

## Examining the Mediating Role of Regulatory Governance on both Decentralization and Service Quality in Kitagata General Hospital, Sheema District Western Uganda

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### ABSTRACT

This paper aimed to investigate the moderating effect of regulatory governance in the relationship between decentralization and service quality at Kitagata General Hospital in Sheema District, Western Uganda. The specific objectives were to establish the link between decentralization and service quality, to assess the relationship between regulatory governance and service quality, and to assess the moderating role of regulatory governance. The hypotheses were: The null hypotheses that were formulated for this study include; (HO<sub>1</sub>) There is no significant relationship between decentralization and service quality; (HO<sub>2</sub>) There is no significant relationship between regulatory governance and service quality; and (HO<sub>3</sub>) Regulatory governance does not moderate the relationship between decentralization and service quality. The research framework for the study was a principal-agent theory, the research design used was a descriptive survey and data was collected from 41 respondents using closed-ended questions. The chi-square test was used in data analysis of the results. The study recorded a p-value of 0.017 for HO<sub>1</sub> therefore rejecting it and showing that there is a relationship between decentralization and service quality. Model HO<sub>2</sub> was accepted with a significance of 0.148 while model HO<sub>3</sub> was rejected with a significance of 0.037 showing that there was a relationship between the three variables. Therefore, this paper has shown that decentralization enhances service quality and that the role of regulatory governance is less critical. The recommendations include the organization of training in the area of health care management, the provision of follow-up support, and the involvement of the stakeholders in the process of decentralization for enhancement of the service delivery. Thus, it is imperative to create platforms that can be used to solicit feedback from the communities.

**Keywords:** Decentralization, Regulatory governance, Service quality, Kitagata, Sheema District; Uganda.

### INTRODUCTION

Kitagata General Hospital was established in Western Uganda, now Sheema district. The hospital is about 62 kilometers Southwest of Mbarara Regional Referral Hospital. This hospital is about 111 kilometers North of Kabale Regional Referral Hospital in Kabale District, [1]. The above development was a result of the government policy of decentralization drive of transferring the political, administrative, and fiscal powers from regional referral hospitals such as Mbarara and Kabale to improve service delivery in the healthcare of the sub-divisions at the district level, [2]. This drive was indeed a success because the health-related service delivery auxiliaries such as drugs, medicines, and handling of complex diseases such as COVID-19, and AIDS have been achieved by the fact that the general hospitals are following instructions from the regional referral hospitals.

The World Bank considers the cardinal factors that improve service quality among which are the regulatory frameworks that helped the developed world build strong institutions that comprised of voice and accountability, legal frameworks, and government effectiveness, [3, 4, 5]. Every organization has been forced to evolve by the scientific revolution to improve quality, especially in the healthcare sector in both the developed and the developing world, [6, 7]. Several countries on the African continent implemented decentralization reforms to enhance and enhance public service provision. For instance, in Nigeria, the local government systems were decentralized purposely to bring the government closer to the people and foster grassroots development. Similarly, Kenya introduced devolution as part of the 2010 constitutional changes of transferring power and resources to 47 county governments to improve public service among government institutions, [8].

Besides that, the government of Uganda decided that Uganda enquires not only about service delivery but also to take service quality into consideration. This drive looks at improving the healthcare standards at the district levels. In Uganda, [9, 10]. The World Bank also postulated that the relationship between decentralization and service quality can be tilted well with the help of regulatory governance playing the intermediary role, [11, 10]. The World Bank stated clearly that service quality cannot improve in the healthcare sector because the staff hardly work out of a good heart. The staff needs to be inspired by the invisible hand of regulatory governance that the public might not pay attention to, [11, 10]. This study therefore aims at identifying and analyzing the major factors hindering improved service quality in Kitagata General in Sheema district. The challenges impede the improvement of service quality in the healthcare sector of Sheema District. Despite the implementation of decentralization policies aimed at transferring political, administrative, and fiscal powers from regional referral hospitals such as Kabale and Mbarara, to general hospitals such as Kitagata General Hospital in Sheema District, service quality remains inadequate, [1]. The service quality levels tend to reduce the more the hospital is situated in rural settings. The government papers such as the Local Government Act of 1997 and the Local Government Annual Performance Reports documents and service provision challenges provide a comprehensive view of the existing frameworks. by evaluating the patient's satisfaction with the service quality levels of the healthcare sector of the Western region, people access the services but the quality is not good enough, [4, 1, 10]. Therefore, this study intends to evaluate the role of regulatory governance in mediating the relationship between decentralization and service quality in Kitagata General Hospital.

