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ASSESSMENT OF STUDENTS' PERCEPTION OF THE MBA HEALTHCARE MANAGEMENT PROGRAM AT STRATHMORE UNIVERSITY

DR. JAMES SOKI MOKUA

MBA-HCM/088681/15

A research dissertation submitted in partial fulfilment for the award of Master of Business Administration in Healthcare Management degree of Strathmore University

JUNE 2018

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I declare that this work has not been previously submitted and approved for the award of a degree by this or any other university. To the best of my knowledge and belief, the dissertation contains no material previously published or written by another person except where due reference is made in the dissertation itself.

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June 2018

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LIST OF ABBREVIATIONS

MBA Master's in Business Administration

MDG Millennium Development Goals

NPS Net Promoter Score

SBS Strathmore Business School

SDG Sustainable Development Goals

WHO World Health Organization



ACKNOWLEDGEMENT

I want to thank God for leading me on this journey. A journey that began when I stepped away from clinical medicine to pursue management in the healthcare space. I have enjoyed the support of family and friends without whom, this achievement would not be possible. I have also had the pleasure of meeting and engaging with brilliant minds in the form of my teachers and fellow colleagues who have kept this adventure both challenging and rewarding. I sincerely thank my research supervisor the Director, Consortium for National Health Research (CNHR) and the Director, Institute of Healthcare Management (IHM), Professor Gilbert Kokwaro. I appreciate your guidance and enthusiasm through this whole process. Your passion for teaching and empowering the next generation inspires me.

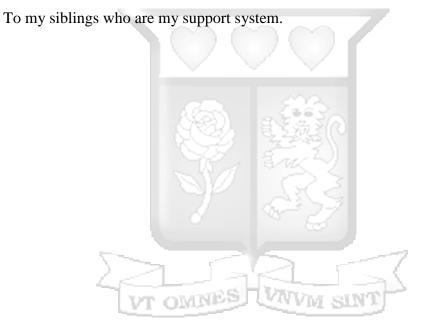
I want to thank Dr. Yamal Patel and the Director of Quality at Aga Khan University hospital (AKUHN), Mrs. Tole for introducing me to management and research in the healthcare space. I appreciate the Chief of Staff Aga Khan University Hospital Nairobi (AKUHN), Dr Majid Twahir, lecturer in Health Law & Management, Harvard School of Public Health, George B. Moseley III and, Director Institute of Strategy and Competitiveness, Dr. Fred Ogola for their friendship and mentorship. My gratitude goes to the Chairman Jubilee Holdings, Mr. Nizar Juma, the Regional CEO Jubilee Holdings, Mr. Julius Kipnge'tich, the Group CFO Jubilee Holdings, Mr. Ali Rawji, the CEO Jubilee Insurance Company of Kenya (JICK), Mr. Patrick Tumbo, the CEO AKUHN, Mr. Shawn Bolouki and, the Senior Management and Operations teams of AKUHN & JICK for their support through the two and a half years of learning at Strathmore Business School. A true testament to the Aga Khan Development Networks' (AKDN) commitment to learning. Finally, I want to thank all who took part in this study for their contribution to strengthening of health systems.

DEDICATION

I dedicate this dissertation to my soul mate, my wife. Your belief in me has taught me, like a bird perched on a branch, to trust in my wings. I thank God for you, my companion on the path less trodden.

To my parental figures; my mother Hellen, my aunts Ruth & Julia and my uncle Mwangi who speak wisdom to me. I would not be the man I am today without your love and steadfastness.

To my cousin Eric, the best friend a man could have.



ABSTRACT

There is a need for healthcare workers to acquire managerial and leadership skills for their training to be relevant to the needs of the country and the community they serve. The main challenge is lack of leadership and managerial skills. With this gap in mind, Strathmore Business School (SBS) launched an MBA in Healthcare Management in 2013 to train health care workers and managers in leadership and managerial skills. The main objective of the study was to assess the experience of the present cohorts of students and past graduates of the MBA in Healthcare Management course at SBS. A mixed methodology provided a detailed analysis of the research problem. A questionnaire was administered to 177 students drawn from the present cohorts (2017, 2016, and 2015) and past graduates. Results indicated that Fifty six (56%) of the students responded. The overall scores were high for relevance, quality and employability. Productive sector linkages got mid-range scores. There was a downward linear trend noted for quality and an upward trend for security. 60% of the respondents were noted to be promoters. Students responded well to international faculty, modular program and case based learning. Points of improvement are in infrastructure (parking, library and cafeteria) and productive-sector linkages. In terms of promoting entrepreneurialism and practical skills, SBS has followed the majority of institutions by employing industry professionals as adjunct faculty and engaging guest speakers to provide business and entrepreneurial advice. New forms and levels of partnerships need to be considered in research, consultancy, staff exchanges and joint curriculum development with the productive sector.

