Organization Culture And Resource Allocation On The Performance Of Public Health Facilities In Taita Taveta County, Kenya

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ABSTRACT
Healthcare delivery in resource-limited settings faces significant organizational dynamics and resource management challenges. Recognizing the difficulties in healthcare for resource-limited regions, the study focused on determining which elements in an organization play a significant role in deciding how services are provided. The study focused on exploring role culture, task culture, how human resources are distributed, and the number of financial resources any activity needs. A cross-sectional survey collected information from 61 managers working in 75 public health facilities. It was confirmed that task culture contributed positively and significantly to organizational performance, showing that teamwork, joint effort, and team-based choices are important factors. Role culture did not significantly affect performance, revealing that strict rules between roles are insufficient to boost performance. The best predictor was how staff were assigned, which strongly underlines that having sufficient staff with proper training and pay greatly improves healthcare outcomes. The combined effect of cultural and financial variables explained over 71% of the variation in performance and showed that the two are essential for success. The study points out that to boost the performance of public health facilities in Taita Taveta, task culture, human resource management, and careful financial planning should be used. The results suggest helpful steps for decision-makers and health managers who face resource limitations.

1.0 Introduction

The performance of public health facilities is a significant determiner of the quality of care offered to the population (Mohanan et al., 2016). Public health facilities are essential to healthcare delivery, especially in areas lacking access to private medical care providers. Public health facilities are the backbone of healthcare systems, and provide preventive non-infectious diseases. The overall efficiency of public health facilities in addressing these demands is highly dependent on various factors, including the availability of resources, quality of management practices, and organizational culture of such institutions.

Organizational culture refers to the commonly shared values, beliefs, and practices that affect how members relate and make decisions in an organization. Resource allocation is another important determinant of healthcare performance and relates to how an organization shares financial capital, human resources, and infrastructure, to fulfill its strategic goals. In healthcare provision, allocating resources such as staff and daily materials is critical in providing quality services (Otieno et al., 2018). Cultural factors and resource allocation immensely affect organizations' performance, especially public health facilities. Shared values and behaviors, being a part of organizational culture, are a determining factor in shaping the utilization and performance of healthcare services (Kargas & Varoutas, 2015). Similarly, the distribution of resources, including human and financial capital, directly affects the ability of such organizations to deliver quality care (Kissi & Baiden, 2019).

Kargas & Varoutas, (2015) suggest that organizational culture has three layers: Artifacts, espoused values, and basic assumptions. These elements outline how people in an organization relate to each other, make decisions and solve problems. A positive culture in the healthcare environment is associated with enhanced staff morale and positive patient outcomes (Zhang et al., 2023). On the other hand, a disorderly organizational culture undermines the performance of the employees and, consequently, the quality of healthcare services provided.

In Taita Taveta County, the existing organizational culture in the public health facilities had been cited as a stumbling block to better healthcare provision.
Resource allocation is critical in attaining organizational objectives, especially where resources are scarce, as is the case at public health facilities in Kenya. Resource allocation involves the strategic dispensation of financial, human, and physical resources to enable the organization to deliver services as efficiently as it can achieve its goals (Kissi & Baiden, 2019). In healthcare facilities, this entails the provision of money to purchase medical commodities, hire proficient healthcare workers, and support the employees through training and development programs (Mohanan et al., 2016).

2.0 Literature review

This section presents theories and previous literature on the area of organizational culture, resource allocation, and performance.

2.1 Theoretical Literature Review

The study utilised Hofstede's Cultural Dimensions Theory, Schein's Model of Organizational Culture, and the Resource-Based View (RBV) Theory. These theories provide insights into how cultural dynamics and resource management affect organizational behavior and performance in healthcare settings.

2.1.1 Cultural Dimensions Theory

Hofstede identifies six cultural dimensions: power distance, individualism versus collectivism, uncertainty avoidance, long-term versus short-term orientation, and indulgence versus restraint (Migon Favaretto et al., 2019). These dimensions help understand organizational behavior, particularly in diverse cultural settings such as healthcare. One of the most critical dimensions of the organizational culture within the healthcare field is power distance (PDI), which shows to what extent the less powerful members of organizations believe and accept an unequal distribution of power. In greater power distance cultures, there is a deeper acceptance of hierarchies, which can determine communication and decision-making in healthcare organizations. (Kostova et al., 2017).