#### **Purpose of the Study.**

The purpose of the study was to examine the mediating role of Regulatory governance on both Decentralization and Service Quality in Kitagata General Hospital, Sheema District Western Uganda.

#### **Specific Objectives of the Study**

- (1) To determine the relationship between decentralization and service quality in Kitagata General Hospital.
- (2) To analyze the relationship between regulatory governance and service quality in Kitagata General Hospital.
- (3) To examine the mediation role of regulatory governance on both decentralization and service quality in Kitagata General Hospital.

#### **Hypothesis of the Study.**

HO<sub>1</sub>: There is no significant relationship between decentralization and service quality in Kitagata General Hospital.

HO<sub>2</sub>: There is no significant relationship between regulatory governance and service quality in Kitagata General Hospital.

HO<sub>3</sub>: There is no significant mediation role of regulatory governance on both decentralization and service quality in Kitagata General Hospital.

#### **Significance of the Study.**

This study explained and examined how regulatory mediates the relationship between decentralization and service quality in Kitagata General Hospital. The study shall help provide solutions for how to manage a public hospital at a district level. The findings shall be helpful to other researchers having other studies having related variables such as regulatory governance both decentralization and service quality by enriching them with variable literature. The other important aspect is to use the study as a testing ground for improving service quality in Kitagata General Hospital as a platform for the millennium development goals.

#### **The Theory of the Study.**

##### **The principal-Agency theory**

The study was guided by the principal-agency theory that was propounded by Jansen and Mackling in 1976. The principal-agency theory is considered the most dominant theory of governance practices in the whole world. The theory aims at maximizing the management results in line with the organizational objectives through monitoring and evaluation, especially by the quality department or enforcement, [12]. The theory advocates for the fact that principals are likely to achieve Their intended outcomes after the agents provide a classification of the job programs and objectives required to be implemented for goals to be achieved, (Roach).

## **The Scope of the Study.**

### **Content Scope**

The study was driven by the independent variable decentralization, the mediator variable regulatory governance, and dependent service quality. Decentralization has three dimensions namely: fiscal, administrative, and political. Regulatory governance has constructs: voice and accountability, government effectiveness, regulatory quality, rule of law, personal employment rights, institutional logic, and E-governance. Service quality has the following dimensions namely: safety, effectiveness, efficiency, access, equity, technical competency, patient and family healthcare, interpersonal relations, and choice.

### **Geographical Scope**

The study was conducted in Kitagata General Hospital in Sheema District in Western Uganda. The respondents were the staff from different departments in Kitagata General Hospital. The workers included; Doctors, nurses, clinical officers, pharmacists, laboratory technicians, accountants, administrators, psychiatrists, and others.

### **Scope**

The time frame for the study ranges from 2016 to 2022, this is the time the Ministry of Health of the Republic of Uganda made it clear that research must intensify on service quality in Uganda. The government emphasized that research must be done purposely to improve the whole healthcare system of the country.

### **Review of Related Literature**

The study reviewed literature on three aspects namely: the relationship between decentralization and service quality, the relationship between regulatory governance and service quality, and the mediation role of regulatory governance in both decentralization and service.

#### **The Relationship Between Decentralization and Service Quality in The Healthcare Sector**

Decentralization is a multifaceted process that encompasses three major dimensions namely: political, administrative, and fiscal, [13]. Service Quality Comprises dimensions such as; safety, effectiveness, efficiency, access, equity, technical competency, patient and family healthcare, interpersonal relations, choice, culture, and time. Scholars across the World emphasized the need to look at decentralization in a multi-dimensional way as stated by Cheema and Randonelli their importance of working in a structural form to improve service quality, [14]. The central authorities relinquish powers responsibly in the form of fiscal, administrative, and political to the sub-units such as districts to manage public institutions such as hospitals for public service, [11, 16, 10]. The implementation of decentralization and amalgamation of reforms has been hailed as a means to improve on efficiency and effectiveness of public service. Furthermore, some other scholars from East Africa have examined decentralization in the region and its implication to service quality and citizen participation as the most pertinent issue, [17, 10]. Similarly, other researchers explored the role of decentralization in fostering community involvement and collaboration in healthcare decision-making processes, [18, 10]. Moreover, decentralization has been looked at as the engine behind the success of public healthcare and highlighted the importance of customization of the practice for better service provision to fit the local context, [17, 10]. There is a gap in research created in the context of other parts of the world and Kitagata General Hospital found in western Uganda that the study is intending to unearth that shall bring a far-reaching effect on service quality in the country.