CHAPTER ONE:

INTRODUCTION TO THE STUDY

1.1 Overview

Demand for MBA education has increased over the years (Global Management Admission Council, 2015). It is seen as a door to managerial roles and increased earning potential (Baruch, 2000). It confers critical thinking skills and strategy, quantitative and communication skills, complemented by leadership skills (Tay, 2001a). Concerns have been raised that the training is more theoretical with graduates struggling to apply the concepts in the work environment (Louw, 2001). The same concern has been raised in Kenya where the education system is failing to produce graduates with the knowledge and skills crucial for Kenya's Vision 2030 (World Bank, 2014).

Universities produce not only the health workers but also research results that inform health policies and practice. Sustainable Development Goals (SDG) 3 (health) and 4 (education) are linked. Failure to get a quality education in this context will result in poorly functioning health systems. Poorly functioning health systems are a major threat to economic development. It results in catastrophic costs for households and directly impacts economic productivity. Investment in quality health graduates is critical to the attainment of SDG 3.

This project sought to get feedback from past and current students on the quality of the MBA Healthcare Management program at Strathmore Business School (SBS) which seeks to address this gap in training.

1.2 Background

As far as some employers are concerned, universities are failing to impart practical skills (Varela, 2013). This means the graduates are unemployable and the training undertaken, a waste of resources. Higher Education course content and course delivery methods need to respond to changing expectations.

The constitution of Kenya (2010) led to a devolved system of government, with health being devolved to the counties. Thus, many health care workers in public service work for the counties. Most health leaders and managers in many developing countries

including Kenya are trained health professionals (doctors, nurses, clinical/medical officers, and pharmacists) who may have the technical skills but are not trained or experienced in leadership and management prior to being offered a managerial position (WHO 2009). They are expected to acquire these skills through in-serve training.

For newly qualified health workers, posting is based purely on clinical skills. Most are ill-prepared for the leadership and managerial duties they are expected to undertake in their new positions. These health care workers require not only relevant and quality technical skills, but also leadership and managerial skills for their training to be relevant to the needs of their country, the community they serve, and to make them employable (Daire, 2014).

1.3 Problem Statement

The 21st century health system challenges cannot be solved by healthcare workers who don't have managerial and leadership skills (WHO 2009). The issues are not around delivery of service but on management of health systems. To address the shortcomings in the training of doctors, Strathmore University's Institute of Healthcare Management, through the Strathmore Business School, established the MBA in healthcare management in 2013.

It provides competencies in understanding health systems organization, performance and evaluation, strategic planning, financial management, health informatics, human resource for health management, resource mobilization, leadership and governance, quality service delivery and managing healthcare businesses. These are the competencies required for doctors to tackle 21st century health challenges and participate in successful devolution of health services in Kenya.

However, business schools have been under fire for failing to impart skills and knowledge valued by employing organizations (Varela, 2013). This points to a deficiency in management educations role to develop management skills. There is a need to evaluate this course to find out whether it is meeting the expectations of equipping students with the skills and competencies to be able to address current health systems challenges.

1.4 Justification

Strathmore University has distinguished itself as a center of excellence in higher education. The introduction of the MBA in Healthcare Management in 2013 was an innovative effort to address the challenges of the newly created counties by training healthcare workers to efficiently manage health services and facilitate the realization of SDG 3. There is a need to analyze this model based on the variables of relevance, quality, employability and productive sector linkages (Mohamedbhai, 2016).

This self-analysis is a step toward personal mastery where the organization goals and ideals are reviewed to inform system learning (Senge, 2004). There is also a regulatory requirement that curricula be reviewed every 5 years (Commission for Higher Education, 2012). Part of this review involves feedback from key stakeholders. Thus this study, focusing on students as key stakeholders, will contribute to the larger review of the MBA Healthcare Management curriculum.

