in the public sector are driven by a desire to serve the public interest, uphold public values and make a positive impact on society. Having effective grievance redressal mechanisms in service charter ensures healthcare workers are motivated to be responsive, just and transparent and promote patient-centered service delivery. In addition, raising patients' awareness of rights and responsibilities through service charters signifies the hospital's commitment to offering quality health care services. This theory is important in answering the research questions on how grievance redressal mechanisms and patients' awareness of rights and responsibilities affect health service delivery in Mbagathi Hospital

1.13 Conceptual and Theoretical framework

As argued by Salawu, Bolatitio, and Masibo (2023), a conceptual framework is a structured set of concepts that guides the research study by explaining the relationships among key variables. The dependent variable was health service delivery, while the independent variables were service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities. Service standards assessed in terms of timeliness, quality, responsiveness and professionalism are perceived to have a linear relationship with service delivery as they may enhance consistency, efficiency and accountability. When healthcare providers adhere to clearly defined service standards outlined in the Citizen Service Charter, patients are likely to receive services promptly, experience better quality care, and perceive healthcare workers as more responsive and professional.

In addition, procedural clarity assessed through transparency, simplicity, consistency and communication is related to health service delivery as it enhances the timeliness in delivering services. Clear and transparent procedures reduce confusion, delays and opportunities for malpractice which improves access to services and increases patient confidence in the healthcare system. Further, grievance redressal mechanisms are related to service delivery since it ensures overall patients' satisfaction and contribute to health service delivery by providing patients with avenues to report dissatisfaction and seek corrective action. Effective complaint management promotes accountability among healthcare providers and facilitates continuous improvement in service provision, resulting in enhanced patient satisfaction and service quality.

In addition, with patients' awareness of rights and responsibilities, informed patients demand better service outcomes and participate actively in complying with hospital regulations and procedures. Increased awareness strengthens patient-provider relationships, encourages utilization of available services and promotes mutual accountability, which leads to better healthcare outcomes. The relationship between the variables is influenced by government policies which act as an intervening variable. Government policies can strengthen or weaken the effectiveness of Citizen Service Charter implementation through regulations, funding, staffing policies, healthcare reforms, and monitoring mechanisms. The intervening variable was controlled by not including it in the conceptualization and analysis. The conceptual framework is illustrated in Figure 1.1.

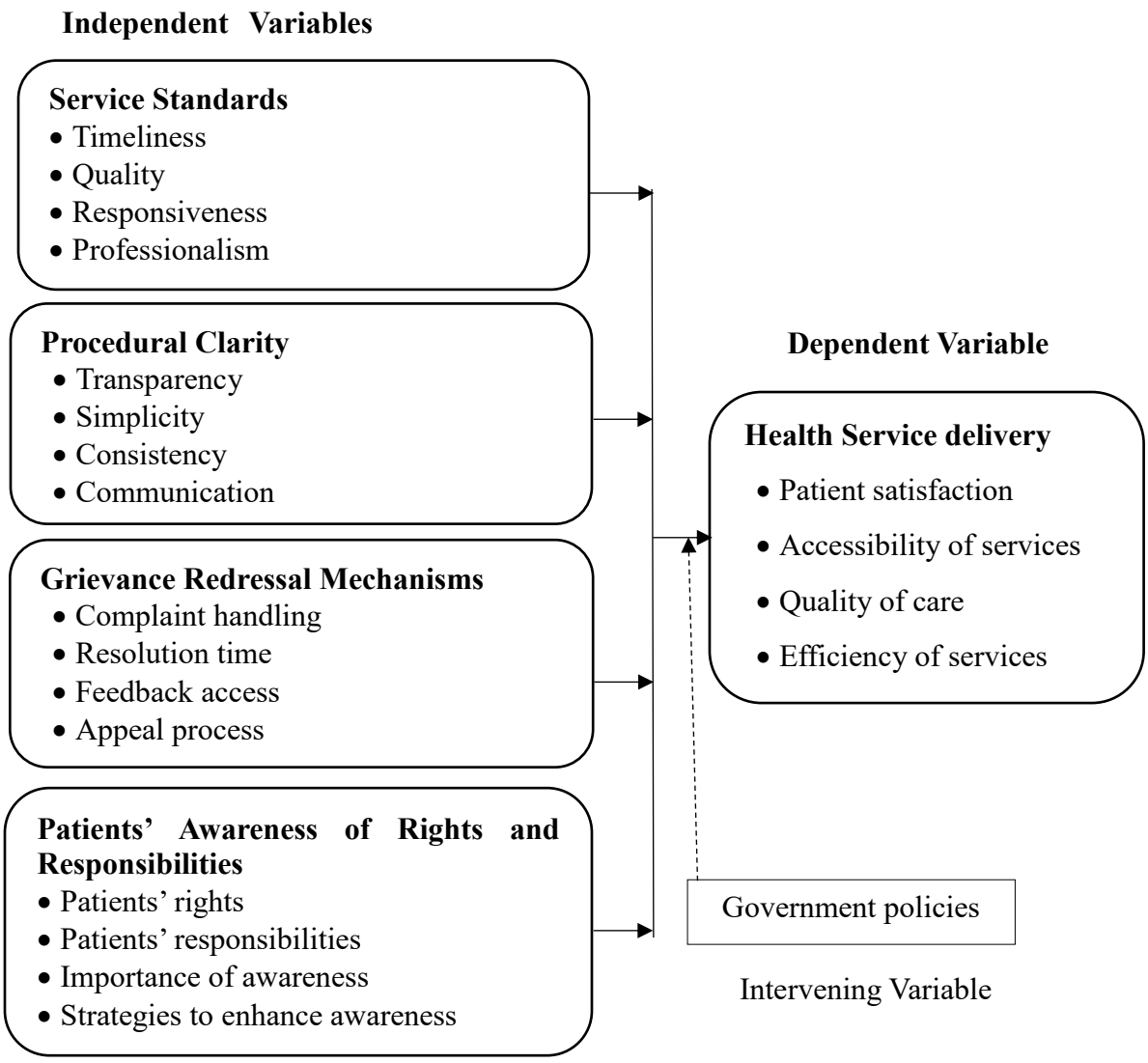

***Figure 1. 1*: Conceptual Framework**

Source: Researcher, 2025

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

The study sought to assess the citizen service charter and its implications for health service delivery in Mbagathi Hospital. Hence, the chapter presents the literature review for service standards, procedural clarity, grievance redressal mechanisms and awareness of rights and responsibilities. Lastly, the chapter presents a summary of the literature and research gap.

2.2 Review of Literature

The section reviews the literature on the service standards, procedural clarity, grievance redressal mechanisms and awareness of rights and responsibilities in relation to health service delivery.

2.2.1 Service Standards and Health Service Delivery

The citizen service charter outlines the standards as a benchmark against which the quality, timeliness and fairness of public service delivery are measured (Singh, 2025). Service standards ensure that public institutions remain accountable and responsive by setting out clear expectations for the provision of services to citizens (Nayan & Pandey, 2020). As argued by Montague, Martin, Aylen and Mitchell (2020), service standards act as a social contract between citizens and public institutions providing the services. Service standards offer frameworks for monitoring and evaluating service performance as they are used to identify gaps in delivery (Mudau, 2022). In addition, citizens use the set service standards as a benchmark to hold government agencies accountable when services are not satisfactory. The service standards set out in the citizen service charter assist in creating a

culture of professionalism, efficiency and accountability in the public sector (Nkanata, 2024).

Research by Ahsan, Chakma, Panday, Huque and Prodip (2024) investigated the service standards in the citizen's charter and service delivery in Bangladesh. The study adopted a qualitative approach. The data for the study was collected using observations and interviews. The analysis was through thematic analysis. The findings showed that the service standards in the citizen charter make sure that citizens have a benchmark for holding public institutions in Bangladesh accountable for the quality and timeliness of the services provided. The study concluded that public institutions offer services to the public in compliance with service standards set out in the citizen charter. Although the approach was appropriate for the study, it is not applicable for a large population. In addition, the thematic approach is not applicable when the study is about establishing causal effects. The context of the study was Bangladesh, which has different health frameworks compared to Kenya. This study focused on health institutions in Kenya with an emphasis put on Mbagathi Hospital, to assess the influence of the citizen service charter on health service delivery.

Similar to Ahsan *et al*., the impact of service standards in charters on service delivery in Malawi was investigated by Ntelela (2022) through descriptive research design. The target population was staff; data was collected using questionnaires and analyzed through descriptive and inferential statistics. It was established that service standards in charters promote transparency, ensure accountability and empower customers to demand better services. The study also established that service standards provide a framework for complaints and assist service providers to enhance service delivery. The study concluded

that service standards in charters significantly impacted service delivery. Although the study was relevant, its focus on staff who had different experiences with charters limited its generalizability. To address this, this study focused on users who are mostly impacted by charters and recipients of services.

On the contrary, Charles (2024) established that service delivery standards insignificantly contributed to satisfaction of clients in public hospitals. This was linked to the fact that service standards did not ensure that services such as payments, diagnosis and treatment were offered effectively. This study adopted cross-sectional survey design and targeted staff and patients in selected public hospitals in Uganda. The use of questionnaires only for data collection limited the data to closed-ended questions which could not bring out the lived experiences of the participants. The current study sought to integrate both surveys and interviews for a comprehensive interrogation of implications of service charters on delivery of health services.

The above findings did not agree with a study done in Tanzania by Mastai (2020). The focus of the study was on the effect of service standards in charters on service delivery. The investigation was guided by descriptive cross-sectional design and targeted staff in private and public universities. Data were collected through questionnaires and interviews. Analysis of the data was through descriptive and inferential statistics. Findings showed that service standards articulated in the charter gave the students the mandate to demand better services when they were not satisfactory. Although the study was relevant, it had a conceptual gap as it omitted some aspects of the service charter like procedural clarity and grievance redressal mechanism. In addition, a contextual gap arose as it focused on the education sector which has different charters compared to those in the health sector.

In Webuye Sub-County Hospital, Shalo (2021) investigated how service standards in charters affect employee performance. The study adopted a descriptive research design and targeted 161 staff at the hospital, including nurses, doctors and laboratory technicians. Primary data was collected using questionnaires and analysis was through descriptive statistics and regression analysis. Findings showed that patient service standards helped define operational priorities, clarify staff workloads, and promote people-centered governance of customer services. Although the study concluded that service standards in charters impacted the performance of employees, it had a conceptual gap as it focused on employee performance rather than health service delivery.

Similarly, in Kenya, Ndanga (2023) investigated the effect of service standards on service delivery at Nairobi City County hospitals. The study adopted a descriptive survey design, targeted managers and collected data using questionnaires. Findings showed that quality management service standards had a positive influence on service delivery in hospitals run by county governments. From the findings, it was concluded that timeliness, quality and responsiveness of service standards significantly affect service delivery. The study had a conceptual gap, as it omitted aspects of service standards such as professionalism.

2.2.2 Procedural Clarity and Health Service Delivery

Procedural clarity is the extent to which guidelines and requirements to access public services are stated and articulated in a citizen service charter (Barrett, 2023). Procedural clarity makes sure that citizens have a clear map and idea of where to access different services and how to engage with public service providers (Drewry, 2021). According to Mkuburo (2023), clear procedural guidelines reduce confusion, delays and the likelihood of corruption since citizens understand what is expected of themselves and service

providers. With procedural clarity in charters, citizens are aware of what to expect from themselves and the public service provided. This creates an environment of trust and confidence in public institutions since people can anticipate the exact processes and prepare adequately (Gamage, 2018).

As argued by Ferdous (2021), procedural clarity leads to a reduction in service inefficiency and corruption as it eliminates the uncertainty that could be exploited by service providers. A citizen service charter outlines the timelines, documentation requirements, officials responsible, and mechanisms for appeal (Deep, 2021). According to Mehra (2016), articulating clear procedures improves accountability and transparency in the delivery of services because both people and service providers are in a position to examine whether prescribed processes are followed correctly. These arguments are supported by Kaphle (2024), who noted that inclusivity and equity in the delivery of services are promoted by procedural clarity, which makes sure that marginalized groups are not disadvantaged due to inadequate comprehension of the bureaucratic processes.

The above arguments are backed by Sherstha (2018), who explored the efficiency of procedural clarity in the citizen charter in Nepal. The study employed a qualitative and quantitative approach. The study relied on both primary and secondary sources of data. Primary data was collected using surveys. It was established that charters in Nepal offer information regarding the procedures involved in getting services. The study concluded that procedural clarity in citizen charters significantly influenced how services are delivered in Nepal. The research, however, focused on the public administration sector, which has different charters that are not relevant to the health sector. The current study

focused on hospitals to assess the influence of the citizen service charter on health service delivery

Similarly, Kaphle (2024) investigated the procedural clarity in citizen charter as a governance reform initiative for quality services in Bangladesh. The study was based on a pragmatic approach and adopted an explanatory research design. Government officials and selected citizens were targeted for data collection using surveys. Analysis was through descriptive and inferential statistics. The study established that increased procedural clarity in service charters enhanced the delivery of services in public hospitals. It was concluded that procedural clarity in citizen charters significantly enhanced the quality of services offered in Bangladesh. The study had a contextual gap as it was done in public administration and could be replicated for health, which faces a unique set of challenges and operates in a highly regulated environment.

In Nigeria, Pollyn, Leburah and Gbarale (2021) studied the procedural clarity in SERVICOM service charter and service delivery of federal health ministries through a quantitative approach, targeted staff and used questionnaires to collect primary data. The study used descriptive and regression for analysis. Findings showed that federal health ministries in Nigeria had charters that articulated clear procedures on how services can be accessed by the citizens. The clarity of these procedures made it easy for citizens to seek and access different services. The study concluded that having procedural clarity in the SERVICOM service charter significantly enhances the delivery of services in Nigeria. The study used a quantitative approach and did not incorporate both surveys and interviews as in the current study. In addition, there was a contextual gap as the study was done in public

administration and could be replicated for health, which faces a unique set of challenges and operates in a highly regulated environment.