2.1.2 Schein's Model of Organizational Culture

The theory postulates that organizational culture is made up of three levels that are interconnected and form the behavior and performance of employees in an organization. Artefacts and behaviours is one of the layers. It is the most visible layer that encompasses the physical environment of the healthcare facilities and observable behaviours within the hospital like how the staff communicate, how they dress and their interactions with patients. Espoused values is the other level and incorporates the goals and philosophies an organisation possesses and follows. These are the mission, principles, goals, values and strategic plans. The final level is the basic underlying assumptions which are the deepest and most powerful level of culture, consisting of unconscious, taken-for-granted beliefs, perceptions, and feelings that guide behaviour. By understanding these three layers, organizations have a deeper understanding of their own culture and identify areas where change is needed to align values and behaviors for improved performance (Williams, 2022).

2.1.3 Resource-Based View (RBV) Theory

The Resource-Based View (RBV) Theory, which can be traced back to Penrose's (1959) suggests that the ability of an organization to sustain competitive advantage depends on the effective use of the organization's unique and valuable resources. RBV implies that human capital, physical assets, and organizational capabilities are essential for organizations aiming to accomplish goals and enhance performance. In healthcare, using RBV highlights the role of human capital, technology, and financial capital to ensure quality healthcare delivery. According to the research done by Barney (1991), firms with valuable, rare, inimitable, and non-substitutable resources are likely to succeed. According to the study by Nasson, 2018, the results revealed that skilled and well-trained personnel are a useful resource to healthcare organizations, and they can immeasurably improve the organization's level of care and performance.

2.2 Empirical Review

This section examines works done to explore the relationship between culture, resources, and performance in healthcare settings.

2.2.1 Role Culture and Performance

Korma (2022) focused on the role played by the organizational culture in performance within the educational institutions of Ethiopia. The study revealed that organizational learning, direction in strategy, and team orientation significantly influenced performance, demonstrating the significance of the cultural factors in successful implementation. Based on this finding, the study has the following hypothesis.

H_0: Role culture does not affect organizational performance.

2.2.2 Task Culture and Performance

Odhiambo & Munyoka (2016) investigated the importance of organizational culture in Kenyan microfinance institutions. They concluded that organizational culture in the form of a strong task culture was necessary for enhancing competitive performance. Ng'ang'a & Nyongesa (2022) prioritized the use of resources in learning institutions and found out that effective task culture contributes to firm's success. Based on this finding, the study has the following hypothesis.

H_0: Task culture does not affect organizational performance.

2.2.3 Human Resource Allocation and Performance

Hee (2018) ascertained that, in manufacturing, performance appraisal and training were key to employee enhancement. Dwivedula (2019) state that proper human resource allocation is essential for prompting innovation and competitiveness. In healthcare, human resources determine success because skilled and well-trained human resources directly impact patient care and outcomes in a given organization (Ali & Ogolla, 2022). Effective human resource allocation in public facilities is necessary when healthcare service demands are high and the workforce is low. Studies confirm that healthcare organizations with optimally distributed human resources, ample staff training, and development often produce better performance (Kwizera, 2018; Sopha & Asih, 2018). Based on this finding, the study has the following hypothesis.

H_0: Human resource allocation does not affect organizational performance.

2.2.4 Financial Resource Allocation and Performance

Alternative resource allocation in organizational performance has been covered mainly in healthcare literature. In a study conducted by Nyakure (2022), public health facilities in Mombasa County were analyzed, and it was discovered that the effective allocation of resources, both monetary and otherwise, had huge effects on the delivery of services. Based on this finding, the study has the following hypothesis.

H_0: Financial resource allocation does not affect organizational performance.

3.0 Research Methodology

The study utilised a descriptive cross-sectional survey. This design was selected because it allowed the researcher to obtain information from participants on the present condition of organizational culture, resource allocation practices, and public health facilities' performance. The population of interest for this study included all the 75 public health facilities in Taita Taveta County, hence the study was a census. The research adopted a self-administered questionnaire as the primary data collection tool. The questionnaire had closed-ended queries to eliminate ambiguity and ensure consistent responses by respondents, which is very important for data analysis to be done accurately (Mugenda & Mugenda, 2019). Pretesting was carried out before gathering the primary data. The validity of the instrument was guaranteed using face and content validity where the views of academic individuals of institutions in business, economics, and public health were obtained. These specialists examined the questionnaire to make the questions appropriate for the purpose of the study. The reliability of the questionnaire was checked using Cronbach's alpha with a cut-off of Cronbach's alpha coefficient of 0.70 being acceptable. The data obtained from the questionnaires was processed and analyzed using the Statistical Package for Social Sciences (SPSS) software. Both descriptive and inferential statistics were used in data analysis. Frequencies, means, and percentages were used as descriptive statistics methods while multiple regression was used as the inferential analysis tool.