1.5 Objectives

1.5.1 General Research Objective

To assess the experience (as indicated by their ratings) of the present cohorts of students and past graduates of the MBA in Healthcare Management course at SBS.

1.5.1.1 Specific Objectives

To assess students' experience on 4 areas related to the MBA Healthcare Management training, namely:

- i. To assess students rating of Relevance of the MBA Healthcare Management course,
- ii. To assess students rating of Quality (of the training and training environment),
- iii. To assess students rating of Employability of the graduates of the course,
- iv. To assess students rating of University-productive sector linkages.

1.5.1.2 Research Questions

- i. What is the students rating of relevance of the MBA course in terms of their work and career progression?
- ii. What is the students rating of quality of the MBA program?
- iii. What is the students rating of employability enhancing skills acquired from the MBA program?
- iv. How do students rate the opportunities to interact with stakeholder during and after

graduating the MBA program?

1.6 Scope

The study focused on current (2016, 2017) cohorts of students and past (2013, 2014 and 2015) cohorts of the MBA in healthcare management program at SBS. It did not involve the other executive MBA programs as the focus of these study is development of leadership and managerial skills in the healthcare space.

1.7 Significance of the study

Strathmore Business School launched an MBA in Healthcare Management in 2013 to train health care workers and managers in leadership and managerial skills. The MBA in Healthcare Management program has so far enrolled over 170 students, about one third of whom have completed their training and serve in various capacities. Now having graduated its third cohort, it is the right time for a review of the program, to assess the experience of the clients/students. It is also required that a review of the program is done once every few years to ensure the training is up to date as regards the needs of the stakeholders (Commission for Higher Education, 2012).



CHAPTER TWO:

LITERATURE REVIEW

2.1 Introduction: Role of higher education in development

Research by institutions of higher education provides evidence that guides national development policy and strategy. Higher education therefore underpins all development targets. Meeting Sustainable Development Goals (SDGs) depends on skilled graduates with skills appropriate for the market context (Association of Commonwealth Universities, 2015).

2.2 Relevance

An MBA is seen as a practical qualification. Its relevance therefore is seen in graduates who emerge having the ability to see and act with awareness based on a raft of knowledge and skill imparted during the program (Varela, 2013). Skills such as critical analysis for; time management and prioritization, data analysis and ability to solve complex problems are coupled with communication for; working with teams, building and sustaining a network, coaching and brand storytelling. These skills are highly sort after by employers hence are relevant to the job market.

2.3 Quality

Quality is evidenced by infrastructural and staff development, resource mobilization and expansion of academic programs with the requisite resources for running the same (Commission for Higher Education, 2012). To a student, the infrastructure, staff and suitable programs would be their touch points on these metrics. Resource mobilization would have an impact on their presentation.

On campuses, academic, student life, service and administrative units are being called upon to increase quality, effectiveness, and efficiency in response to internal and external pressures. Often, the heightened expectations are accompanied by few if any additional resources. The options therefore are to meet the increasing demands by sacrificing quality across the board, look for new approaches to the tasks at hand or narrow the scope of activities (Ruben 2007).

Central to the study of teachers' effect on education is the notion that the amount students learn in a year is partially a result of their teachers' teaching experience and knowledge (Huang & Moon, 2009). Many occupations recognize employees' years of experience as a relevant factor in human resource policies, including compensation systems, benefits packages, and promotion decisions. The idea is that experience, gained over time, enhances the knowledge, skills, and productivity of workers (Rice, 2010). A lecturer must have 3 years' working experience at university level or in research or in industry (Commission for University Education, 2014).

On-the-job experience provides teachers with practical opportunities in which to build their expertise in teaching and classroom management. Further, average years of teaching experience are an indication of teachers' maturity and their long-term commitment to education. A key distinction between beginning teachers and experienced teachers is in the degree of sophistication with which they exhibit their application of this set of knowledge and skills (Choy, L Wong, Ming Lim, Chong, & Choy Angela L Wong Kam Ming Lim, 2013). It is therefore important to review the quality of training at SBS with an emphasis on the faculty.