Similarly, the effect of procedural clarity in customer service charter on service quality in Tanzanian local governments managing local hospitals was investigated by Mkuburo (2023). The study employed a cross-sectional research design. The target population was 331 staff working in the Department of Health at Moshi Municipal Council. The sample of 75 staff was selected using stratified sampling. Primary data were collected using a questionnaire and analyzed through descriptive and inferential statistics. Findings showed that there are clear procedures provided by the local government in Tanzania as outlined in the citizen service charter. The procedures included providing names of officers responsible for offering the services, which leads to increased citizen satisfaction with services. The study concluded that procedural clarity in the customer service charter significantly affected service quality. However, the study was not conducted in Kenya and used a cross-sectional research design that is not applicable in the current study. This is because a cross-sectional design does not support the simultaneous use of both qualitative and quantitative data. There were also conceptual gaps as it omitted some aspects of procedural clarity such as transparency and simplicity.

In Kenya, Masese, Tenambergen and Muiruri (2016) investigated the utilization of service charters in public hospitals. The study adopted a case study design. The target population was hospital staff from whom data was collected using questionnaires. Quantitative data were analyzed through descriptive and regression analysis, while the qualitative data were analyzed through content analysis. Findings showed that the procedures articulated in the hospital service charter significantly improved the delivery of services. The study

concluded that procedural clarity in the hospital Charter had a significant effect on service delivery. However, the study omitted some aspects of procedural clarity such as consistency and communication.

2.2.3 Grievance Redressal Mechanisms and Health Service Delivery

Grievance redressal mechanisms are crucial tools for offering the citizens clear channels to raise complaints and seek clarification regarding the services provided (Pande & Hossain, 2023). The mechanisms represent the commitment by the institution to accountability and transparency, as it ensures that clients can seek solutions when service delivery falls short of expectations (Hossain, Joshi & Pande, 2024). Grievance mechanisms include suggestion boxes, feedback forms, hotlines and dedicated customer care desks (Huque, *et al*., 2021). As argued by Kumar (2021), an effective grievance mechanism has different components including channels for users to lodge complaints, steps followed in lodging complaints and the set timelines for grievance redress. According to Mogotloane and Lonw (2023), a grievance redressal system enhances accountability and creates a feedback loop that public institutions can use to identify systemic weaknesses and improve services.

According to Prajapat, Sabharwal and Wadhwani (2022), citizens are empowered through the procedures for handling grievances in the service charter to participate actively in holding public service providers accountable. The detailed steps to follow when lodging a complaint, timelines and where and to whom it should be articulated in the grievance redress mechanism (Hossain, *et al*., 2024). As argued by Gauri (2023), there is a structured loop provided by grievance redressal mechanisms that continuously enhances the delivery of services. This is because prompt acknowledgement of clients' complaints helps service providers to identify gaps in service delivery and come up with strategies for addressing

them. Kumar (2021) noted that principles of fairness, equity and accountability in public service are reinforced through the inclusion of grievance redressal mechanisms in a citizen service charter.

In India, Kumari (2021) explored the grievance redressal mechanism and its effect on service delivery. The study adopted a descriptive research design and targeted 200 service users. Data was collected using questionnaires and analyzed through descriptive statistics and Pearson Chi-square. Findings revealed that there was an inadequate awareness level regarding the grievance redressal procedures. The study concluded that the grievance redressal mechanism significantly affected the delivery of services. However, the research focus was on banks and its findings could not be extended to the health sector, which offers different services and operates under unique regulations.

In agreement with Kumari, Laikera (2023) investigated the impact of grievance redress mechanisms in service charters on service delivery. The study adopted descriptive research design. The study targeted staff and used purposive sampling for selecting a sample of 47 respondents. Primary data was collected using questionnaires and analysis was through descriptive and inferential statistics. Findings showed that the complaint handling system is well structured and significantly affects the delivery of services. The study recommended that there is a need to enhance its grievance handling mechanisms through sensitization of service seekers to always lodge complaints in any case of failed service delivery. Although the study was relevant, it over-relied on staff who could not provide information that users can, which limited the generalizability of the findings. This study adopted a descriptive research design that addresses these shortcomings.

Similarly, in Kenya, research by Wambua, Ngao and Wafula (2021) examined the role of grievance redressal mechanisms in the citizen service charter in improving service delivery in the public sector in Kenya. The study employed a descriptive design. The target population included the employees in different agencies in the public sector. Data was collected using questionnaires and analysis was through descriptive statistics and regression analysis. It was established that grievance redressal mechanisms in the citizen service charter played a crucial role in ensuring that citizens demand better services from public agencies. The study concluded that having grievance redressal mechanisms in the charter significantly enhanced the delivery of services by public institutions in Kenya. The study had a conceptual gap as it omitted various aspects of grievance redressal mechanisms such as complaint handling and resolution time.

2.2.4 Awareness of Rights and Responsibilities and Health Service Delivery

Citizen service charters highlight rights guaranteeing equitable access to services and responsibilities guiding how citizens should engage with public institutions to ensure smooth service delivery (Campaña-Castillo, et al., 2024). As argued by Deep (2021), the rights empower the citizens to hold service providers accountable, but responsibilities create an environment where users and providers can trust, respect and cooperate. Thema (2020) noted that a service charter also articulates responsibilities such as provision of accurate medical history, respecting hospital staff and commitment to follow treatment instructions.

According to Bob and Kebede (2025), charters articulate that citizens have the right to be treated with dignity by public servants, receive accurate service information and access services within the set timelines. Service charters also give citizens the right to participate

in making decisions, complain and seek redress when standards are not met (Schedler & Helmuth, 2023). These rights empower citizens to hold institutions accountable and to expect services that meet minimum quality standards. The responsibilities of the citizens are also articulated in the charter. This ensures that citizens know what is expected of them, respect institutional procedures and treat service providers with respect (Galera, 2023).

In support, Mdibwa (2019) examined the role of awareness of rights and responsibilities in a client service charter in health service delivery at Tingi Health Center. The study employed a case study design. The sample population was 50 participants selected using purposive sampling method. Primary data was collected using questionnaires and interviews. Quantitative data was analyzed using descriptive and regression analysis while thematic analysis was used for analyzing the qualitative data. The study established that being aware of the patients' rights empowered the citizens to demand better health services and also hold service providers accountable. It was concluded that improved awareness of the patients' responsibilities and rights led to the provision of quality health services and created a corruption-free environment at the health facilities. However, the study was conducted in Tanzania rather than in Kenya.

Similarly, a study by Njuguna (2020) explored how health literacy on patients' rights charter influences health systems responsiveness in Machakos County. The research employed descriptive cross-sectional design. The target population included health staff and patients from whom data was obtained using surveys and interviews. Analysis was through use of descriptive statistics and regression analysis. It was established that knowledge of the patients' rights charter significantly influenced how responsive the health care systems are in Machakos County. The study, however, focused on health facilities in

Machakos County, which operates in a different environment as compared to hospitals in urban centers like Mbagathi Hospital. The study also adopted a cross-sectional design that is not applicable in the current research and it limits itself to quantitative approaches. The current study bridged these gaps by adopting descriptive research design to assess the influence of the service charter on health service delivery.

On the contrary, research by Mwania (2021) investigated how employee awareness of the customer rights in the service charter influenced service delivery. A survey research design was adopted. The study targeted employees and customers. However, the study relied solely on questionnaires and did not incorporate interviews, which limited data triangulation. Data analysis was through descriptive and inferential statistics. Findings showed that consultations among employees, training and accessing copies of the charter improve awareness of the customer rights in the service charter. The study concluded that staff awareness of the customer rights in the service charter significantly influenced the delivery of services.

2.3 Summary and Research Gap

The chapter reviews the literature on service standards, procedural clarity, grievance redressal mechanisms and awareness of rights and responsibilities in relation to service delivery. Service standards ensure that public institutions remain accountable and responsive by setting out clear expectations for the provision of services to citizens (Nayan & Pandey, 2020). Procedural clarity makes sure that citizens have a clear map and idea of where to access different services and how to engage with public service providers (Drewry, 2021). Grievance redressal mechanisms are crucial tools for offering citizens clear channels to raise complaints and seek clarification regarding the services provided

(Pande & Hossain, 2023). The study was guided by new public management (NPM) theory and public service motivation theory (PSMT), which explained how various aspects of citizen service charters, like service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights could influence health service delivery.

Moreover, the reviewed studies exhibited various research gaps. For instance, Ahsan, *et al*. (2024) used qualitative approach that is not applicable in the current research, while Ntelela (2022) did not focus on the health sector as the current study. In addition, Pollyn, *et al*. (2021) used rational choice theory which was not applicable in the current study. In addition, there were methodological limitations in Ntelela (2022) research which focused on staff who have different experiences with charters. Moreover, Charles (2024) used questionnaires only for data collection which limited the data to closed-ended questions and hence could not bring out the lived experiences of the participants. In general, the major gap in the reviewed literature is the failure to explicitly establish how citizen service charter could affect service delivery in devolved health facilities. Hence, this study intended to bridge these gaps by establishing the effect of the citizen service charter on service delivery in Mbagathi Hospital.

CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction

The chapter highlights the procedures for data collection in the field of study. The chapter covers details of the research design, research site, targeted population, sample size, sampling procedure, data collection procedures, data analysis and ethical considerations.

3.2 Research Design

Research design is a clear strategy selected by the researcher to guide the research procedures in an attempt to answer the research questions (Johannesson & Perjons, 2021). The study adopted a mixed-methods cross-sectional survey design. A mixed-methods cross-sectional survey design allows the collection of both quantitative data using questionnaires and qualitative data using interviews as supplementary data. The design was appropriate for this study because it allowed the researcher to simultaneously collect and compare data from the phenomenon. Ghanad (2023) argued that mixed-methods cross-sectional survey design is suitable if the inclusive goal is to demonstrate if there is a strong association between different factors at the same time. Through this design, the researcher was able to collect both quantitative and qualitative data to describe and explain concepts in regard to the effect of the citizen service charter on service delivery at Mbagathi Hospital.

3.3 Research Site

The study site was Mbagathi Hospital. This is a main health facility offering services to the public in Nairobi County and other counties in Kenya. The coordinates for Mbagathi

Hospital are 1° 18.53′ S, 36° 48.20′ E. The hospital also serves as a referral and treatment center. The hospital operates under the Ministry of Health and is run by the County Government of Nairobi. The facility offers different services such as Outpatient to Inpatient services, Lab services, Dental clinic, Radiology, Renal clinic, Eye unit, Orthopedic clinic, Maternity, ENT and pediatric clinic. To effectively offer these services, Mbagathi Hospital has established a service charter that outlines the services offered, service standards, patients' rights and responsibilities, procedural clarity and grievance redressal mechanisms. Mbagathi Hospital was selected because it is a major county referral hospital under the Nairobi City County Government serving patients from all sub-counties within Nairobi County and neighboring counties. Thus, it represents all the devolved health facilities, making it an ideal site for assessing the citizen service charter and its implications for health service delivery.

3.4 Target Population

Target population is the group of people that a researcher is interested in studying (Willie, 2024). The study targeted 1208 outpatients in Mbagathi Hospital for questionnaires. The daily outpatients were selected because services at Mbagathi Hospital operate continuously under similar procedures, patient flow patterns and service delivery structures on a daily basis. This makes patients attending the hospital on an operational day represent the characteristics of the hospital's outpatient population in terms of demographics, healthcare needs and service utilization patterns. The inpatients were excluded because they are not in a better physical and psychological condition to participate in surveys. The study also targeted 19 key informants including hospital management staff and selected daily outpatients. Hospital management staff were purposively selected because they are directly

involved in the formulation, implementation, monitoring, and enforcement of the Citizen Service Charter, making them well-positioned to provide detailed information on its objectives and operationalization. On the other hand, the daily outpatients were included because they are the primary beneficiaries of the Citizen Service Charter and have firsthand experience with the services offered by the hospital. The distribution of the target population was as shown in Table 3.1.

***Table 3. 1*: Target Population**

Category	Target Population	Percentage
Outpatients	1208	98.5
Key informants	19	1.5
Total	**1227**	**100**

Source: Mbagathi Hospital Website (2025)

3.5 Sample Size and Sampling Procedures

The sample is a smaller group selected from a larger population with an aim of making conclusions about the entire study population (Lakens, 2022). Sampling is an approach used for selecting a population subset from a larger population. Sampling allows researchers to collect data regarding the population without studying all the individuals (Willie, 2024).

3.5.1 Sample Size

The sample size for the interviews was 19 key informants. Moreover, the sample size for the questionnaires was calculated using Nassiuma (2000) formula:

$$n = N(cv^2) / (cv^2 + (N-1)e^2)$$

Where:

n= Samples' size.

N = Populations (1227)

cv= Coefficient of variation (0.3)

e= tolerance (0.02)

n= {(1208*0.3*0.3) / ((0.3*0.3) + (1207*0.02*0.02)} = 189

The sample size was distributed among targeted groups both for questionnaires and interviews as shown in Table 3.2.