The regression model used is:

$Y = \beta_0 + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4 + e$

Where: Y- Organisational Performance, X_1 -Role Culture, X_2 - Task Culture, X_3 - Financial Resources, X_4 - Human Resources, β0 is constant, β1, β2, β3, and β4 are the coefficients of the independent variable and e is the error term. Before the data analysis several diagnostic tests were performed to test the data accuracy.

4.0 Findings and Discussions

74 questionnaires were distributed to the top management levels in 74 hospitals in Taita Taveta county. 61 questionnaires were duly filled out giving a response rate of 82.4%, considered sufficient for the study as argued by Mugenda and Mugenda (2003) who established that a response rate of 50% and above was deemed okay for the study. The finding is presented in Figure 4.1.

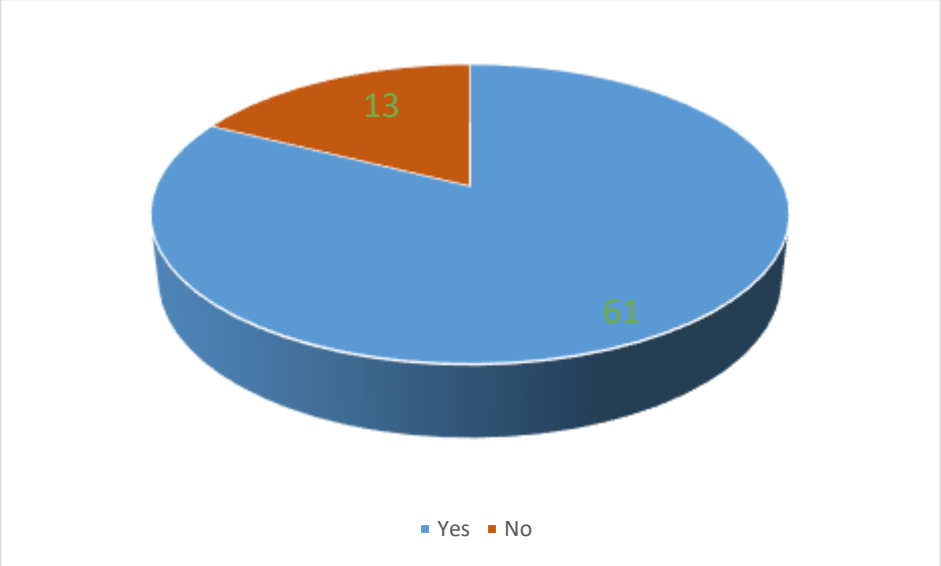

Figure Error! No text of specified style in document..**1: Response Rate**

4.2 Demographic Information

The study sought to establish the characteristics of the study population as revealed in the subsequent section.

4.2.1 Gender Distribution

The gender distribution of the respondents who completed the research questionnaire shows a fairly balanced representation, with 32 females (52.5%) and 29 males (47.5%) out of 61 participants. This near-equal participation suggests that the study captured perspectives from both genders, enhancing the reliability and inclusivity of the findings.

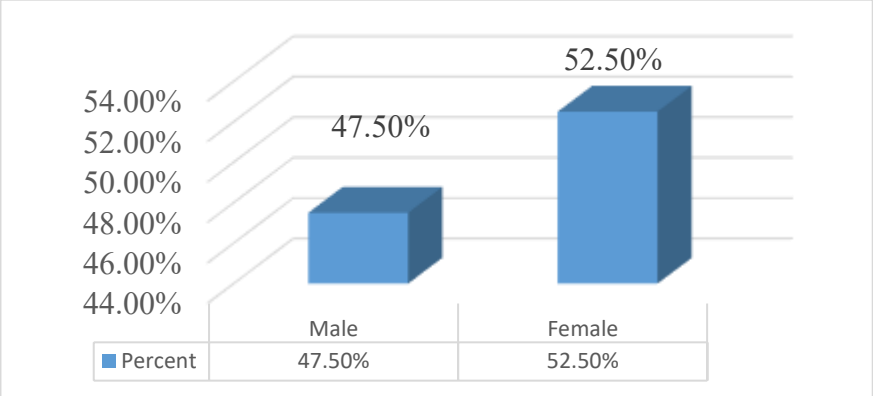

Figure Error! No text of specified style in document..**2: Gender Distribution**

4.2.2 Educational Background

A significant majority of the participants hold at least a bachelor's degree (42.6%), while 39.3% have a diploma, demonstrating that most respondents possess substantial academic knowledge. Furthermore, 14.8% of the respondents have attained a master's degree, and 3.3% hold a PhD, reinforcing the presence of highly learned individuals in the study. This distribution suggests that individuals responded with sufficient educational background to understand and accurately contribute to the research, thereby strengthening the validity of the study's conclusions.