#### **The Relationship Between Regulatory Governance and Service Quality in The Healthcare Sector**

Well, observed by researchers that decentralization is paramount in improving service quality in the healthcare sector, however, other scholars and research powerhouses consider regulatory governance as another factor, [11, 10]. Regulatory governance has constructs: voice and accountability, government effectiveness, regulatory quality, rule of law, personal employment rights, institutional logic, and E-governance, [10]. Proponents of decentralization suggest that regulation governance is essential in improving service quality by tackling challenges that later sanity is realized in health-related organizations both in developing and developed World. There are critics of decentralization as a sole concept to improve service quality. However, other auxiliaries tend to improve service quality in the healthcare sector such as citizen participation and enhanced accountability, [19, 10]. Regulatory mechanism examines local government roles, accountability apparatuses, citizenry participation, and challenges and opportunities within Uganda's social-economic and political spectrum, [17, 10]. Regulatory Governance is a popular trend in modern management and planning because it brings a lot of stakeholder ideas that promote service quality and development in society. This involves linking with the hard-to-reach individuals such as the disadvantaged to the point that they cannot express themselves, [20]. Therefore, the current study intends to study the seven dimensions of regulatory governance cautiously to improve service quality in the healthcare sector of Sheema General Hospital.

#### **The Mediation Role of Regulatory Governance Both Decentralization and Service in The Healthcare Sector.**

Regulatory governance is an apparatus that strikes a balance between decentralization and service quality in the healthcare sector. Regulatory governance has constructs: voice and accountability, government effectiveness, regulatory quality, rule of law, personal employment rights, institutional logic, and E-governance, [10]. Regulatory governance was introduced to mediate between decentralization and service quality in public institutions. There

shall be less achievement in public service delivery without involving service regulatory governance in public service. The functions of management operate very well when the imperceptible hand of regulatory governance is in practice. The smooth running of public institutions requires the formidable application of regulatory governance because this brings about normative standards in the healthcare sector, [10]. Well, regulatory governance was viewed as having a negative impact if vices such as nepotism, lawlessness, corruption, and lack of accountability were allowed to thrive in the community of African societies. However, regulatory governance which is an enlightening and coercive instrument is allowed to flourish through transparency, accountability, and public participation this adds a significant impact on the efforts of the policymakers and implementers that eventually leads to improved service quality in public institutions in Africa, [21, 10]. Besides that, regulatory governance is viewed as a key concept derived from public management that aims to integrate government and managerial sets of stakeholders on matters that concern service quality. This eventually impacts the living standards of the citizens, [22, 10]. The previous scholars considered a time of 2023 in places of Mbarara and Kasese, however, the current study took the case in Kitagata General Hospital in Sheema district.

## **METHODOLOGY**

### **Research Design**

The research design is the plan of the methods and techniques to be adopted for the collection and analysis of data required to answer the questions or hypothesis, [23]. The study adopted the descriptive survey design for fact-finding inquiries and its purpose was to describe the state of affairs as they exist in the present. The researcher intended to describe the problem in relation to the study variables of decentralization, regulatory governance, and service quality.

### **Target Population**

The target population denotes the people, service elements, events, groups of things or households that are being investigated, [24]. The target population of the study was the health workers in Kitagata General Hospital. The health workers included respondents such as Nurses, clinicians, doctors, administrators, lab technicians, accountants, and psychiatrists, [10].

### **Sample Size and Sampling Technique**

The study suggests that if more than 10% of the general population is accessed then the study is worthy to proceed with, [25]. The study got information from 41 respondents from Kitagata General Hospital in Sheema district. The study adopted the simple random technique that gives chance to ready and available respondents to respondents. The technique produced results that meet the standard measure and high level of legitimacy of the whole study [26].