***Table 3. 2*: Sampling Frame**

Category	Target Population	Ratio	Sample
Lab	262	0.156	41
Dental	101	0.156	16
Radiology	197	0.156	31
Renal	104	0.156	16
Eye unit	79	0.156	12
Orthopedic	124	0.156	19
Maternity	141	0.156	22
ENT	112	0.156	18
Pediatric	88	0.156	14
Total Outpatients	**1208**	**0.156**	**189**
Key informants	19	1.000	19
Total Sample Size	**1227**		**208**

3.5.2 Sampling Procedures

Sampling is a research approach used for selecting the group of people to represent the entire population (Lakens, 2022). The study selected the questionnaire participants using a stratified proportionate random sampling method. The outpatients were grouped based on

different departments they belong to, such as Lab, Dental, Radiology, Renal, Eye unit, Orthopedic, Maternity, ENT and Pediatrics. From these groups, the study used random sampling to select the participants. This gave everyone an equal chance of being included in the sample. Proportionate random sampling method ensured that all ethical considerations were adhered to when sampling the outpatients. Further, the study used purposive sampling to include all 19 key informants, including hospital management staff from the lab, finance and pharmacy departments for interviews. Purposive sampling for outpatients was used because they have a direct, relevant, and recent experience with the hospital's service delivery processes.

3.6 Data Collection

Data collection is the systematic gathering of information that allows researchers to answer the research questions for the study (Taherdoost, 2021). The study period was between 15th and 22nd April 2026. This section covers data collection instruments and pilot testing of the research tools.

3.6.1 Data Collection Instruments

Primary data was obtained using questionnaires and an interview guide. The following sections highlight the instruments in detail.

3.6.1.1 Questionnaire

The questionnaire was administered to outpatients in Mbagathi Hospital. The questionnaire had four parts: Part A with questions on biographical data, Part B with questions on service standards, Part C for procedural clarity, Part D for grievance redressal mechanisms, Part E for patients' awareness of rights and responsibilities and Part F for service delivery. The questionnaire had both open- and closed-ended questions and adopted a 5-point Likert

scale used by Abdi (2024). Open-ended questions allow the participants to give more detailed and thoughtful responses, while closed-ended questions allow participants to choose from a set of given choices. As argued by Montazeri and Saeidi (2022), open-ended questions allow participants to give detailed responses without any restrictions. The questionnaires were used because they are a cost-effective and efficient way for gathering information from a larger group of people.

3.6.1.2 Interviews

Key informant interviews involve engaging individuals who possess specialized knowledge and experience relevant to the research topic. Key informant interviews had structured questions and were conducted among the 19 key informants who included hospital management staff. The questions for the interviews were developed and designed to address the specific objectives. The questions are linked to constructs on service standards, procedural clarity, grievance redressal mechanisms and patients' awareness of rights and responsibilities.

3.6.2 Pilot Testing of Research Instruments

Pilot testing is a small-scale preliminary study for evaluating the research feasibility (Teresi, Stewart & Hays, 2022). Pilot testing is important as it offers an opportunity for the researchers to identify and amend any unclear questions in the research tools. The pilot study was conducted in Mama Lucy Kibaki Hospital. Mama Lucy Kibaki Hospital was chosen because it has the same characteristics as Mbagathi, making it an ideal site for testing the research tools before data collection. The researcher randomly distributed 14 questionnaires to the pilot survey respondents. This accounts for 10% of the sample size which is adequate for conducting a pilot test as per the arguments of Bujang, Omar and

Hon (2024). The pilot test offered an opportunity for gathering valuable feedback and recommendations from the participants and testing for reliability and validity of the research tools.

3.6.3 Reliability of the Instrument

Reliability is the consistency and dependability of the instrument to produce accurate and consistent results over time and across different conditions (Arslan, 2022). The questionnaires were distributed to a pilot group of 14 randomly selected participants in Kenyatta National Hospital. The data collected was used for testing the reliability of the questionnaire. The pilot study was done in one week. The study tested for internal consistency reliability using Cronbach alpha (α). The expected threshold for the questionnaire to be deemed reliable was Cronbach alpha (α) that is greater than or equal to 0.7 ($\alpha \geq 0.7$). As argued by Rosli, Saleh and Atan (2021), a questionnaire is deemed to be reliable if the Cronbach alpha (α) for every variable is more than the 0.7 threshold. The findings revealed that all the variables were reliable as their Cronbach alpha (α) exceeded the 0.7 threshold, as illustrated in Table 3.3.

Table 3. 3: Reliability Analysis Results

Variable	Cronbach alpha (α)
Service Standards	0.701
Procedural Clarity	0.711
Grievance Redressal Mechanisms	0.727
Patients' Awareness of Rights and Responsibilities	0.706
Health Service delivery	0.784

3.6.4 Validity of the Instrument

Validity is the degree to which questionnaires precisely assess what it is intended to assess (Arslan, 2022). The study tested for content, construct and face validity. Construct validity which was the extent to which the instrument assesses the construct it is envisioned to measure was tested using factor analysis. Further, the content validity was tested by relying on research experts' opinions such as supervisors. These gave opinions on the suitability of questions and suggested amendments required to enhance the content of the questionnaire. To test face validity, the researcher reviewed each item to ensure it aligned with the study objectives. This was followed by expert opinions, which suggested the required amendments for the research tool to be face valid. The findings for factor analysis showed that the questionnaire was construct valid as the factor loadings were greater than the threshold of 0.4. The findings are shown in Table 3.4.

Table 3. 4: **Component Matrix[a]**

	Component
	1
Service Standards	.949
Procedural Clarity	.933
Grievance Redressal Mechanisms	.955
Patients' Awareness of Rights and Responsibilities	.928
Health Service Delivery	.900

Extraction Method: Principal Component Analysis.

a. 1 components extracted.

3.6.5 Data Collection Procedures

The letter of introduction from Africa Nazarene University was obtained by the researcher after the proposal defense and approval. The researcher then applied for and obtained a

research permit from NACOSTI. These were required to obtain authorization to access the respondents for data collection. The researcher then obtained informed consent from the respondents before collecting any data. The questionnaires were administered to the outpatients in Mbagathi Hospital. The researcher used a drop-and-pick-up later approach for distributing the questionnaires to ensure that the participants had adequate time to provide well-thought-out opinions. Further, the researcher conducted key informant interviews with the help of trained research assistants. Those interviewed were 19 key informants, including hospital management staff and selected daily outpatients.

3.7 Data Analysis

Data collected were coded and entered into the Statistical Package for Social Sciences (SPSS). Qualitative data from the open-ended questions and interviews were analyzed through content analysis. Qualitative coding procedures involved systematic organization and labeling of textual data into themes to facilitate interpretation and generate insights aligned with the study objectives. Qualitative findings were presented as narratives and verbatim excerpts. Further, quantitative data was analyzed through descriptive and inferential statistics. Presentation of the findings was in the form of tables and figures like pie charts and bar graphs. Descriptive statistics include frequency, percentage, mean and standard deviation. The study tested for regression assumptions such as normality, multicollinearity and heteroscedasticity. Multicollinearity was tested through the Variance Inflation Factor (VIF), where a VIF above 10 shows significant multicollinearity. On the other hand, normality was tested through Shapiro-Wilk and Kolmogorov-Smirnov test. In this test, if the p-value exceeds 0.05, then the data is normally distributed. Further,

heteroscedasticity was tested using Breusch-Pagan-Godfrey test, where probability values less than 0.05 indicate the existence of non-uniform variances.

3.8 Legal and Ethical Considerations

Legal and ethical considerations ensure that the research is conducted in a manner that respects the rights and well-being of every participant (Alhabsi, 2024). The researcher observed different legal and ethical considerations when conducting the study. The researcher first obtained informed consent from every participant prior to the collection of data. The participants retained the right to rescind participation in the process of data collection. Moreover, the researcher got a letter of introduction from the university and a research permit from NACOSTI. The researcher also took measures to protect the confidentiality of information collected from the participants through the use of passwords and encrypting files. The researcher ensured that data storage was secure and that the questionnaires were shredded after study completion. The researcher ensured there was no plagiarism by acknowledging and citing all sources of the information used in the study.

CHAPTER FOUR

DATA ANALYSIS AND PRESENTATION

4.1 Introduction

The chapter highlights the analysis, presentation and interpretation of the data collected using questionnaires and interviews regarding the citizen service charter and its implications for health service delivery in Mbagathi Hospital. The chapter presents findings for biographical data and descriptive statistics for service standards, procedural clarity, grievance redressal mechanisms, patients' awareness of rights and responsibilities and health service delivery. It also presents inferential statistics to establish how variables influence each other. The findings were represented in tables and figures.

4.2 Response Rate

The questionnaires distributed by the researcher were 189, out of which only 158 were filled and returned. This resulted in an 83.6% response rate which was adequate for conducting a statistical analysis and reduced the likelihood of significant non-response bias. This agrees with Lakens (2022) who argued that questionnaire response rate is adequate for undertaking data analysis if it exceeds 70% threshold. The response rate results are shown in Table 4.1.

***Table 4. 1*: Response Rate**

	Respondents	**Percent**
Response	158	83.6
Non- Response	31	16.4
Total	**189**	**100**

Source: Research Data (2026)

4.3 Biographic Data

The biographical data sought by the researcher was meant to establish the profile and distribution of the respondents. These included gender, highest level of education and period of engagement with Mbagathi Hospital. The findings are highlighted in various subsections.

4.3.1 Gender of the Respondents

The researcher requested the respondents to specify their gender. From the findings, most of the respondents were male at 54.4%, while the females were 45.6%. The findings showed significant gender differences which may influence perceptions of service delivery in hospitals since men and women have different healthcare needs, communication expectations and experiences of treatment. In addition, the findings show that data regarding the citizen service charter and its implications for health service delivery were collected from every respondent irrespective of gender. The findings are illustrated in Figure 4.1.

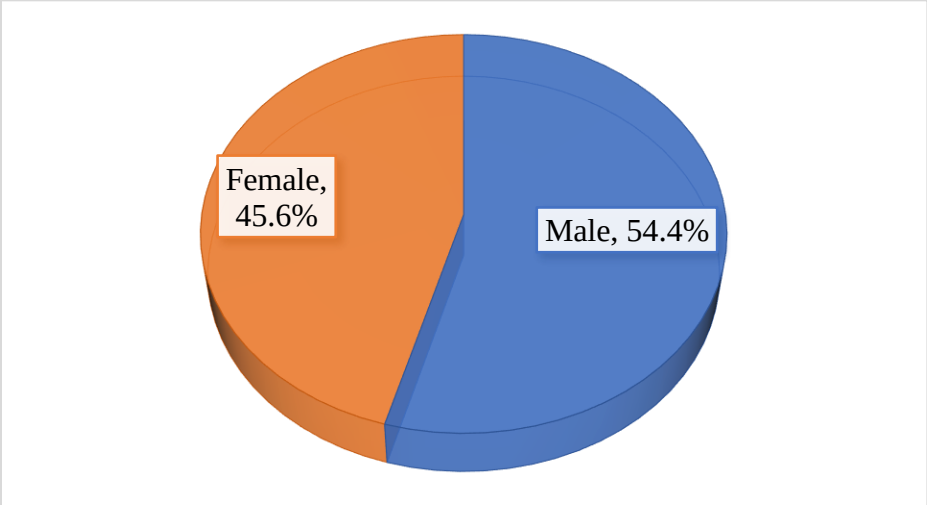

***Figure 4. 1*: Gender of the Respondents**

Source: Research Data (2026)

The cross-tabulation shows that the gender of respondents has a significant bearing on opinions regarding health service delivery (χ^2 =1.922; p=0.000). The findings are shown in Table 4.2.

Table 4. 2: Gender * Health Service Delivery Cross-tabulation

		Health Service Delivery		
		Moderate	**Improved**	**Chi-square**
Gender	Male	8	78	χ^2 =1.922; p=0.000
	Female	12	60	
Total		**20**	**138**	

Source: Research Data (2026)

4.3.2 Highest Level of Education

The researcher asked the respondents to specify the highest level of education. From the findings, the majority of respondents specified their highest education level to be a diploma as shown by 34.2%. Other highest education levels among the respondents included certificate at 32.9%, degree at 23.4%, and postgraduate at 9.5%. This is an indication that the respondents could understand the questions in the questionnaire and provide credible information regarding the citizen service charter and health service delivery, as noted by Chepkonga and Nyaga (2019). The findings are illustrated in Figure 4.2.

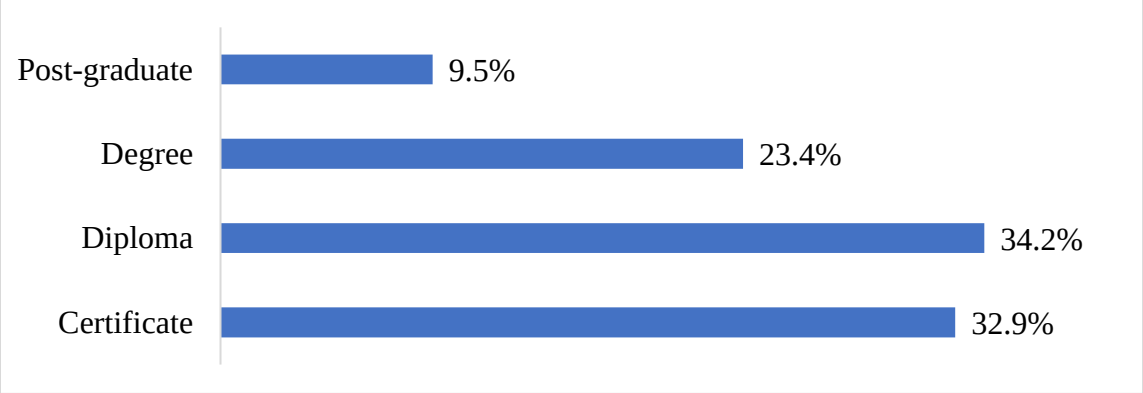

***Figure 4. 2*: Respondents' Highest Level of Education**

Source: Research Data (2026)

The cross-tabulation shows that the highest level of education of respondents has a significant bearing on opinions regarding health service delivery (χ^2 =3.336; p=0.000). The findings are shown in Table 4.3.