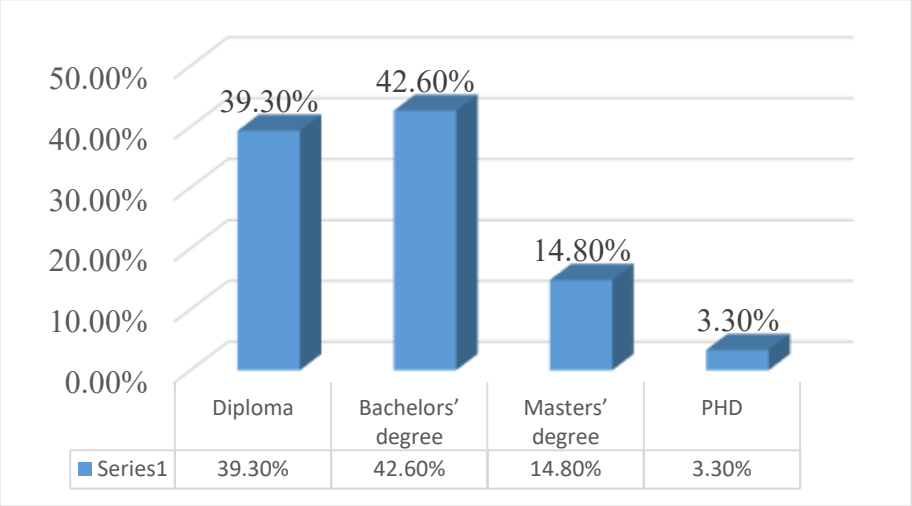

Figure Error! No text of specified style in document.**.3: Educational Level**

4.2.3 Employment status

The distribution of respondents based on employment status demonstrates a well-rounded representation, strengthening the reliability of the collected data. Most, 59.0%, are in permanent positions, signifying job stability and extensive experience. Meanwhile, 41.0% are on contract terms, bringing diverse insights from varied work environments. This balance ensures that the study incorporates perspectives from both long-term and short-term employment experiences, enriching the overall findings.

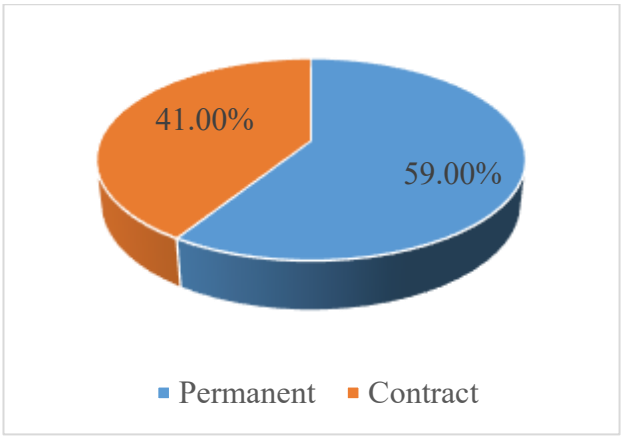

Figure Error! No text of specified style in document.**.4: Employment Status**

4.2.4 Work Experience

The distribution of respondents based on work experience reflects a well-balanced mix of early-career and seasoned professionals, enhancing the study's credibility. A significant portion, 45.9%, has 0–5 years of experience, bringing fresh perspectives and recent industry knowledge. Meanwhile, 41.0% have 6–11 years of experience, indicating a solid grasp of workplace dynamics. Additionally, 8.2% have 12–17 years of experience, and 4.9% have served over 17 years, contributing deep expertise and institutional knowledge. This diverse range of experience levels ensures a comprehensive understanding of the research subject.

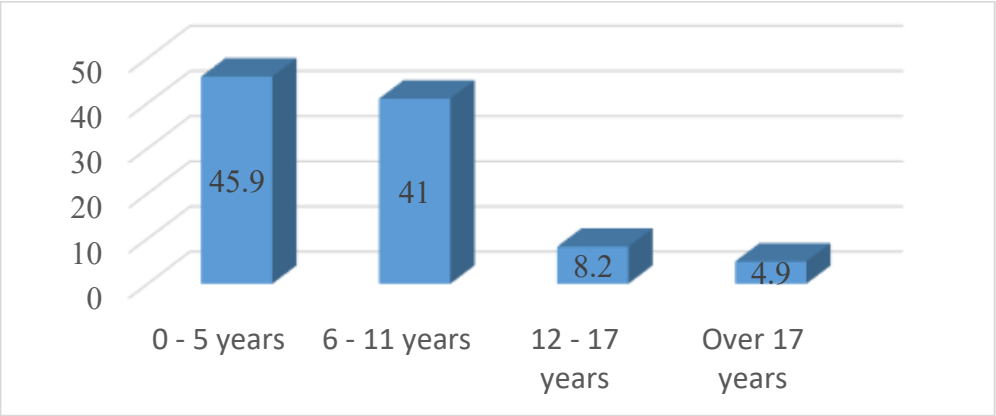

Figure Error! No text of specified style in document.**.5: Years of Work Experience**