### **Data Collection Methods and Instruments**

The researcher collected data using closed-ended questions to access information on decentralization, service quality, and regulatory governance in Kitagata General Hospital. The questionnaire was designed to collect quantitative data.

### **Data Analysis**

The study hypothesis: there is a relationship between decentralization and service quality in Kitagata General Hospital, there is a relationship between regulatory governance and service quality in Kitagata General Hospital and there is a mediation role of regulatory governance on both decentralization and service quality in Kitagata general hospital. This statistical tool was used to analyze the numerical data obtained from the field. The hypotheses results were analyzed and reached the determination of the status using the statistical tool called Chi-square [27].

## **RESULTS**

### **The Relationship Between Decentralization and Service Quality in Kitagata General Hospital**

This section examines the relationship between decentralization and service quality in Kitagata General Hospital. By analyzing key performance indicators and gathering feedback from the respondents this study aimed to assess whether decentralization affects service quality in Kitagata General Hospital. The findings here provide a comprehensive overview of the relationship between decentralization and service quality in Kitagata General Hospital.

**Table 1: Responses from the respondents about the relationship between decentralization and service quality in Kitagata General Hospital**

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.680E2 <sup>a</sup>	221	.017
Likelihood Ratio	138.345	221	1.000
Linear-by-Linear Association	17.204	1	.000
N of Valid Cases	41		

a. 252 cells (100.0%) have an expected count of less than 5. The minimum expected count is .02.

Using the Chi-Square test as shown in the table above,  $p=0.017$ ,  $p \leq 0.05$ : The null hypothesis ( $H_{01}$ ) was rejected, indicating that there is a statistically significant association between the two categorical variables. Implying that there is a significant positive effect of decentralization on service quality in Kitagata General Hospital. Responses from the interview guide one of the health workers noted that decentralization allows for quicker decision-making processes. When authority is delegated to local managers, they can respond more swiftly to emerging health issues or patient needs without waiting for approvals from higher authorities. This agility can lead to better patient outcomes as services can be tailored more closely to community requirements. Another health worker from the interview guide expressed that decentralized structures often incorporate better feedback mechanisms from patients and community members regarding service delivery. This feedback loop enables continuous improvement based on real-time data about patient satisfaction and service effectiveness.

**Table 2: The Relationship Between Regulatory Governance and Service Quality in Kitagata General Hospital**

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	3.142E2 <sup>a</sup>	289	.148
Likelihood Ratio	151.323	289	1.000
Linear-by-Linear Association	8.219	1	.004
N of Valid Cases	41		

a. 324 cells (100.0%) have an expected count of less than 5. The minimum expected count is .02.

Using the Chi-Square test as shown in the table above,  $p=0.148$ ,  $p > 0.05$ : Null hypothesis ( $H_{02}$ ) was accepted. Indicating that there is no statistically significant association between the two categorical variables. Implying that there is no significant relationship between regulatory governance and service quality in Kitagata General Hospital. Responses from one of the administrators showed that “Sometimes, there is a lack of resources to fully comply with all regulations. “We face bureaucratic hurdles that delay the implementation of necessary changes.” These challenges can affect the overall quality of services provided at the hospital. Another respondent had to say that regulatory governance directly impacts service quality at Kitagata General Hospital. Possible responses may include: “When regulations are followed, we see a noticeable improvement in patient outcomes.” “Compliance with health standards ensures that we maintain high levels of hygiene and safety.”

**Table 3: The mediation role of regulatory governance on both decentralization and service quality in Kitagata General Hospital**

Chi-Square Tests			
	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	2.601E2 <sup>a</sup>	221	.037
Likelihood Ratio	124.759	221	1.000
Linear-by-Linear Association	9.705	1	.002
N of Valid Cases	41		

a. 252 cells (100.0%) have an expected count of less than 5. The minimum expected count is .02.

Using the Chi-Square test as shown in the table above,  $p=0.037$ ,  $p \leq 0.05$ : The null hypothesis ( $H_{03}$ ) was rejected, indicating that there is a statistically significant association between the three categorical variables. Implying that there is a significant positive effect of regulatory governance on both decentralization and service quality in Kitagata

General Hospital. From the interview guide, one of the respondents stated that the mediation role of regulatory governance at Kitagata General Hospital is vital for harmonizing decentralization efforts with the overarching goal of maintaining high-quality healthcare services. By establishing clear guidelines, promoting accountability, engaging stakeholders, and monitoring outcomes effectively, regulatory governance ensures that both decentralization initiatives are successful while preserving the integrity of service quality.