Table 4. 3: Highest Level of Education * Health Service Delivery Cross-tabulation

		Health Service Delivery		
		Moderate	**Improved**	**Chi-square**
Highest level of education	Certificate	6	46	χ^2 =3.336; p=0.000
	Diploma	9	45	
	Degree	2	35	
	Post-graduate	3	12	
Total		**20**	**138**	

Source: Research Data (2026)

4.3.3 Period of engagement with Mbagathi Hospital

The researcher asked the respondents to specify the Period of engagement with Mbagathi Hospital. The findings showed that the respondents had engaged with Mbagathi Hospital for 6 to 9 years (36.7%), 2 to 5 years (31.6%), more than 9 years (19.6%), and for less than 2 years (12.0%). The broad categories were used because they simplify respondents' varying durations of engagement into meaningful time intervals, which makes it easy to interpret and compare findings. The findings imply that most of the respondents had engaged Mbagathi Hospital for long enough to be able to give credible information regarding the citizen service charter and health service delivery. It also indicates that the responses were informed by respondents' long-term experience. The results are shown in Figure 4.3.

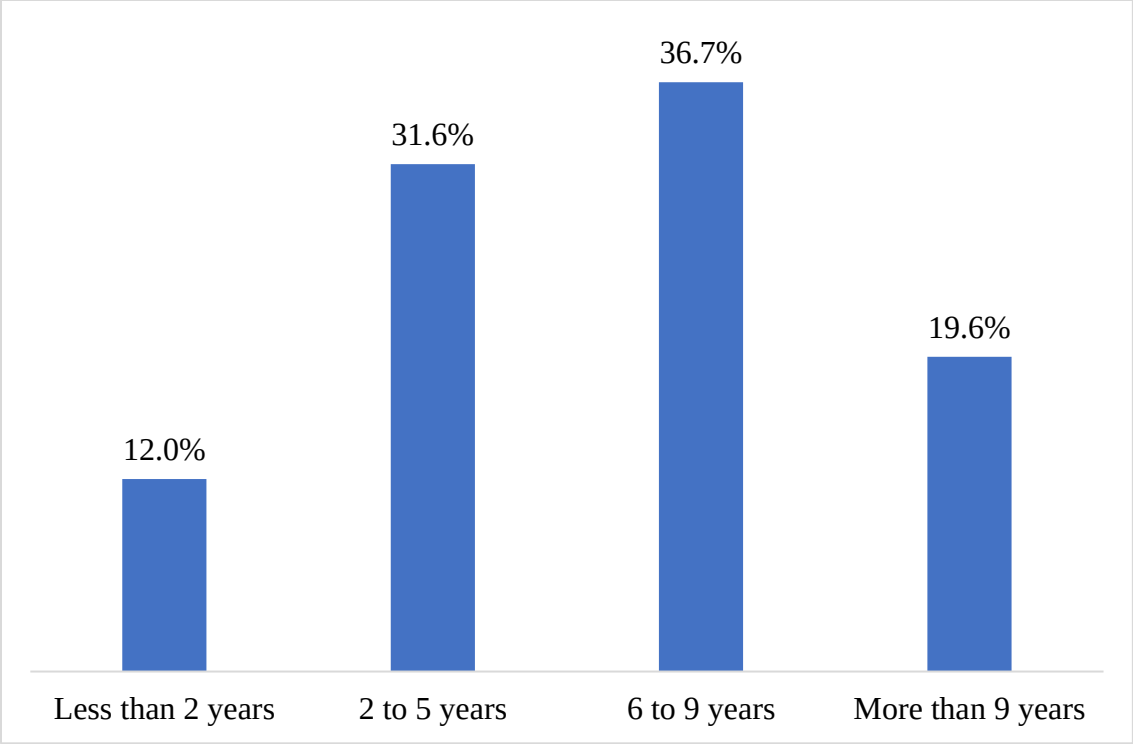

***Figure 4. 3*: Period of Engagement with Mbagathi Hospital**

Source: Research Data (2026)

The cross-tabulation shows that the period of engagement with Mbagathi Hospital of respondents has a significant bearing on opinions regarding health service delivery (χ^2 =3.328; p=0.000). The findings are shown in Table 4.4.

Table 4. 4: **Period of engagement * Health Service Delivery Cross-tabulation**

		Health Service Delivery		
		Moderate	**Improved**	**Chi-square**
Period of engagement with Mbagathi Hospital	Less than 2 years	0	19	χ^2 =3.328; p=0.000
	2 to 5 years	8	42	
	6 to 9 years	8	50	
	More than 9 years	4	27	
Total		**20**	**138**	

Source: Research Data (2026)

4.4 Descriptive Statistics

The descriptive statistics used included percentages, mean and standard deviations for service standards, procedural clarity, grievance redressal mechanisms, patients' awareness of rights and responsibilities and health service delivery.

4.4.1 Service Standards in Citizen Service Charter

The respondents were asked to specify how they agree or disagree with statements concerning service standards in the citizen service charter based on a 5-point Likert scale. From the findings, the respondents agreed that the service standards in the citizen service charter encourage staff to maintain high ethical and professional conduct (62%; Mean=4.18), that the service standards in the citizen service charter enhance the accuracy and reliability of services provided to patients (67.1%; Mean=4.09) and that the citizen service charter has improved the overall quality of healthcare services delivered at Mbagathi Hospital (69.6%; Mean=4.03). The findings show that the citizen service charter positively influences ethical and professional conduct and enhances the accuracy and reliability of healthcare services. The findings correlate with Montague, et al. (2020), who noted that service standards act as a social contract between citizens and public institutions providing the services and offer frameworks for monitoring and evaluating service performance, as they are used to identify gaps in delivery.

The respondents also agreed that the service standards in the citizen service charter ensure that patients receive services within the stated timeframes (69%; Mean=4.01) and that the service standards in the citizen service charter ensure quick response to patients' needs and emergencies (65.2%; Mean=3.89). The findings show that the citizen service charter positively influences ethical and professional conduct, improves accuracy, reliability, and

quality of healthcare services, and enhances timeliness and responsiveness of care at Mbagathi Hospital. This implies that the citizen service charter enhances the accuracy and reliability of services and ensures that patients receive services within the stated timeframes. These findings are consistent with the new public management (NPM) theory, which argues that public sector organizations can enhance efficiency, effectiveness and accountability by adopting management practices and principles from the private sector.

However, the respondents disagreed that the citizen service charter promotes courteous and respectful interaction between hospital staff and patients (63.9%; Mean=2.30) and that the hospital consistently meets the turnaround times for services as outlined in the citizen service charter (64.6%; Mean=2.31). The respondents also disagreed that the hospital promptly addresses patient concerns and feedback as guided by the citizen service charter (68.4%; Mean=2.13). This implies that the hospital has failed to consistently meet the turnaround times for services and promptly address patient concerns and feedback as outlined in the citizen service charter which was found not to promote courteous and respectful interactions between staff and patients. The findings agree with Ntelela (2022), who established that service standards in charters promote transparency, ensure accountability, empower customers to demand better services, provide a framework for complaints, and assist service providers in enhancing service delivery. Charles (2024) established that service delivery standards contributed insignificantly to client satisfaction in public hospitals, which was linked to the fact that service standards did not ensure that services such as payments, diagnosis, and treatment were offered effectively. The findings are shown in Table 4.5.

***Table 4. 5*: Statements on Service Standards in Citizen Service Charter**

	SD (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Dev.
The service standards in the citizen service charter ensure that patients receive services within the stated timeframes.	0.6	1.9	10.8	69	17.7	4.01	0.65
The hospital consistently meets the turnaround times for services as outlined in the citizen service charter.	10.1	64.6	12.7	9.5	3.2	2.31	0.90
The citizen service charter has improved the overall quality of healthcare services delivered at Mbagathi Hospital.	0.6	1.3	10.8	69.6	17.7	4.03	0.63
The service standards in the citizen service charter enhance the accuracy and reliability of services provided to patients.	0.6	3.2	5.7	67.1	23.4	4.09	0.68
The hospital promptly addresses patient concerns and feedback as guided by the citizen service charter.	12	68.4	15.2	3.2	1.3	2.13	0.71
The service standards in the citizen service charter ensure quick response to patients' needs and emergencies.	1.3	2.5	16.5	65.2	14.6	3.89	0.72
The citizen service charter promotes courteous and respectful interaction between hospital staff and patients.	8.2	63.9	19	7	1.9	2.30	0.80
The service standards in the citizen service charter encourage staff to maintain high ethical and professional conduct.	1.3	1.9	4.4	62	30.4	4.18	0.71

Source: Research Data (2026)

From the interviews, the interviewees were asked to indicate how the citizen service charter is implemented in the hospital. They said that:

> The citizen service charter is implemented by ensuring it is accessible to everyone within the hospital. This is done by displaying it in key areas such as reception desks, waiting bays and outpatient departments where patients can easily access information on the patients' rights, responsibilities, expected service timelines and available services (**Source: Interviewee 2**).
>
> There is also sensitization of hospital staff on the charter's provisions, and they are expected to adhere to guidelines such as timely service delivery, respectful handling of patients and transparency in procedures like registration, consultation, and billing (**Source: Interviewee 6**).

Further, the interviewees were asked to indicate ways in which service standards in the citizen service charter affect health service delivery in Mbagathi Hospital. The interviewees said that:

> Clearly defined timelines for service provision such as consultation waiting times, laboratory results turnaround and emergency response assist in streamlining operations and reducing unnecessary delays (**Source: Interviewee 11**).
>
> Service standards promote transparency and accountability among healthcare providers as patients are aware of what to expect and can demand adherence to set benchmarks (**Source: Interviewee 8**)
>
> Standardized procedures contribute to consistency in care, ensuring that every patient receives equitable treatment regardless of background (**Source: Interviewee 1**).
>
> The service charter helps us know how long a patient should wait to avoid delaying us. Service standards in the citizen service charter streamline operations and reduce unnecessary delays. It also encourages healthcare workers to follow the timelines because they know patients are aware of the standards (**Source: Interviewee 4**).

The above arguments from interviews imply that service standards in the citizen service charter play a significant role in enhancing the efficiency, accountability and equity of healthcare delivery at Mbagathi Hospital. Having clear timelines for consultations, laboratory results and emergency response assists in streamlining operations in hospitals as it reduces delays and enhances the flow of patients. The standards also enhance

transparency and accountability since patients are aware of expected service timelines. These findings imply that efficient implementation of service charters could strengthen health system performance.

4.4.2 Procedural Clarity in Citizen Service Charter

The researcher asked the respondents to specify how they agree or disagree with statements concerning procedural clarity in the citizen service charter based on a 5-point Likert scale in which 1 is strongly disagree (SD), 2 is disagree (D), 3 is neutral (N), 4 is agree (A), and 5 is strongly agree (SA). From the findings, the respondents agreed that the language used in the service charter is simple and free from technical jargon (63.3%; Mean=4.16) and that the procedures outlined in the citizen service charter make it clear how services are delivered at Mbagathi Hospital (62%; Mean=3.98). The respondents also agreed that the service charter openly provides information on service standards and timelines to all patients (74.7%; Mean=3.86) and that the processes described in the service charter are applied uniformly across all hospital departments (63.3%; Mean=3.85). The findings show that the citizen service charter at Mbagathi Hospital is perceived as clear, understandable, transparent and consistently implemented to enhance procedural clarity and assist patients in understanding service delivery standards. This implies that procedures outlined in the citizen service charter make it clear how services are delivered and ensure the service charter is applied uniformly across all hospital departments. The findings agree with Kaphle (2024) who established that increased procedural clarity in service charters enhanced the delivery of services in public institutions. Pollyn, *et al*. (2021) established that MDAs in Nigeria had charters that articulated clear procedures on how services can be accessed by the citizens and this clarity made it easy for citizens to seek and access

different services from the MDAs. The findings concur with new public management (NPM) theory which explains procedural clarity through its emphasis on establishing clear rules, transparent guidelines, defined service timelines, standardized operating procedures and digital service platforms that reduce bureaucratic complexity.

However, the respondents disagreed that hospital staff consistently follow the procedures stated in the citizen service charter when delivering services (69.6%; Mean=2.19) and that the steps for accessing services in the citizen service charter are easy to understand and follow (73.4%; Mean=2.15). The respondents also disagreed that patients are regularly informed about their rights and responsibilities as stated in the service charter (70.3%; Mean=2.09) and that Mbagathi Hospital effectively communicates any updates or changes to the procedures outlined in the citizen service charter (72.2%; Mean=2.08). This implies that hospital staff have not consistently followed the procedures stated in the citizen service charter when delivering services and the steps for accessing services in the citizen service charter are not easy to understand and follow. This could be linked to bureaucratic bottlenecks, literacy barriers, overcrowding of patients and administrative inefficiency. The findings are in line with Mkuburo (2023) who noted that clear procedural guidelines reduce confusion, delays and the likelihood of corruption since the citizens understand what is expected from themselves and service provider. Drewry (2021) argues that procedural clarity makes sure that citizens have a clear map and idea of where to access different services and how to engage with public service providers. Mehra (2016) found that articulating clear procedures improves accountability and transparency in the delivery of services because both people and service providers are in a position to examine whether prescribed processes are followed correctly. The findings are illustrated in Table 4.6.