4.3 Results of the reliability test

The Cronbach's Alpha values for all the variables in the study range from 0.930 to 0.962, indicating a high level of internal consistency and reliability. Role culture (0.931), task culture (0.962), human resources (0.942), financial resources (0.930), and organizational performance (0.930) all exceed this threshold, confirming that the items used to measure these constructs are highly reliable. The overall average Cronbach's Alpha of 0.939 further reinforces the robustness of the questionnaire, ensuring that the collected data is consistent and suitable for further statistical analysis.

Table Error! No text of specified style in document.**:1: Reliability Test**

Variable	Cronbach's Alpha Value	Number of items	Conclusion
Role culture	.931	4	Reliable
Task Culture	.962	6	Reliable
Human Resources	.942	7	Reliable
Financial Resources	.930	5	Reliable
Organisation Performance	.930	5	Reliable
Average	0.939	27	

4.4 Descriptive Statistics

This section will review the role culture, task culture, human resources, and financial resources, analyzing their impact on organizational performance based on the collected data.

4.4.1 Role Culture

Table Error! No text of specified style in document.**:2: Rating of Role Culture**

Statement	**N**	**Mean**	**Std. Dev**
There are always work plans developed for the implementation of proposed and/or existing strategies	61	3.5902	1.10117
Firm management often prepares communication protocols among the staff in case of any changes or development	61	3.4098	1.13103
All strategies to be implemented in this hospital are timely and workable.	61	3.1475	.94580
The employees are empowered to do their work.	61	3.3443	1.01465
Overall mean		3.37295	

There is the presence of structured work planning within the hospital (M = 3.5902, SD = 1.10117). This suggests that strategic planning is a priority. The relatively high standard deviation indicates varying levels of agreement among respondents, possibly due to inconsistencies in execution. The study also revealed that communication protocols among staff during organizational change (Mean=3.4098, SD=1.13103), signifying that while communication frameworks exist, their effectiveness is not uniformly experienced across all employees. These findings align with Sasaka (2019), who noted that organizational culture, particularly structured power dynamics and communication, significantly influences performance.

Furthermore, the results demonstrate moderate agreement regarding the timeliness and practicality of strategies implemented in the hospital (Mean=3.1475, SD = 0.94580). The relatively lower standard deviation suggests a more consistent perception among respondents. Additionally, employee empowerment was rated at (Mean=3.3443, SD=1.01465), indicating that while efforts exist to enhance workforce autonomy, some employees may still feel inadequately supported. These findings resonate with Korma (2022), who emphasized the role of strategic direction and organizational learning in shaping performance outcomes. The study highlighted that well-structured organizational strategies and employee involvement can improve institutional effectiveness.

4.4.2 Task Culture

Table Error! No text of specified style in document.**:3: Rating of Task Culture**

Statement	N	Mean	Std. Dev
Strategic trainings of all employees are usually done	61	3.1148	1.17045
Teamwork in delivering task is core part of the firm	61	3.6885	1.04149
Our firm employees are well-trained in system management	61	3.4426	1.05711
Our firm employees always undertake a pilot of proposed strategies to ascertain its values and challenges	61	3.2623	1.03121
Before implementation of activities or strategy, sufficient resources are usually allocated	61	3.1148	1.17045
We regularly do evaluation to ensure there is operational control in the firm	61	3.3934	.97089
Overall mean		3.336067	

The results indicate that strategic trainings and task culture are significant aspects of the firm's operations (M=3.1148, SD=1.17045), M=3.6885, SD=1.04149). This suggests that collaboration is a fundamental part of the organization, though the standard deviation shows variations in employee experiences. Training programs for employees are in place (m=3.4425, SD=1.05711). These findings align with Otieno (2017), who found a positive link between task culture and service delivery at ELDOWAS, emphasizing the role of structured teamwork and training in enhancing operational performance. Pilot testing of strategies recorded a mean of 3.2623 (SD = 1.03121), suggesting that trial runs are conducted, though experiences differ across the firm. Resource allocation follows a similar pattern, with some departments or teams likely receiving more support than others. Sifuna (2023) highlighted resource limitations in Kenyan public universities, showing how uneven distribution affects efficiency. Evaluation to ensure operational control had a mean score of 3.3934 (SD = 0.97089), reflecting a general agreement that monitoring mechanisms are in place.