### DISCUSSION OF FINDINGS

The study was focused on the mediating role of Regulatory governance on both Decentralization and Service Quality in Kitagata General Hospital, Sheema District Western Uganda. The study findings indicate that Regulatory governance has an impact on both Decentralization and Service Quality in Kitagata General Hospital, Sheema District Western Uganda. Using the Chi-Square test from the study findings,  $p=0.017$ ,  $p \leq 0.05$ : The null hypothesis ( $H_{0_1}$ ) was rejected, indicating that there is a statistically significant association between the two categorical variables. Implying that there is a significant positive effect of decentralization on service quality in Kitagata General Hospital. This can be supplemented by [28, 10] who observed that the implementation of decentralization and amalgamation of reforms has been hailed as a means to improve on efficiency and effectiveness of public service. Furthermore, some other scholars from East Africa have examined decentralization in the region and its implication to service quality and citizen participation as the most pertinent issues.

Using the Chi-Square test as shown from the study findings,  $p=0.148$ ,  $p > 0.05$ : Null hypothesis ( $H_{0_2}$ ) was accepted. Indicating that there is no statistically significant association between the two categorical variables. Implying that there is no significant relationship between regulatory governance and service quality in Kitagata General Hospital. However, this study disagrees with the finding of [20] who believed that Regulatory Governance is a popular trend in modern management and planning because it brings a lot of stakeholder ideas that promote service quality and development in society. This involves linking with the hard-to-reach individuals such as the disadvantaged to the point that they cannot express themselves.

Using the Chi-Square test as shown from the study findings,  $p=0.037$ ,  $p \leq 0.05$ : The null hypothesis ( $H_{0_3}$ ) was rejected, indicating that there is a statistically significant association between the three categorical variables. Implying that there is a significant positive effect of regulatory governance on both decentralization and service quality in Kitagata General Hospital. The study agrees with the findings of [10] who noted that Regulatory governance is an apparatus that strikes a balance between decentralization and service quality in the healthcare sector. Regulatory governance has constructs: voice and accountability, government effectiveness, regulatory quality, rule of law, personal employment rights, institutional logic, and E-governance.

### CONCLUSION

The study revealed that there is a significant positive effect of decentralization on service quality in Kitagata General Hospital. The study established that there is no significant relationship between regulatory governance and service quality in Kitagata general hospital. Suggesting that there is not enough evidence to claim an association that exists. The study noted that there is a significant positive effect of regulatory governance on both decentralization and service quality in Kitagata General Hospital.

### Recommendation

Recommendations for the Mediation Role of Regulatory Governance on Decentralization and Service Quality in Kitagata General Hospital include;

- To enhance the mediation role of regulatory governance, it is crucial to establish a robust regulatory framework that clearly defines roles, responsibilities, and accountability mechanisms for all stakeholders involved in healthcare delivery. This includes:
- Developing comprehensive policies that guide decentralization efforts while ensuring compliance with national health standards.
- Implementing regular audits and evaluations of decentralized services to ensure they meet quality benchmarks.
- Investing in training programs for local health administrators is essential to empower them with the necessary skills and knowledge to manage decentralized services effectively. Recommendations include:
- Conducting workshops and seminars focused on best practices in healthcare management, financial oversight, and service delivery.
- Providing ongoing mentorship and support from experienced professionals in the healthcare sector.
- Engaging various stakeholders—including community members, healthcare providers, and policymakers—is vital for improving service quality through decentralization. Strategies should involve:
- Establishing forums or committees where stakeholders can voice their concerns, share feedback, and contribute to decision-making processes.

- Promoting transparency by disseminating information about hospital performance metrics and service quality indicators to the public.
- To motivate healthcare providers at Kitagata General Hospital towards improved service quality, performance-based incentives should be introduced. Linking funding or bonuses to specific performance metrics such as patient satisfaction scores, treatment outcomes, or efficiency measures.
- Leveraging communication technology can significantly enhance the monitoring and evaluation processes associated with decentralized services. Recommendations include:
- Collaboration between national, regional, and local government levels is critical for effective regulatory governance in a decentralized system.

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