***Table 4. 6*: Statements on Procedural Clarity in Citizen Service Charter**

	SD (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Dev.
The procedures outlined in the citizen service charter make it clear how services are delivered at Mbagathi Hospital.	1.3	1.9	14.6	62	20.3	3.98	0.74
The service charter openly provides information on service standards and timelines to all patients.	2.5	2.5	10.8	74.7	9.5	3.86	0.72
The steps for accessing services in the citizen service charter are easy to understand and follow.	9.5	73.4	12.0	2.5	2.5	2.15	0.72
The language used in the service charter is simple and free from technical jargon.	1.9	2.5	2.5	63.3	29.7	4.16	0.76
Hospital staff consistently follow the procedures stated in the citizen service charter when delivering services.	9.5	69.6	15.8	2.5	2.5	2.19	0.74
The processes described in the service charter are applied uniformly across all hospital departments.	0.6	1.9	21.5	63.3	12.7	3.85	0.68
Mbagathi Hospital effectively communicates any updates or changes to the procedures outlined in the citizen service charter.	11.4	72.2	13.9	1.9	0.6	2.08	0.62
Patients are regularly informed about their rights and responsibilities as stated in the service charter.	12	70.3	15.8	0.6	1.3	2.09	0.64

Source: Research Data (2026)

From the interviews, the interviewees were asked to indicate how procedural clarity in the citizen service charter affects health service delivery in Mbagathi Hospital. The interviewees said that:

> Procedural clarity in the citizen service charter significantly affects health service delivery in Mbagathi Hospital (**Source: Interviewee 1**).
>
> Clearly outlined procedures like patient registration and payment systems help patients to navigate the hospital system efficiently. Also, procedural clarity reduces confusion, waiting times and congestion which enhances service delivery and patient satisfaction (**Source: Interviewee 11**).
>
> When the steps are clearly displayed, patients don't have to keep asking where to go next. This saves a lot of time and reduces delays in service delivery. In addition, clear procedures make the work easier for both patients and staff, because everyone knows what is expected (**Source: Interviewee 3**).

The above arguments show that procedural clarity within the citizen service charter plays a significant role in improving health service delivery at Mbagathi Hospital. It enables the patients and staff to follow well-defined processes efficiently. The findings imply that clear procedures minimize confusion, reduce waiting times and congestion, enhance operational efficiency, and improve patient satisfaction and the quality of healthcare services.

4.4.3 Grievance Redressal Mechanisms in Citizen Service Charter

The respondents were requested to specify how they agree or disagree with statements regarding grievance redressal mechanisms based on a 5-point Likert scale. From the results, the majority of respondents agreed that the hospital has clear procedures for lodging complaints outlined in the citizen service charter (70.9%; Mean=4.13) and that staff handle complaints in a fair and professional manner (75.3%; Mean=4.02). The respondents also agreed that the citizen service charter clearly explains the steps to appeal if a complaint is not satisfactorily addressed (82.3%; Mean=4.01) and that the hospital provides a fair and transparent process for reviewing appealed complaints (79.1%; Mean=3.88). This implies

that hospital has clear procedures for lodging complaints outlined in the citizen service charter and staff handle complaints in a fair and professional manner. This is an indication that patients generally trust the grievance systems, as the complaint procedures are clear and staff handle complaints fairly and professionally. The findings concur with Laikera (2023), who established that the complaint handling system of NACC is well structured and significantly affects the delivery of services in NACC. In support, Mogotloane and Lonw (2023) noted that the grievance redressal system enhances accountability and creates a feedback loop that public institutions can use to identify systemic weaknesses and improve services

Further, most of the respondents agreed that patients can easily access feedback channels (suggestion boxes, hotlines, online platforms) provided in the citizen service charter (77.2%; Mean=3.79) and were neutral that feedback provided by patients is acknowledged and acted upon (63.9%; Mean=3.06). The respondents also disagreed that the hospital provides timely updates on the progress of complaint resolution (70.9%; Mean=2.14) and that complaints are resolved within the timeframes stated in the citizen service charter (70.3%; Mean=2.03). This implies that the hospital does not provide timely updates on the progress of complaint resolution. Findings show that complaints are not consistently acted upon because there is limited acknowledgment of and acting upon the feedback provided by the patients and failure in resolving complaints within the stated timelines. In addition, the fear of victimization appears to be low since the patients perceived the complaint handling and appeal processes as fair, transparent and professionally managed. The findings agree with Wambua, et al. (2021), who established that grievance redressal

mechanisms in the citizen service charter played a crucial role in ensuring that citizens demand better services from public agencies. The findings are illustrated in Table 4.7.

***Table 4. 7*: Statements on grievance redressal mechanisms in Citizen Service Charter**

	SD (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Dev.
The hospital has clear procedures for lodging complaints outlined in the citizen service charter.	1.3	1.3	3.8	70.9	22.8	4.13	0.65
Staff handle complaints in a fair and professional manner.	1.9	2.5	3.8	75.3	16.5	4.02	0.69
Complaints are resolved within the timeframes stated in the citizen service charter.	16.5	70.3	8.9	2.5	1.9	2.03	0.73
The hospital provides timely updates on the progress of complaint resolution.	12.7	70.9	9.5	3.8	3.2	2.14	0.80
Patients can easily access feedback channels (suggestion boxes, hotlines) provided in the citizen service charter.	1.9	5.7	9.5	77.2	5.7	3.79	0.71
Feedback provided by patients is acknowledged and acted upon by the hospital management.	2.5	15.8	63.9	8.9	8.9	3.06	0.84
The citizen service charter clearly explains the steps to appeal if a complaint is not satisfactorily addressed.	1.3	1.3	3.8	82.3	11.4	4.01	0.56
The hospital provides a fair and transparent process for reviewing appealed complaints.	1.9	3.8	7	79.1	8.2	3.88	0.68

Source: Research Data (2026)

From the interviews, the interviewees were asked to indicate ways in which grievance redressal mechanisms affect health service delivery in Mbagathi Hospital. The interviewees said that:

> Grievance redressal mechanisms ensure that patients and staff are provided with clear channels to raise complaints, such as suggestion boxes and complaint desks. This assists in identifying and addressing issues like delays, staff attitudes and shortages of drugs (**Source: Interviewee 16**).
>
> Grievance redressal mechanisms reassure them that the hospital values their concerns. When patients complain about long waiting hours and the management responds, you see changes almost immediately in how queues are handled. The complaint system makes us feel respected because someone actually listens and takes action (**Source: Interviewee 13**).

The arguments from the interviews show that grievance redressal mechanisms enhance health service delivery at Mbagathi Hospital through provision of channels for communicating concerns to patients and staff. Mechanisms such as suggestion boxes and complaint desks assist hospital management in identifying service delivery gaps, including long waiting times, negative staff attitudes and drug shortages. These findings imply that effective grievance handling enhances patient confidence, trust and satisfaction because patients feel listened to and respected.

4.4.4 Patients' Awareness of Rights and Responsibilities in Citizen Service Charter

The respondents were asked to indicate how they agree or disagree with statements regarding patients' awareness of rights and responsibilities based on a 5-point Likert scale. Majority of the respondents agreed that awareness of patients' rights contributes to better quality and timely service delivery in the hospital (75.3%; Mean=4.13), that patients fulfill their responsibilities (like providing accurate information, following hospital procedures) to make service delivery more efficient (68.4%; Mean=4.06) and that lack of awareness of rights and responsibilities negatively affects the quality-of-service delivery (79.7%; Mean=4.03). The respondents agreed that patient awareness of rights and responsibilities is essential for improving trust and satisfaction with hospital services (79.7%; Mean=3.77). This implies that patients fulfill their responsibilities, which improves trust and satisfaction

with hospital services. The findings imply that the information gaps weaken accountability mechanisms because patients cannot fully hold the hospital system responsible without adequate knowledge of the rights and entitlements. The findings agree with Mdibwa (2019) who found that being aware of the patients' rights empowered the citizens to demand better health services and also hold service providers accountable

Further, the respondents agreed that patients clearly understand their responsibilities in seeking and receiving healthcare services at Mbagathi Hospital (57.6%; Mean=3.35). However, the respondents disagreed that patients are well informed about their rights (62.7%; Mean=2.34) and that the hospital effectively uses strategies such as posters to create awareness of patients' rights and responsibilities (71.5%; Mean=2.23). The respondents also disagreed that there are continuous education programs to enhance patients' understanding of their rights (73.4%; Mean=2.22). Findings showed that health literacy is partially low though patients demonstrated reasonable understanding of their responsibilities in healthcare utilization. However, there was low awareness of patients' rights which could be linked to limited education initiatives. In addition, patients were moderately empowered as they were able to provide accurate information and follow procedures which contributed to improved trust and satisfaction. In addition, urban hospital information asymmetries are clearly pronounced as there are gaps between patients' understanding of responsibilities and limited knowledge of rights compounded by the hospital's inadequate use of awareness tools. The findings agree with Njuguna (2020) who established that knowledge of the patients' rights charter significantly influenced how responsive the health care systems are in Machakos County. Similarly, Mwania (2021) found that consultations among employees, training and accessing copies of the charter

improved the awareness of the customer rights in the service charter. The findings are shown in Table 4.8.

***Table 4. 8*: Statements on Patients' Awareness of Rights and Responsibilities**

	SD (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Dev.
Patients are well informed about their rights as stated in the citizen service charter.	12	62.7	7.6	15.2	2.5	2.34	0.96
Awareness of patients' rights contributes to better quality and timely service delivery.	0.6	1.9	1.9	75.3	20.3	4.13	0.58
Patients clearly understand their responsibilities in seeking and receiving healthcare services.	3.8	4.4	57.6	21.5	12.7	3.35	0.90
Patients fulfill responsibilities to make service delivery more efficient.	0.6	3.2	7	68.4	20.9	4.06	0.68
Patient awareness of rights and responsibilities is essential for improving patients' satisfaction.	0.6	3.8	14.6	79.7	1.3	3.77	0.56
Lack of awareness of rights and responsibilities negatively affects the quality of service delivery.	1.3	1.9	3.2	79.7	13.9	4.03	0.60
The hospital effectively uses posters to create awareness of patients' obligations.	12.7	71.5	1.3	9.5	5.1	2.23	0.96
There are continuous education programs to enhance patients'	10.1	73.4	3.2	10.8	2.5	2.22	0.86

understanding of their rights and responsibilities.

Source: Research Data (2026)

From the interviews, the interviewees were asked to indicate ways in which patients' awareness of rights and responsibilities affects health service delivery in Mbagathi Hospital. The interviewees noted that:

> Patients' awareness of their rights and responsibilities makes patients well-informed, which gives them the capability to demand quality care, adhere to treatment and engage constructively with healthcare providers (**Source: Interviewee 16**).
>
> Informed patients contribute to improved communication and decision-making and strengthen the patient-provider relationship for better health outcomes (**Source: Interviewee 5**).
>
> Patients who know their rights are more confident to ask questions and insist on proper treatment and this enhances accountability among healthcare workers. Moreover, patients with an understanding of their roles like keeping appointments and following prescriptions, helps in the reduction of congestion and repeat cases (**Source: Interviewee 9**).

The findings showed that patients' awareness of rights and responsibilities strengthens the effectiveness of health service delivery at Mbagathi Hospital. Informed patients are more likely to actively engage in the care by asking questions, demanding appropriate treatment and adhering to prescribed medical instructions. Having an understanding of the responsibilities of patients such as attending appointments and following prescriptions, improves efficiency in service delivery through reduced congestion and fewer repeat visits. The findings imply that strengthening patient education can serve as a practical strategy for improving communication, fostering shared decision-making and enhancing both the quality and efficiency of healthcare services. The findings agree with Bob and Kebede (2025) who noted that the charter articulated that citizens have the right to be treated with

dignity by public servants, receive accurate service information and access services within the set timelines.

4.4.5 Health Service Delivery

The respondents were requested to indicate how they agree or disagree with statements regarding health service delivery based on a 5-point Likert scale in which 1 is strongly disagree (SD), 2 is disagree (D), 3 is neutral (N), 4 is agree (A) and 5 is strongly agree (SA). The composite scores were developed based on the opinions of respondents guided by the 5-point Likert scales. From the results, the respondents strongly agreed that the hospital staff treat patients with respect and courtesy (67.7%; Mean=4.52). In addition, the respondents agreed that the hospital maintains high standards of cleanliness and hygiene in all service areas (74.1%; Mean=4.02) and that the healthcare professionals at Mbagathi Hospital provide accurate diagnosis and appropriate treatment (77.8%; Mean=4.01). This implies that hospital staff at Mbagathi Hospital treat patients with respect and courtesy. The findings agree with Sherstha (2018) who noted that effective health service delivery systems are characterized by responsiveness to the needs of the population.

Further, the respondents agreed that the hospital's location and operating hours make it convenient for patients to seek care (72.2%; Mean=3.88) and were neutral about whether it is easy to access medical services without unnecessary delays (69.0%; Mean=3.29). However, the respondents disagreed that they are satisfied with the overall services provided at Mbagathi Hospital (70.9%; Mean=2.18) and that the hospital staff attend to patients promptly and minimize waiting times (74.1%; Mean=2.04). This implies that there is low patient satisfaction at Mbagathi Hospital which needs to be addressed. The findings are consistent with Ntelela (2022), who argued that health service delivery involves

coordinated efforts among healthcare providers to ensure that essential services are available. The findings are shown in Table 4.9.