4.4.3 Human Resources

Table Error! No text of specified style in document.**:4: Rating of Human Resources**

Statement	N	Mean	Std. Dev
The staff remuneration is as per the current rates	61	3.1639	1.25406
The employee remuneration is sufficient	61	2.7213	1.21286
The remuneration is based on employee education level	61	3.1639	1.09819
The economic factors are considered in remuneration	61	2.7705	1.21646
The working environment is conducive	61	3.1475	1.09295
The working environment accommodative persons with disability	61	3.2787	1.24004
Employees are well-trained	61	3.4918	1.11987
Overall mean		3.105371	

Source: Authors (2024)

Staff remuneration as per current rates, having sufficient remuneration for employees and having remuneration based on education level is present in the public health facilities in Taita Taveta county (M=3.1639, SD=1.25406; M=2.7213, SD=1.21286; M=3.1639, SD=1.09819). These respectively shows that; salary structures align with prevailing industry rates and education levels; though individual perceptions of fairness vary and that some employees feel their compensation is inadequate. Economic factors in remuneration recorded a mean of 2.7705 (SD = 1.21646), highlighting concerns that external financial conditions may not always be factored into salary adjustments. Similarly, the conduciveness of the working environment had a mean score of 3.1475 (SD = 1.09295), indicating that while the workplace conditions are generally favorable,

some employees may experience challenges. The working environment being accommodative to persons with disabilities recorded a mean of 3.2787 (SD = 1.24004), reflecting a general agreement that inclusivity measures exist, though experiences differ. Hee (2018) emphasized the strong link between training and employee performance in manufacturing, showing that structured HRM practices directly enhance productivity. Ali and Ogolla (2022) found that proper resource allocation positively impacts performance, emphasizing the need for structured HRM policies to optimize workforce retention and motivation. Kwizera (2018) found that financial rewards and organizational culture significantly influenced employee performance at USIU-Africa, reinforcing the importance of well-designed HRM strategies.

4.4.4 Financial Resources

Table Error! No text of specified style in document.**:5: Rating of Financial Resources**

Statement	N	Mean	Std. Dev
The financial resources are available when required	61	2.8197	1.08794
The financial resources are accessible	61	3.0984	1.09095
The financial resources are sufficient	61	2.7049	1.13055
The resources are well distributed	61	2.8852	1.09694
There is prudent allocation of resources across departments	61	2.8689	1.10265
Overall mean		2.87542	

Source: Authors (2024)

The findings indicate that financial resource availability within the organization is moderate, with a mean score of (M = 2.8197, SD = 1.08794). This suggests that while resources are sometimes available, their consistency is questionable, leading to varied experiences among respondents. This observation aligns with the study by Owusu *et al.* (2021), which found that financial resource unpredictability negatively impacts organizational performance in small and medium enterprises (SMEs) in Ghana, as operational activities often face disruptions due to delays in accessing funds.

The accessibility and sufficiency of financial resources also show moderate ratings, with accessibility recording a mean of (M = 3.0984, SD = 1.09095) and sufficiency at (M = 2.7049, SD = 1.13055). These figures indicate that while financial resources may be somewhat accessible, their adequacy to meet organizational needs is often lacking, as different departments experience varying resource constraints. This is consistent with findings by Wang *et al.* (2021), who established that financial sufficiency is not uniformly experienced across organizations, with some units receiving adequate resources while others face shortages due to budgetary limitations. The distribution and allocation of financial resources across departments received mean scores of (M = 2.8852, SD = 1.09694) and (M = 2.8689, SD = 1.10265), respectively. These results suggest that while some financial planning mechanisms exist, inefficiencies in allocation persist, leading to suboptimal utilization of available funds.

4.4.5 Organisational Performance

Analyzing organizational performance in the Taita Taveta Hospital reveals moderate positive perceptions across key areas as revealed in Table 4.6.