2.4 Employability

Higher education courses should be relevant to the market, impart employable skills and offer productive sector linkages in order to resolve challenges of unemployment. Employability refers to a set of skills, knowledge and personal attributes that make an individual more likely to secure and be successful in their chosen occupation(s) to the benefit of themselves, the workforce, the community and the economy (Mohamedbhai, 2016). Employability is seen in career advancement, increased responsibility and in increased career options (Tay, 2001a). It will therefore be important to assess the employability of the students of the SBS Healthcare Management course.

2.5 Productive sector linkages

Universities, as centers of knowledge and learning, are key institutions in national innovation systems. In order to carry out this role, they need to be linked to the productive sector, other research institutes, and supported by government policies. University-industry linkages are a three-way interaction between universities, government, and the productive sector as described in the Triple Helix theory (Ranga 2005). They take various forms and levels of partnerships such as contract or

sponsored or joint research, professional courses, consultancy, to creating opportunities for student placements, staff exchange, and joint curriculum development.

In terms of promoting entrepreneurialism and practical skills among staff and students, the majority of institutions employ industry professionals as adjunct faculty, engaging guest speakers to provide business and entrepreneurial advice, and offer student attachments. Enhanced graduate employability as a result of improved curricula, skill development and internships, as well as, increased job satisfaction among academic staff were noted as positive externalities of promoting linkages with the productive sector (Ssebuwufu, 2012).

2.6 Theoretical review

Increasingly today, there are competing views as regards excellence or quality in higher education. Volkwein highlights three differing points of view (Volkwein & Sweitzer, 2006). The first, the resource/reputational perspective, emphasizes disciplinary ratings, faculty accomplishments and credentials, available financial and material resources, student ranks and test scores, levels of research and donor funding. This model is preferred by faculty.

The second is the strategic investment model which focuses on return on investment, cost-benefit analysis, control of expenditures, regulation and compliance, and productivity measures including admission yield, retention, time to degree and, expenditure per student. This model is preferred by government officials, boards and, trustees.

The third is the client-centered model. This model focuses on the client or student experience. It takes into account the quality of educational practice, programs and faculty availability, tuition levels, access, alumni and employer views and most especially student satisfaction with programs, and facilities. This model is preferred by students, parents, alumni and, employers.

SBS subscribes to the client-centered model as it collects feedback from students for every module it offers. It will be good to see whether this has translated in an improved student experience over time as we review the ratings from the first to the fourth cohort.

2.7 Project overview

The project overview is represented in Figure 2.1. Essentially what it says is that when a student is admitted to an institution such as a University, the experience of the student at that institution, both in terms of the general environment and the training will determine the quality of the graduate coming out of that institution. If part of the experience involves giving feedback so the institution can improve on its services, this then forms a framework for sustainable improvement on the quality of the product, in this case the graduates from that institution.

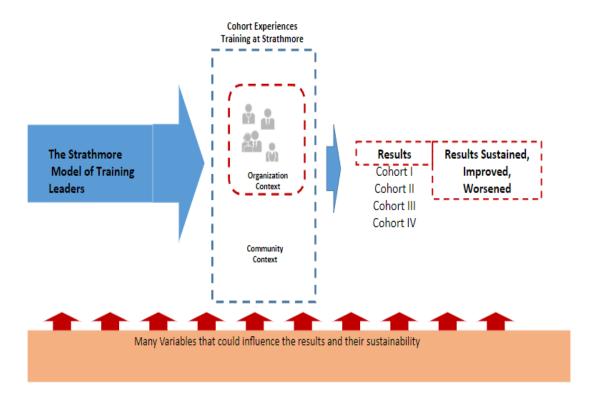


Figure 2. 1 Project overview

CHAPTER THREE:

RESEARCH METHODOLOGY

3.1 Research design

The study design was a survey utilizing a mixed design. It involved use of administered questionnaires among current (2016, 2017) cohorts of students and past (2013, 2014 and 2015) cohorts of students. The mixed methodology was chosen as it best suited the objective of the study by combining quantitative and qualitative approaches in order to provide a better understanding of the research problem.

Approach: To address the four research questions, a questionnaire (Appendix 1) was developed to capture students' views and ratings on the 4 areas. For each category, each student was requested to give a rating from 1 (meets none of my expectations), 2 (meets some of my expectations), 3 (meets most of my expectations), to 4 (meets all of my expectations). There were short answer questions to allow for respondents to elaborate on their ratings.

3.2 Population and Sampling

3.2.1 Study Site

The questions were sent to the cohorts at their respective workplaces via e-mail as a link to an online questionnaire.