***Table 4. 9*: Statements on Health Service Delivery**

	SD (%)	D (%)	N (%)	A (%)	SA (%)	Mean	Std. Dev.
I am satisfied with the overall services provided.	9.5	70.9	13.3	4.4	1.9	2.18	0.74
The hospital staff treat patients with respect and courtesy.	0.6	0.6	12.7	18.4	67.7	4.52	0.79
It is easy to access medical services without delays.	1.3	1.9	69.0	22.2	5.7	3.29	0.66
The hospital's location and operating hours make it convenient for patients to seek care.	1.3	1.9	14.6	72.2	10.1	3.88	0.65
The healthcare professionals provide accurate diagnosis and appropriate treatment.	0.6	0.6	8.2	77.8	12.7	4.01	0.54
The hospital maintains high standards of hygiene in all service areas.	1.3	2.5	5.7	74.1	16.5	4.02	0.66
The hospital staff attend to patients promptly and minimize waiting times.	15.2	74.1	5.1	3.2	2.5	2.04	0.75
Administrative processes such as registration and billing are handled quickly and effectively.	0.6	3.2	75.3	17.7	3.2	3.20	0.57

Source: Research Data (2026)

From the interviews, the interviewees were asked to indicate the current status of health service delivery in Mbagathi Hospital. The interviewees noted that:

> Health service delivery at Mbagathi Hospital has moderately improved but is still constrained by systemic challenges common in public health facilities (**Source: Interviewee 11**).

> The hospital has expanded access to essential services such as outpatient care, maternal and child health and emergency services. This led to

> increased patient turnout reflecting public trust and reliance (**Source: Interviewee 2**).
>
> There have been improvements in infrastructure and digitization of some services, which have enhanced efficiency in patient handling (**Source: Interviewee 1**)
>
> Mbagathi Hospital continues to experience congestion due to high patient volumes relative to available staff and resources. Quality and timeliness of care have been affected by shortages of medical personnel, essential drugs and equipment. In addition, there are times when patients come early but still leave late because the queues are very long (**Source: Interviewee 16**).

The above arguments pointed to the fact that health service delivery at Mbagathi Hospital has improved moderately through expanded access to essential services such as outpatient, maternal and child health and emergency care as well as infrastructural upgrades and partial digitization. However, there were systemic challenges identified, which included overcrowding, inadequate staffing and shortages of essential medicines and equipment. The results imply that there is a need for health reforms to improve service availability and institutional responsiveness and reduce congestion and prolonged waiting times among the patients. Sherstha (2018) noted that effective health service delivery systems are characterized by accessibility, quality, efficiency, equity, and responsiveness to the needs of the population.

4.5 Inferential Statistics

The study conducted multiple regression analysis to establish the extent to which citizen service charter influences health service delivery. The regression assumptions were also conducted.

4.5.1 Diagnostic Tests

The study tested for regression assumptions such as normality, multicollinearity and heteroscedasticity. Multicollinearity was tested through Variance Inflation Factor (VIF)

where a VIF above 10 shows significant multicollinearity. The findings showed that there were no multicollinearity issues as the VIF values for the variables did not exceed 10. The findings are illustrated in Table 4.10.

Table 4. 10: Multicollinearity Test Results

Model		Collinearity Statistics	
		Tolerance	VIF
1	Service standards	.170	5.890
	Procedural clarity	.202	4.956
	Grievance redressal mechanisms	.142	7.059
	Patients' Awareness of rights and responsibilities	.183	5.466

Further, the normality was tested through Shapiro-Wilk and Kolmogorov-Smirnov test. The findings showed that the data for the study had a normal distribution as the p-values for all the variables were greater than 0.05. The findings are shown in Table 4.8.

Table 4. 11: Normality Test Results

	Kolmogorov-Smirnov[a]			Shapiro-Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
Service standards	.311	10	.007	.831	10	.135
Procedural clarity	.181	10	.200*	.907	10	.263
Grievance redressal mechanisms	.191	10	.200*	.895	10	.191
Patients' Awareness of rights and responsibilities	.192	4	.	.971	4	.850

Moreover, heteroscedasticity was tested using Breusch-Pagan-Godfrey test where probability values less than 0.05 indicate the existence of non-uniform variances. Based on the findings in Table 4.10, the findings showed that the p-value was less than 0.05, indicating the existence of non-uniform variances.

4.5.2 Multiple Regression Analysis

The study conducted multiple regression analysis to establish the extent to which aspects of citizen service charter such as service standards, procedural clarity, grievance redressal mechanisms, patients' awareness of rights and responsibilities influence health service delivery. From the findings, the R-Square was 0.733, which implies that 73.3% of the variations in health service delivery in Mbagathi Hospital could be explained by service standards, procedural clarity, grievance redressal mechanisms, patients' awareness of rights and responsibilities in the citizen service charter. The findings for model summary are illustrated in Table 4.12.

***Table 4. 12*: Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error
1	.856[a]	.733	.726	.13690

a. Predictors: (Constant), Patients' Awareness of Rights and Responsibilities, Procedural Clarity, Service Standards, Grievance Redressal Mechanisms

Source: Research Data (2026)

Further, from ANOVA, the F-computed was 104.768 and the p-value was 0.000. Since the F-computed was greater than F-critical (2.4307) and the p-value was less than 0.05, the model was significant. This implies that different aspects of the citizen service charter could be used to predict health service delivery in Mbagathi Hospital. The results are shown in Table 4.13.

***Table 4. 13*: ANOVA**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	7.854	4	1.964	104.768	.000[b]

Residual	2.867	153	.019
Total	**10.722**	**157**	

a. Dependent Variable: Health Service Delivery

b. Predictors: (Constant), Patients' Awareness of Rights and Responsibilities, Procedural Clarity, Service Standards, Grievance Redressal Mechanisms

Source: Research Data (2026)

Moreover, based on the regression coefficients, the equation of the model was:

$$\mathbf{Y = 0.638 + 0.764X_1 + 0.643X_2 + 0.712X_3 + 0.558X_4;}$$

Where:

Y = Health service delivery;

$\mathbf{X_1}$ = Service standards;

$\mathbf{X_2}$ = Procedural clarity;

$\mathbf{X_3}$ = Grievance redressal mechanisms

$\mathbf{X_4}$ = Patients' awareness of rights and responsibilities

Based on the findings, a unit change in service standards leads to a 0.764-unit change in health service delivery in Mbagathi Hospital. This implies that better adherence to established service procedures, responsiveness, professionalism and quality assurance significantly improves the efficiency and effectiveness of healthcare services. Hence, there is a need for Mbagathi Hospital to strengthen service standards to enhance patient satisfaction, timeliness of care and reliability of services.

The study also established that a unit change in procedural clarity leads to 0.643-unit changes in health service delivery in Mbagathi Hospital. This shows that having clear guidelines, well-defined processes and effective communication of procedures in hospitals significantly enhances service provision. This implies that service delivery efficiency could

be enhanced by having healthcare workers who clearly understand operational procedures, patient handling protocols and administrative processes.

The findings also showed that a unit change in grievance redressal mechanisms leads to a 0.712-unit change in health service delivery in Mbagathi Hospital. This shows that effective complaint handling, feedback management and resolution processes substantially enhance health service delivery. This implies that strengthening how patient concerns are received, addressed and resolved within Mbagathi Hospital leads to enhanced efficiency, responsiveness and quality of care provided.

The study found that a unit change in patients' awareness of rights and responsibilities leads to a 0.558-unit change in health service delivery in Mbagathi Hospital. This shows that more informed patients interact effectively with the health system, demand better standards and contribute to accountability. This implies that health service delivery at Mbagathi Hospital could be improved by strengthening patient education and communication strategies. The findings are illustrated in Table 4.14.

***Table 4. 14*: Regression Coefficients**

Model		Unstandardized Coefficients		Standardized Coefficients		
		B	**Std. Error**	**Beta**	**t**	**Sig.**
1	(Constant)	0.638	0.156		4.103	0.000
	Service Standards	0.867	0.269	0.764	3.223	0.001
	Procedural Clarity	0.783	0.108	0.643	7.250	0.000
	Grievance Redressal Mechanisms	0.815	0.317	0.712	2.571	0.011
	Patients' Awareness of Rights and Responsibilities	0.665	0.046	0.558	14.457	0.000

a. Dependent Variable: Health Service Delivery

Source: Research Data (2026)

CHAPTER FIVE

DISCUSSIONS, CONCLUSIONS AND RECOMMENDATIONS

5.1 Introduction

The study sought to assess the influence of the citizen service charter on health service delivery in Mbagathi Hospital. The data was collected from the sampled respondents using questionnaires and interviews. Therefore, this chapter presents summary, discussions, deduced conclusions, recommendations and areas for further study.

5.2 Discussions

The section highlights the findings discussion where current results of this research are compared and related to literature and previous study findings.

5.2.1 Service Standards and Health Service Delivery

The study found that service standards in the citizen service charter encourage staff to maintain high ethical and professional conduct and that the service standards in the citizen service charter enhance the accuracy and reliability of services provided to patients. These assertions are supported by Nayan and Pandey (2020) who also established that service standards ensure that public institutions remain accountable and responsive by setting out clear expectations for the provision of services to citizens. Similarly, Montague, et al. (2020) noted that service standards act as a social contract between citizens and public institutions providing the services and offer frameworks for monitoring and evaluating service performance, as they are used to identify gaps in delivery. Further, Ndege (2020) established that the standards articulated in the service charter guide the KWSC in offering quality services to the residents. Theoretically, the findings agree with new public management (NPM) theory, which argues that public sector organizations could enhance

efficiency, effectiveness and accountability by adopting management practices and principles from the private sector.

The study also found that the citizen service charter has improved the overall quality of healthcare services delivered at Mbagathi Hospital and that the service standards in the citizen service charter ensure that patients receive services within the stated timeframes. The study established that the service standards in the citizen service charter ensure quick response to patients' needs and emergencies. The findings agree with Ahsan, *et al*. (2024) who noted that service standards in the citizen charter make sure that citizens have a benchmark for holding the public institutions in Bangladesh accountable for the quality and timeliness of the services provided. Mastai (2020) argued that service standards articulated in the charter gave students in Tanzanian universities the mandate to demand better services when they were not satisfactory. Shalo (2021) noted that patient service standards assisted in defining the operational priorities, clarifying staff workload and promoting the people-centered governance of customer services.

The study revealed that the hospital did not consistently meet the turnaround times for services as outlined in the citizen service charter and that the citizen service charter did not promote courteous and respectful interaction between hospital staff and patients. The study found that the hospital did not promptly address patient concerns and feedback as guided by the citizen service charter. The findings agree with Ntelela (2022) who established that service standards in charters promote transparency, ensure accountability and empower customers to demand better services and provide a framework for complaints and assist service providers to enhance service delivery. Charles (2024) established that service delivery standards insignificantly contributed to the satisfaction of clients in public

hospitals which was linked to the fact that service standards did not ensure that services such as payments, diagnosis and treatment were offered effectively

5.2.2 Procedural Clarity and Health Service Delivery

The study established that the language used in the service charter is simple and free from technical jargon and that the procedures outlined in the citizen service charter make it clear how services are delivered at Mbagathi Hospital. The findings agree with Kaphle (2024) who established that increased procedural clarity in service charters enhanced the delivery of services in public institutions. Pollyn, *et al*. (2021) established that MDAs in Nigeria had charters that articulated clear procedures on how services can be accessed by the citizens and this clarity made it easy for citizens to seek and access different services from the MDAs. Sherstha (2018) established that charters in Nepal offer information regarding the procedures involved in getting services. Theoretically, the findings concur with new public management (NPM) theory which explains procedural clarity through its emphasis on establishing clear rules, transparent guidelines, defined service timelines, standardized operating procedures and digital service platforms that reduce bureaucratic complexity.

The study established that the service charter openly provides information on service standards and timelines to all patients and that the processes described in the service charter are applied uniformly across all hospital departments. The study however, established that hospital staff did not consistently follow the procedures stated in the citizen service charter when delivering services. The findings are in line with Mkuburo (2023) who found that there are clear procedures provided by the local government in Tanzania as outlined in the citizen service charter which led to increased citizen satisfaction with services. Ferdous

(2021) noted that procedural clarity leads to a reduction in service inefficiency and corruption as it eliminates the uncertainty that could be exploited by service providers.

The study found that the steps for accessing services in the citizen service charter are easy to understand and follow. The study revealed that patients are not regularly informed about their rights and responsibilities as stated in the service charter and that Mbagathi Hospital did not effectively communicate any updates or changes to the procedures outlined in the citizen service charter. The findings are in line with Mkuburo (2023) who noted that clear procedural guidelines reduce confusion, delays and the likelihood of corruption since the citizens understand what is expected from themselves and the service provider. Drewry (2021) argues that procedural clarity makes sure that citizens have a clear map and idea of where to access different services and how to engage with public service providers. Mehra (2016) found that articulating clear procedures improves accountability and transparency in the delivery of services because both people and service providers are in a position to examine whether prescribed processes are followed correctly.

5.2.3 Grievance Redressal Mechanisms and Health Service Delivery

The study revealed that the hospital has clear procedures for lodging complaints outlined in the citizen service charter and that staff handle complaints fairly and professionally. These findings concur with Laikera (2023) who established that the complaint handling system of NACC is well structured and significantly affects the delivery of services in NACC. There is convergence in the literature that grievance redressal mechanisms are key determinants of service delivery. In support, Mogotloane and Lonw (2023) noted that grievance redressal systems enhance accountability and create a feedback loop that public institutions can use to identify systemic weaknesses and improve services. In addition,

Prajapat, et al. (2022) noted that citizens are empowered through the procedures for handling grievances in the service charter to participate actively in holding public service providers accountable

The study established that the citizen service charter clearly explains the steps to appeal if a complaint is not satisfactorily addressed and that the hospital provides a fair and transparent process for reviewing appealed complaints. Moreover, the study found that patients can easily access feedback channels (suggestion boxes, hotlines, online platforms) provided in the citizen service charter. The findings are in line with Kumar (2021) who argued that an effective grievance mechanism has different components including channels for users to lodge complaints, steps followed in lodging complaints and the set timelines for grievance redress. Hossain, *et al*. (2024) noted that the mechanisms represent the commitment by the institution to accountability and transparency as it ensures that clients can seek solutions when service delivery falls short of expectations. Theoretically, the findings are consistent with public service motivation theory which asserts that having effective grievance redressal mechanisms in the service charter ensures healthcare workers are motivated to be responsive, just and transparent and promote patient-centered service delivery.