Table Error! No text of specified style in document.**:6: Rating of Organisational Performance**

Statement	N	Mean	Std. Dev
Customers are satisfied with the services provided herein.	61	3.3443	.96411
Employees are satisfied with the way the hospital management conducts itself.	61	3.0820	1.08467
More patients are referred to this hospital because of your good services	61	3.1639	1.08290
Medical standards and protocols are adhered to by the employees	61	3.5574	.99204
There is collaboration and teamwork among staff members	61	3.6885	.90445
Overall mean		3.36722	

Source: Authors (2024)

Customer satisfaction with services received a mean score of 3.34 (SD=0.96), indicating an average level of satisfaction. Employee satisfaction with hospital management had a mean of 3.08 (SD = 1.08), reflecting mixed opinions. The referral of patients due to good services had a mean score of 3.16 (SD=1.08), while adherence

to medical standards and protocols received a higher rating with a mean of 3.56 (SD=0.99). The highest-rated aspect was collaboration and teamwork among staff, with a mean score of 3.69 (SD=0.90). The overall mean score of 3.37 indicates a generally neutral perception of hospital services and management.

4.5 Results of Diagnostic Tests

Table 4.7: Diagnostic Test Results

Test	Result	Conclusion
Normality	P values greater than 0.05	Normal distribution
Multicollinearity	VIF less than10	No multicollinearity
Autocorrelation	Durbin-Watson value of 2.002	No autocorrelation

Source: Authors (2024)

According to Table 4.7, the data was normally distributed, there was no multicollinearity between variables and there was no autocorrelation.

4.6 Inferential Statistics

4.6.1 Pearson Correlation

The Pearson correlation coefficients indicate the strength and direction of the linear relationship between organizational performance and the independent variables: role culture, task culture, human resources, and financial resources. A correlation value closer to 1 signifies a strong positive relationship, while values near 0 indicate a weak or no relationship.

Table Error! No text of specified style in document.**:7: Pearson Correlation**

Variable	Pearson Correlation
	Performance
Performance	1.000
Role culture	.678
Task culture	.780
Human resources	.813
Financial Resources	.683

Source: Authors (2024)

The results show that human resources have the strongest positive correlation with performance (0.813), suggesting that effective human resource management significantly enhances organizational performance. Task culture follows closely with a correlation of 0.780, implying that a structured and goal-oriented work environment positively impacts performance. Financial resources (0.683) and role culture (0.678) also exhibit strong positive correlations, indicating that economic stability and an organization's cultural framework contribute to better performance outcomes.

4.6.2 Model Summary

Table Error! No text of specified style in document.**:8: Model Summary**

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.845[a]	.713	.693	.46422

a. Predictors: (Constant), Financial Resources, Role culture, Human resources, Task culture

The model summary indicates a strong relationship between the predictor variables (financial resources, role culture, human resources, and task culture) and organizational performance, as shown by the R-value of 0.845. The R Square value of 0.713 suggests that these independent variables can explain approximately 71.3% of the variation in organizational performance, highlighting their significant influence. The standard error of the estimate (0.46422) represents the average deviation of observed values from the predicted values, implying a reasonably accurate predictive model. These results confirm that financial resources, role culture, human resources, and task culture are crucial in organizational performance.

4.6.3 Analysis of Variance (ANOVA)

Table Error! No text of specified style in document.**:9: ANOVA Test**

Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	30.027	4	7.507	34.834	.000[b]
	Residual	12.068	56	.215		
	Total	42.094	60			

a. Dependent Variable: Performance
b. Predictors: (Constant), Financial Resources, Role culture, Human resources, Task culture

The Analysis of Variance (ANOVA) table evaluates the overall significance of the regression model in predicting performance. The sum of squares for regression (30.027) represents the variation in performance explained by the independent variables (financial resources, role culture, human resources, and task culture), while the sum of squares for residuals (12.068) accounts for the unexplained variation. The mean square for regression (7.507) indicates the average variation explained by each predictor, while the mean square for residuals (0.215) represents the average unexplained variance. The F-statistic (34.834) is the ratio of these two values, testing whether the predictors significantly improve the model beyond random chance. The p-value (.000) is below the conventional significance level (0.05), confirming that the independent variables collectively have a statistically significant effect on performance.

4.6.4 Regression Coefficients

Table Error! No text of specified style in document.**:10: Regression Coefficients**

Model		Unstandardised Coefficients		Standardised Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.561	.267		2.103	.040
	Role culture	.126	.127	.121	.998	.128
	Task culture	.243	.157	.244	1.546	.028
	Human resources	.443	.126	.476	3.517	.001
	Financial Resources	.167	.102	.079	.660	.009