3.2.2 Study Population

Current (2016 and 2017) students and past (2013, 2014 and 2015) cohorts of graduates.

3.2.3 Sample Size Calculation

The total number of current (2016 and 2017) cohorts and past (2013, 2014 and 2015) cohorts' participants was still relatively small (177). Therefore, the aim was to administer the questionnaire to all of them. To determine the minimum number of respondents required to answer the questionnaire, the sample size formulae for correlation study (Zou, 2012) was used as follows:

$$N = ([Z \propto + Z \beta]/C) 2 + 3$$

Where N = Number of subjects required

 $Z \propto =$ is standard deviation for type I error (1.96 representing alpha level of 0.05)

 $Z\beta$ = is standard deviation for type II error (0.84 representing beta of 20% and 80% power)

$$C = 0.5*ln([1+r]/[1-r])$$

r = is expected correlation coefficient (assumed a moderately weak correlation of 0.37)

Substituting these values in the formula

$$N = ([1.96+0.84]/0.3884) 2 + 3$$

N = 55 subjects

3.2.4 Inclusion Criteria

Current (2016 and 2017) cohorts and past (2013, 2014 and 2015) cohorts of the MBA in Healthcare Management program who gave their consent to participate in the study.

3.2.5 Exclusion Criteria

Current (2016 and 2017) cohorts and past (2013, 2014 and 2015) cohorts' students who declined to give their consent to participate in the study.

3.3 Data collection

3.3.1 Data collection methods

The data was collected through administered questionnaire (Appendix 1) issued via Google forms, an online platform. The data collected was in form of responses to the key research questions, and scored on a scale of 1 to 4 with an option for comment for some questions. Data was collected after obtaining signed informed consent (Appendix 2) from study participants

3.3.2 Data handling

Completed questionnaires were stored safely on an online folder accessible to the researcher only. The questionnaires had no names or identifying marks or symbols of the study participants to ensure confidentiality. Access to the folder was password protected with access limited to the researcher only.

3.4 Data analysis

SPSS version 21 was utilized in the data analysis. Quantitative data analysis techniques were used according to the general method described by Ruben (2009). Thematic

content analysis was used in qualitative data analysis. Key themes and concepts were identified and categorized. A frequency count of the number of issues and views expressed by type was undertaken.

3.5 Research Quality

Reliability describes how far a test, procedure, or tool, such as a questionnaire, will produce similar results in different circumstances; i.e. if it used by different users and at different times (Roberts, Priest, & Traynor, 2006).

Validity describes the extent to which a measure accurately represents the concept it claims to measure (Punch, 1998). External validity addresses the ability to apply with confidence the findings of the study to other people and other situations. It is ensured by drawing representative samples of the population of interest and in reference to relevant variables such as age and gender. Internal validity helps to reduce unanticipated reasons for different outcomes than those expected. Internal validity can be ascertained through use of literature review to develop the questionnaires.

The questionnaire was based on the research questions and the conceptual framework of the study that was informed by a literature review. To minimize response bias, participants were informed that their responses were anonymous and would not in any way influence the services they receive. In addition, participants were allowed to seek clarification for whatever was not clear.

Ethical approval was obtained from the Strathmore University Institutional Review Board to collect data from human subjects using the questionnaires (Appendix 3). No participant information was reviewed or reported during the study. Participants completed an Informed Consent document (Appendix 2) before completing the questionnaires (Appendix 1). Any identifiable data was removed prior to data analysis. All data forms were stored securely in a lockable cabinet accessible to the researcher only. The soft copy of the data was stored in a password protected computer only accessible to the researcher.

CHAPTER FOUR: RESULTS AND ANALYSIS

4.1 Introduction

This chapter presents the findings of the analysis of students' responses on their experience of the MBA (HCM) program. It contains the descriptive analysis of the sample including characteristics of respondents, enrolment and completion of the program, followed by the actual rating of quality of the training. It contains correlations between career progression and attendance of the program as well those between students' recommendation of the training program and student rating of quality. Finally, it has the analysis of linear trends looking at feedback against the respondents' module.

4.2 Characteristics of respondents

Records for a total of 177 MBA (HCM) students enrolled in the program since its inception were available. All 177 were contacted to complete the online survey. During the study a total of 56 students responded to the online survey. This yielded a study response rate of 32% of the targeted population which is in line with expected response rate for online surveys (Watt, 2002).