The study found that feedback provided by patients is acknowledged and acted upon. The study established that the hospital did not provide timely updates on the progress of complaint resolution and that complaints are not resolved within the timeframes stated in the citizen service charter. The findings agree with Kumar (2021) who noted that principles of fairness, equity and accountability in public service are reinforced through the inclusion of grievance redressal mechanisms in a citizen service charter. Wambua, *et al*. (2021)

established that grievance redressal mechanisms in a citizen service charter played a crucial role in ensuring that citizens demand better services from public agencies.

5.2.4 Patients' Awareness of Rights and Responsibilities and Health Service Delivery

The study established that a unit change in patients' awareness of rights and responsibilities leads to a 0.558-unit change in health service delivery in Mbagathi Hospital. The study found that awareness of patients' rights contributes to better quality and timely service delivery in the hospital, and that patients fulfill their responsibilities (like providing accurate information, following hospital procedures) to make service delivery more efficient. These findings are consistent with Mdibwa (2019) who also found that being aware of the patients' rights empowered the citizens to demand better health services and also hold service providers accountable. Similarly, Mwania (2021) found that consultations among employees, training and accessing copies of the charter improved awareness of the customer rights in the service charter. Theoretically, the findings concur with public service motivation theory which argues that raising patients' awareness of rights and responsibilities through service charters signifies the hospital's commitment to offering quality health care services.

The study found that lack of awareness of rights and responsibilities negatively affects the quality-of-service delivery and that patient awareness of rights and responsibilities is essential for improving trust and satisfaction with hospital services. The study also found that patients clearly understand their responsibilities in seeking and receiving healthcare services at Mbagathi Hospital and that patients are not well informed about their rights. The findings agree with Bob and Kebede (2025) who noted that the charter articulated that citizens have the right to be treated with dignity by public servants, receive accurate

services' information and access services within the set timelines. Njuguna (2020) established that knowledge of the patients' rights charter significantly influenced how responsive the health care systems are in Machakos County.

The study found that the hospital did not effectively use strategies such as posters to create awareness of patients' rights and responsibilities and that there are no continuous education programs to enhance patients' understanding of their rights. The findings agree with Deep (2021), who argued that the rights empower the citizens to hold service providers accountable but responsibilities create an environment where users and providers can trust, respect and cooperate. Thema (2020) noted that the service charter also articulates the responsibilities such as provision of accurate medical history, respecting hospital staff and commitment to follow treatment instructions. Galera (2023) noted that the responsibilities of the citizens are articulated in the charter to ensure effective service delivery.

5.3 Summary of Major Findings

The study sought to assess the influence of service standards on health service delivery at Mbagathi Hospital. The study found that a unit change in service standards leads to a 0.764-unit change in health service delivery in Mbagathi Hospital. This implies that better adherence to established service procedures, responsiveness, professionalism and quality assurance significantly improves the efficiency and effectiveness of healthcare services. Service standards in the citizen service charter are important as they encourage staff to maintain high ethical and professional conduct and enhance the accuracy and reliability of services provided to patients. The citizen service charter was also established to improve the overall quality of healthcare services delivered as patients received services within the stated timeframes. The study established that the service standards in the citizen service

charter ensure quick response to patients' needs and emergencies. The study revealed that the hospital did not consistently meet the turnaround times for services as outlined in the citizen service charter which could be linked to inadequate promotion of courteous and respectful interaction between hospital staff and patients.

The study further sought to determine the influence of procedural clarity on health service delivery at Mbagathi Hospital. Findings showed that a unit change in procedural clarity leads to a 0.643-unit change in health service delivery in Mbagathi Hospital. This shows that having clear guidelines, well-defined processes and effective communication of procedures in hospitals significantly enhances service provision. Language used in the service charter is simple and free from technical jargon and the procedures outlined in the citizen service charter make it clear how services are delivered at Mbagathi Hospital. The study established that the service charter openly provides information on service standards and timelines to all patients. This ensures that the processes described in the service charter are applied uniformly across all hospital departments. Although Mbagathi Hospital has ensured procedural clarity in services, there are emerging challenges. These include failure by staff to consistently follow the procedures in delivering services and failure to regularly inform the patients about their rights and responsibilities as stated in the service charter. This could be linked to ineffective communication about the updates or changes to the procedures outlined in the citizen service charter.

The study also sought to examine the influence of grievance redressal mechanisms on health service delivery at Mbagathi Hospital. The study revealed that a unit change in grievance redressal mechanisms leads to a 0.712-unit change in health service delivery in Mbagathi Hospital. This shows that effective complaint handling, feedback management

and resolution processes substantially enhance health service delivery. This implies that strengthening how patient concerns are received, addressed and resolved within Mbagathi Hospital leads to enhanced efficiency, responsiveness and quality of care provided. The study found that the hospital has clear procedures for lodging complaints outlined in the citizen service charter and that staff handle complaints fairly and professionally. The study established that the citizen service charter clearly explains the steps to appeal if a complaint is not satisfactorily addressed and that the hospital provides a fair and transparent process for reviewing appealed complaints. Moreover, the study found that patients can easily access feedback channels (suggestion boxes, hotlines, online platforms) provided in the citizen service charter and that feedback provided by patients is acknowledged and acted upon. The study established that the hospital did not provide timely updates on the progress of complaint resolution and that complaints are not resolved within the timeframes stated in the citizen service charter.

The study also sought to assess the influence of patients' awareness of rights and responsibilities on health service delivery at Mbagathi Hospital. The study established that a unit change in patients' awareness of rights and responsibilities leads to a 0.558-unit change in health service delivery in Mbagathi Hospital. This shows that more informed patients interact effectively with the health system, demand better standards and contribute to accountability. This implies that health service delivery within Mbagathi Hospital could be improved by strengthening patient education and communication strategies. The study found that awareness of patients' rights contributes to better quality and timely service delivery in the hospital, that patients fulfill their responsibilities (like providing accurate information, following hospital procedures) to make service delivery more efficient and

that lack of awareness of rights and responsibilities negatively affects the quality of service delivery. The study found that patient awareness of rights and responsibilities is essential for improving trust and satisfaction with hospital services. The study also found that patients clearly understand their responsibilities in seeking and receiving healthcare services at Mbagathi Hospital and that patients are not well informed about their rights. The study found that the hospital does not effectively use strategies such as posters to create awareness of patients' rights and responsibilities and that there are no continuous education programs to enhance patients' understanding of their rights.

5.4 Conclusions

Based on objective one, the study concluded that service standards significantly influenced health service delivery at Mbagathi Hospital. The study shows that health service delivery at Mbagathi Hospital could be improved by having clearly defined service standards that promote ethical and professional conduct among staff and enhance accuracy and reliability in service provision. Service delivery could also be improved by having service standards that ensure that patients receive timely attention. However, failure to consistently meet turnaround times and inadequate promotion of courteous staff-patient interactions prompts policymakers to formulate policies for strengthening enforcement and monitoring of service standards and enhance staff training on patient relations.

Regarding objective two, the study further concluded that procedural clarity significantly influenced health service delivery at Mbagathi Hospital. It was clear that health service delivery could be enhanced by enhancing clarity by outlining service standards, timelines and step-by-step processes in a manner that is generally easy for patients to understand and follow. This clarity reduces uncertainty, improves patient navigation within the hospital

and promotes uniformity in service provision across departments. The inconsistent adherence by staff weakens the intended benefits of procedural clarity which prompts policymakers to formulate policies meant to bridge these gaps.

Concerning objective three, the study also concluded that grievance redressal mechanisms had a significant effect on health service delivery at Mbagathi Hospital. This is because the presence of clear complaint procedures within the citizen service charter, coupled with fair and professional handling of complaints, improves patients' trust in the system and encourages them to voice concerns. This in turn provides the hospital with critical feedback for improving service quality. Moreover, the availability of accessible feedback channels and a transparent appeal process ensure inclusivity and reinforce perceptions of fairness which also strengthens service delivery. The implementation gaps linked to the timeliness and responsiveness of addressing patients' concerns prompt policymakers to formulate policies meant to bridge these gaps.

Based on objective four, the study concluded that patients' awareness of rights and responsibilities had a significant effect on health service delivery at Mbagathi Hospital. This could be linked to the fact that patients are more likely to demand timely, respectful and quality care when they are aware of their rights and responsibilities. This compels healthcare providers to adhere to established service standards. Patients who understand and fulfill their responsibilities such as providing accurate medical information and complying with hospital procedures, facilitate smoother and more efficient service delivery processes. The findings prompt policymakers to formulate policies meant to raise awareness and support education programs.

Generally, the study contributes to existing knowledge as it provides empirical evidence on how the implementation of a Citizen Service Charter influences the quality, accessibility, responsiveness, transparency, and overall efficiency of health service delivery at Mbagathi Hospital.

5.5 Recommendations

The study found that Mbagathi Hospital has failed to consistently meet the turnaround times for services. Hence, it is recommended that the central government, through the Ministry of Health, should ensure that management in Mbagathi Hospital strengthens operational efficiency by introducing clear internal performance targets aligned with the charter. This can be achieved through workflow optimization, adequate staffing and the adoption of digital health management systems to track patient flow and reduce delays. There is also a need for institutionalizing regular monitoring and evaluation of service timelines to ensure that staff adhere to the stipulated standards.

The study further found that there were gaps in the promotion of courteous and respectful interaction between hospital staff and patients. Hence, the study recommends that the County Government of Nairobi, in collaboration with the management at Mbagathi Hospital, should institutionalize regular staff training and refresher programs focused on service charter compliance. These trainings should emphasize the importance of adhering to standardized procedures to ensure equity, accountability, and quality in service delivery. Moreover, supervisory mechanisms such as routine audits, performance appraisals linked to compliance and supportive supervision should be strengthened to ensure that staff consistently follow the outlined procedures.

The study found that there was ineffective communication about the updates or changes to the procedures outlined in the citizen service charter. Hence, it is recommended that Mbagathi Hospital should adopt multiple communication channels including prominently displayed posters, brochures in waiting areas, digital screens and verbal communication by healthcare providers during patient interactions. Incorporating patient education into routine service delivery processes like during registration could ensure that patients are consistently informed. Community outreach initiatives and the use of local languages would also enhance understanding and inclusivity among diverse patient populations.

In addition, there is a need for Mbagathi Hospital to establish clear and effective communication systems for disseminating updates or changes to the service charter. This can be achieved through internal communication platforms such as staff briefings, memos and digital communication tools to keep healthcare workers informed. Creating feedback mechanisms like patient satisfaction surveys would also allow patients to report inconsistencies and stay informed.

Findings showed that complaints are not resolved within the timeframes stated in the Citizen Service Charter. Hence, the study recommends that Mbagathi Hospital needs to align its complaint resolution practices with the timelines stipulated in the Citizen Service Charter. This can be done by reviewing existing internal processes to identify bottlenecks that cause delays and implementing workflow improvements such as setting internal deadlines, automating tracking systems and regularly monitoring performance against the charter standards.

The study established that there are no continuous education programs to enhance patients' understanding of their rights. Hence, it is recommended that community members should

engage with the Mbagathi Hospital to strengthen patient education initiatives to improve awareness of patients' rights and responsibilities. This can be achieved by developing structured and continuous patient education programs that are integrated into routine service delivery. There is a need for healthcare providers to take time during admission and consultation to clearly explain patients' rights, responsibilities and available complaint mechanisms.

5.6 Areas for Further Research

The study was limited to Mbagathi Hospital and hence future studies should seek to assess the citizen service charter and its implications for health service delivery in other major hospitals in Kenya. The study should also be extended to private hospitals to establish how the citizen service charter influences health service delivery in Kenya. Future studies should also examine the moderating effect of government policies on the relationship between citizen service charter and health service delivery in public hospitals in Kenya. Moreover, future studies should seek to establish how integration of digital platforms improves the efficiency of Citizen Service Charters.

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APPENDICES

Appendix I: Informed Consent Form

My name is Choppy Odunga, a master's student at Africa Nazarene University. As part of master's program, I am undertaking research on **Assessment of Citizen Service Charter and its Implications for Health Service Delivery at Mbagathi Hospital**. Thus, I am inviting you to participate in data collection for the study. Kindly note that your participation is entirely voluntary and you have the right to halt at any time.

If you decide to take part, complete the questionnaire by answering all the questions. This will take around 30 minutes of your time. There are no known risks linked to your involvement in this research. The information you provide will be confidentially kept and will be used for academic purposes only. Do not state your name in any of the research tools.

By signing below, you confirm that you have reviewed and understood the details outlined in this consent form. You agree to take part in this study voluntarily and understand that you may withdraw at any time without any consequences.

Participant Signature: _____ Date: _____

Researcher Signature: _____ Date: _____

Appendix II: Research Questionnaire

The questionnaire seeks to collect data in relation to **Assessment of Citizen Service Charter and its Implications for Health Service Delivery at Mbagathi Hospital**. Kindly answer the questions appropriately.

Part A: Biographic Data

1) Gender.

   Male [ ]

   Female [ ]

2) Highest level of education.

   Certificate [ ]

   Diploma [ ]

   Degree [ ]

   Post-graduate [ ]

3) Period of engagement with Mbagathi Hospital.