a. Dependent Variable: Organisation Performance

The regression coefficients table presents the influence of the independent variables (role culture, task culture, human resources, and financial resources) on organizational performance. The constant (B = 0.561, p = 0.040) represents the predicted performance value when all independent variables are zero. The unstandardized coefficients (B values) indicate the extent to which performance changes with a one-unit increase in each predictor. Among the variables, human resources (B = 0.443, p = 0.001) has the most substantial and statistically significant impact on performance, suggesting that improvements in human resource management strongly contribute to organizational performance. Task culture (B = 0.243, p = 0.028) also has a significant positive effect, indicating that a well-structured task-oriented culture enhances performance.
On the other hand, role culture (B = 0.126, p = 0.128) and financial resources (B = 0.167, p = 0.009) have weaker influences. Although financial resources are statistically significant, their lower coefficient suggests a relatively minor contribution to performance. The standardized coefficients (Beta values) allow a comparison of the relative importance of each predictor, confirming that human resources (β = 0.476) are the most influential, followed by task culture (β = 0.244). The regression equation derived from these coefficients is:
$Y= 0.561 + 0.126X_1 + 0.243X_2 + 0.443X_3 + 0.167X_4$

4.7 Discussion

4.7.1 The Influence of Role Culture on Performance Outcome

The first objective of the study was to establish the impact of role culture on the performance results of public health facilities in Taita Taveta County. The result noted a significant, however weak, relationship between role culture and the organization's performance (r= 0.678). Nevertheless, the regression analysis revealed role culture had little impact on performance (B = 0.126, p = 0.128). This implies that though role culture is a

structured framework that can help in the functioning of organizations, it is not as powerful as other organizational practices such as task culture and human resources. Hence the hypothesis H_{01}, which states that role culture does not impact performance outcomes, is rejected.

4.7.2 The Influence of Task Culture on Performance Outcome

The second objective was to examine the impact of task culture on the performance outcome of public health facilities. The findings indicated a strong positive relationship between task culture and organizational performance (r=0, 780), meaning that a structured and collaborative working environment is vital in enhancing performance. The regression analysis further supported the value of task culture, and it exhibited a significant regression coefficient (B = 0.243, p = 0.028), meaning that task culture has a positive relationship with performance outcomes. This concurs with findings by Otieno (2017) and Ng'ang'a & Nyongesa (2022), who pointed out the relevance of task culture in maximizing performance due to the efficient allocation of resources and teamwork. Hence the hypothesis H_{02}, which states that task culture does not impact performance outcomes, is rejected.

4.7.3 The Influence of Human Resource Allocation on Performance Outcome

The third objective was to examine the influence of the allocation of human resources on the performance outcome of public health facilities. The study showed a strong positive relationship between human resource allocation and performance (r = 0,813), the highest among the independent variables. From the regression analysis, human resources were shown to have the biggest and most significant impact on the performance (B = 0.443, p = 0.001). This implies that good human resource practices, training, recruitment, and motivation of the employees are major contributors to the organization's performance. Hence the hypothesis H_{03}, which states that human resource allocation does not impact performance outcomes, is rejected.

4.7.4 The Influence of Financial Resource Allocation on Performance Outcome

The last objective was to examine the impact of the allocation of financial resources on public health facilities performance outcomes. The results showed a moderate positive relationship between the allocation of financial resources and performance (r = 0.683), indicating that financial resources are one of the sources of performance but not as high as human resources and task culture. So, the results of regression analysis proved that financial resources influence performance moderately (B = 0.167, p = 0.009), whereas the coefficient of other factors proves to be lower. The results align with Godana (2022) and Njoki and Anyieni (2022) findings, stressing financial resources' role in effective healthcare delivery. Nevertheless, the results indicate that the financial resources are insufficient to improve performance without facilities such as effective human resource management and a task-oriented culture. Thus, hypothesis H04, which states that financial resource allocation does not impact performance outcomes, is partially rejected; financial resources impact performance to a lesser extent than human resources and task culture.

5.0 Conclusions and Recommendations

The study aimed to analyze the effect of organizational culture and resource allocation on the performance of public health facilities in Taita Taveta County, Kenya. The study concludes that organisational culture and resource allocation significantly and positively affects organizational performance. Consequently, the study recommends that managers healthcare facilities ought to encourage employees to join forces and achieve common objectives. This is possible by facilitating interdisciplinary teams, providing clear ways for everyone to communicate, and granting staff at the frontline a say in important decisions. Managers can help by adding flexibility to routines so staff can apply their skills and improve at work. This balance allows facilities to deal with new health problems while maintaining correct procedures quickly. Since worker allocation plays a significant role in results, organizations should invest substantially in recruiting, keeping, and training their workers for the health sector. Ensuring the right number of staff is available, helping professionals improve their knowledge and abilities, and ensuring all employees receive fair pay helps a facility keep qualified workers. If businesses provide a workplace that supports and includes staff with disabilities, it will help increase the morale and productivity of their workforce. Good financial management helps you use financial resources as effectively as possible.

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