   Less than 2 yrs [ ]

   2 to 5 yrs [ ]

   6 to 9 yrs [ ]

   More than 9 yrs [ ]

Part B: Service Standards

4) Kindly state how you agree or disagree with statements concerning service standards in citizen service charter based on a 5-point Likert scale where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree.

Statements	**1**	**2**	**3**	**4**	**5**
The service standards in the citizen service charter ensure that patients receive services within the stated timeframes.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital consistently meets the turnaround times for services as outlined in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
The citizen service charter has improved the overall quality of healthcare services delivered at Mbagathi Hospital.	[ ]	[ ]	[ ]	[ ]	[ ]
The service standards in the citizen service charter enhance the accuracy and reliability of services provided to patients.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital promptly addresses patient concerns and feedback as guided by the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
The service standards in the citizen service charter ensure quick response to patients' needs and emergencies.	[ ]	[ ]	[ ]	[ ]	[ ]
The citizen service charter promotes courteous and respectful interaction between hospital staff and patients.	[ ]	[ ]	[ ]	[ ]	[ ]

The service standards in the citizen service charter encourage staff to maintain high ethical and professional conduct.	[ ]	[ ]	[ ]	[ ]	[ ]

Part C: Procedural Clarity

5) Kindly state how you agree or disagree with statements concerning procedural clarity in citizen service charter based on a 5-point Likert scale where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree.

Statements	**1**	**2**	**3**	**4**	**5**
The procedures outlined in the citizen service charter make it clear how services are delivered at Mbagathi Hospital.	[ ]	[ ]	[ ]	[ ]	[ ]
The service charter openly provides information on service standards and timelines to all patients.	[ ]	[ ]	[ ]	[ ]	[ ]
The steps for accessing services in the citizen service charter are easy to understand and follow.	[ ]	[ ]	[ ]	[ ]	[ ]
The language used in the service charter is simple and free from technical jargon.	[ ]	[ ]	[ ]	[ ]	[ ]
Hospital staff consistently follow the procedures stated in the citizen service charter when delivering services.	[ ]	[ ]	[ ]	[ ]	[ ]
The processes described in the service charter are applied uniformly across all hospital departments.	[ ]	[ ]	[ ]	[ ]	[ ]

Mbagathi Hospital effectively communicates any updates or changes to the procedures outlined in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
Patients are regularly informed about their rights and responsibilities as stated in the service charter.	[ ]	[ ]	[ ]	[ ]	[ ]

Part D: Grievance Redressal Mechanisms

6) Kindly state how you agree or disagree with statements concerning grievance redressal mechanisms in citizen service charter based on a 5-point Likert scale where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree.

	1	2	3	4	5
The hospital has clear procedures for lodging complaints outlined in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
Staff handle complaints in a fair and professional manner.	[ ]	[ ]	[ ]	[ ]	[ ]
Complaints are resolved within the timeframes stated in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital provides timely updates on the progress of complaint resolution.	[ ]	[ ]	[ ]	[ ]	[ ]
Patients can easily access feedback channels (e.g., suggestion boxes, hotlines, online platforms) provided in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]

Feedback provided by patients is acknowledged and acted upon by the hospital management.	[ ]	[ ]	[ ]	[ ]	[ ]
The citizen service charter clearly explains the steps to appeal if a complaint is not satisfactorily addressed.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital provides a fair and transparent process for reviewing appealed complaints.	[ ]	[ ]	[ ]	[ ]	[ ]

Part E: Patients' Awareness of Rights and Responsibilities

7) Kindly state how you agree or disagree with statements concerning patients' awareness of rights and responsibilities in citizen service charter based on a 5-point Likert scale where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree.

	1	2	3	4	5
Patients are well informed about their rights as stated in the citizen service charter.	[ ]	[ ]	[ ]	[ ]	[ ]
Awareness of patients' rights contributes to better quality and timely service delivery in the hospital.	[ ]	[ ]	[ ]	[ ]	[ ]
Patients clearly understand their responsibilities in seeking and receiving healthcare services at Mbagathi Hospital.	[ ]	[ ]	[ ]	[ ]	[ ]
Patients fulfill their responsibilities (like providing accurate information, following hospital procedures) to make service delivery more efficient.	[ ]	[ ]	[ ]	[ ]	[ ]

Patient awareness of rights and responsibilities is essential for improving trust and satisfaction with hospital services.	[ ]	[ ]	[ ]	[ ]	[ ]
Lack of awareness of rights and responsibilities negatively affects the quality-of-service delivery.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital effectively uses strategies such as posters to create awareness of patients' rights and responsibilities.	[ ]	[ ]	[ ]	[ ]	[ ]
There are continuous education programs to enhance patients' understanding of their rights and responsibilities.	[ ]	[ ]	[ ]	[ ]	[ ]

Part F: Health Service Delivery

8) Kindly state how you agree or disagree with statements concerning health service delivery based on a 5-point Likert scale where 1 is strongly disagree, 2 is disagree, 3 is neutral, 4 is agree and 5 is strongly agree.

	1	2	3	4	5
I am satisfied with the overall services provided at Mbagathi Hospital.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital staff treat patients with respect and courtesy.	[ ]	[ ]	[ ]	[ ]	[ ]
It is easy to access medical services at Mbagathi Hospital without unnecessary delays.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital's location and operating hours make it convenient for patients to seek care.	[ ]	[ ]	[ ]	[ ]	[ ]
The healthcare professionals at Mbagathi Hospital provide accurate diagnosis and appropriate treatment.	[ ]	[ ]	[ ]	[ ]	[ ]

The hospital maintains high standards of cleanliness and hygiene in all service areas.	[ ]	[ ]	[ ]	[ ]	[ ]
The hospital staff attend to patients promptly and minimize waiting times.	[ ]	[ ]	[ ]	[ ]	[ ]
Administrative processes such as registration and billing are handled quickly and effectively.	[ ]	[ ]	[ ]	[ ]	[ ]

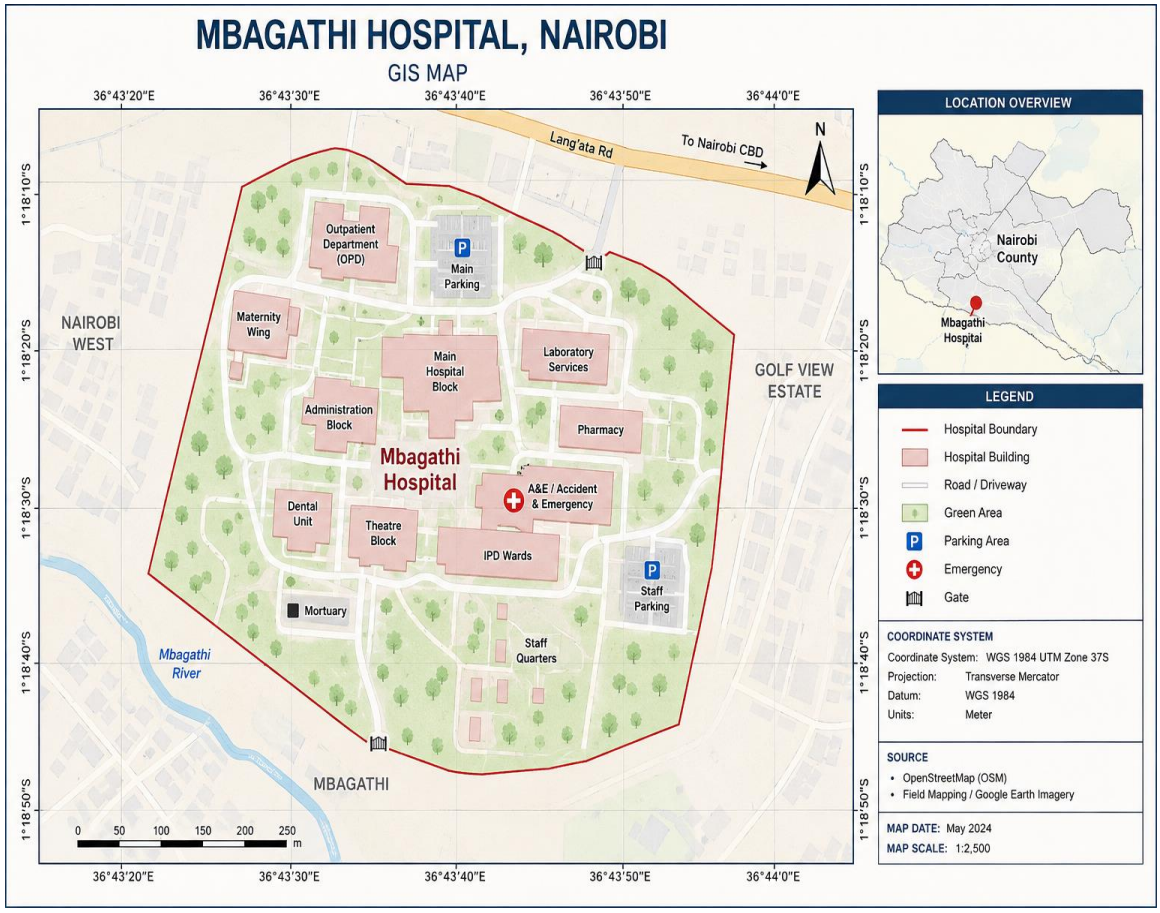
Thank you for Participating

Appendix III: Key Informant Interviews

The purpose of this interview is to collect data in relation to **Assessment of Citizen Service Charter and its Implications for Health Service Delivery at Mbagathi Hospital**. The interview will take only 30 minutes. Kindly answer the questions to the best of your knowledge.

1) What is the current status of health service delivery in Mbagathi Hospital? Elaborate
2) How is citizen service charter implemented in the hospital? Elaborate
3) In which ways do service standards in citizen service charter affect health service delivery in Mbagathi Hospital?
4) Does procedural clarity in citizen service charter affect health service delivery in Mbagathi Hospital? If yes, kindly elaborate how.
5) In which ways do grievance redressal mechanisms affect health service delivery in Mbagathi Hospital?
6) Does patients' awareness of rights and responsibilities affect health service delivery in Mbagathi Hospital? In which ways?

Appendix IV: Map of the Study Area



Source: GIS MAP (2026)

Appendix V: Letter of Introduction from ANU

AFRICA NAZARENE
UNIVERSITY

P.O.Box: 53067 – 00200
Nairobi, Kenya.
Tel: 020 252 7170/1 – 5
Email: vc@anu.ac.ke
www.anu.ac.ke

27th March, 2026

Dr. David Ngigi
Ag. Director General /CEO
National Commission for Science & Technology
And Innovation (NACOSTI)
Off Waiyaki Way, Upper Kabete
P. O. Box 30623 -00100
Nairobi, KENYA

Dear Sir,

RE: RESEARCH PERMIT: Choppy Odunga (Student ID# 19j03dmgp031)

This is to confirm that Choppy Odunga (Student ID#19j03dmgp031) is a bona fide Master of Science student at Africa Nazarene University (ANU), School of Humanities and Social Sciences. (SHSS). He is pursuing Master of Science in Governance and Peace Studies, a program that entails both coursework and thesis.

Choppy successfully completed his coursework and defended his thesis proposal entitled:

"Assessment of Citizen Service Charter and its implications for Health Service Delivery at Mbagathi Hospital".

We kindly request that he be granted the necessary research permit to facilitate data collection and the successful completion of his thesis. Any assistance provided to him in this regard will be highly appreciated.

Faithfully,

Prof. Simon Obwatho
Deputy Vice Chancellor – Academic & Student Affairs

Appendix VI: Research Permit from NACOSTI

REPUBLIC OF KENYA

NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Ref No: **302993**

Date of Issue: **15/April/2026**

RESEARCH LICENSE

This is to Certify that Mr.. CHOPPY NDEDAH ODUNGA of Africa Nazarene University, has been licensed to conduct research as per the provision of the Science, Technology and Innovation Act, 2013 (Rev.2014) in Nairobi on the topic: ASSESSMENT OF CITIZEN SERVICE CHARTER AND ITS IMPLICATIONS ON HEALTH SERVICE DELIVERY AT MBAGATHI HOSPITAL for the period ending : 15/April/2027.

License No: **NACOSTI/P/26/4187708**

302993

Applicant Identification Number

Ag. Director General
NATIONAL COMMISSION FOR SCIENCE,TECHNOLOGY & INNOVATION

Verification QR Code

NOTE: This is a computer generated License. To verify the authenticity of this document, Scan the QR Code using QR scanner application.

See overleaf for conditions

Appendix VII: Research Permit from NAIROBI CITY COUNTY

NAIROBI CITY COUNTY
www.nairobi.go.ke

HEALTH, WELLNESS AND NUTRITION
Office of the County Chief Officer - Medical Services

INTERNAL MEMO

TO: CHIEF EXECUTIVE OFFICER-MBAGATHI HOSPITAL

REF: IIA/1/4/CONF/VOL VII/208/2026

DATE: 14TH APRIL 2026

RE: AUTHORITY TO CONDUCT RESEARCH-CHOPPY NDEDAH ODUNGA

Authority is hereby granted to the above-mentioned person who is a student at Africa Nazarene University pursuing a Master of Science programme in Governance, Peace and Security to conduct research at the facility. The student is conducting a research on the ***'Assessment of the Influence of Citizen Service Charter and its Implications for Health Service Delivery at Mbagathi Hospital'*** as part of the requirements for the award of the degree.
This authority therefore allows him to collect data from staff and outpatients between 15th – 22nd April 2026. Your cooperation and facilitation in this regard will be highly appreciated.

PETER SANDE OYOLO
CHIEF OFFICER – MEDICAL FACILITIES

LET'S MAKE **NAIROBI** WORK