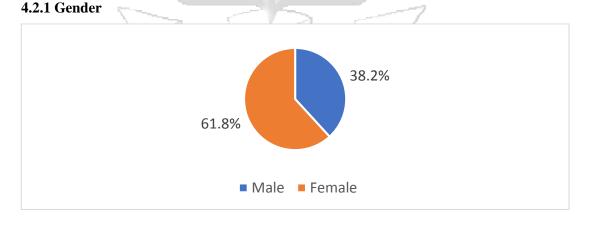


Figure 4. 1 Gender distribution of MBA respondents in online survey

The ratio of male-to-female students participating in the survey was 1: 1.6 with 21 male's recruited accounting for 38.2% of respondents (Figure 4.1).

4.2.2 Social demographic characteristics

Table 4.1 Social Demographic characteristics of MBA Respondents

Marital status	3		Frequency	Percentage	Cumulative percent
Married			31	56.4	56.4
Single			23	41.8	98.2
Other (Catholic	c nun)		1	1.8	100
Children					
Yes			38	69.1	69.1
No			17	30.9	100
Dependents	(outside	nuclear			
family)					
Yes			28	50.9	50.9
No			27	49.1	100

Of the 55 participants in the study, 31 (56.4%) reported that they were married and 38 (69.1%) had children (Table 4.1). There were 28 (69.1%) participants who reported that they had dependents who were not part of their immediate family.

4.2.3 Enrolment into MBA (HCM) program

Table 4.2 Student entry characteristics into MBA (HCM) program

Frequency	Percentage	Cumulative			
Trequency		percentage			
23	41.8	41.8			
20	36.4	78.2			
8	14.5	92.7			
3	5.5	98.2			
1	1.8	100			
Is MBA HCM the first					
44	80	80			
11)	20	100			
Exposure to managerial roles					
prior to enrolment					
39	70.9	70.9			
16	29.1	100			
	20 8 3 1 44 11	23 41.8 20 36.4 8 14.5 3 5.5 1 1.8 44 80 11 20			

The time period between completion of undergraduate studies and enrollment in the MBA program ranged from less than a year to 17 years. The mean duration was 6.42 years (SD \pm 4.07). Most students enrolling in the program heard about the program through referral 23 (41.8%) or advertisement 20 (36.4%). Of the 55 participants 44 (80%) reported that the MBA (HCM) was their first postgraduate training. The remaining 20% had attended and completed a different master's program prior to enrolling on the MBA. Most 39 (70.9%) students reported that they had been exposed to managerial roles prior to enrollment in the program.

4.2.4 Course completion

Seventy-one percent of the participants were current students with 45.5% having fallen back at the time of the study and 25.5% were on track. Majority of those who responded that they had fallen behind sited the research as their stumbling block, 54%. 31% highlighted work life balance as their challenge. Only 9% reported the school fees to be prohibitive. Further, 16.4% of participants had graduated on time and 7.3% had graduated late. Of those who had completed the program or were on course, 41%

reported supportive environments to be key. Of these, Strathmore got 18% (with the class assistant being key to this positive score), understanding work environment 14% and a supportive family 9%. 18% reported self-discipline to be key.

4.3 Relevance

52.7% of the students responded that the program met all of their expectations and 47.3 reported most of their expectations were met. There were no low scores on this question. 85.7% of the respondents reported the program had better equipped them to handle their duties in the work place. When queried as to the impact the course had made, of the 24 respondents, 50% reported improved decision making utilizing critical analysis skills. 17% of these respondents reported the course helped them incorporate business considerations such as sustainability into their analysis. 13% reported improved communication skills and 8% reported improved people management skills. When asked what modules they would incorporate to the program, procurement, project management, risk management and supply chain management were recommended.

4.4 Ratings of the quality of the program

The participants rated the quality of training in the MBA (HCM) programs and these ratings are presented in the following two sections; delivery of training and resource availability.

4.3.1 Delivery of training

Table 4.3 Participants rating of delivery of training in MBA (HCM) program

	None	Some	Most	All
Relevance of modules	0(0)	0(0)	26(47)	29(53)
Case based model of learning	0(0)	1(2)	13(24)	41(75)
Modular model of MBA	2(4)	4(7)	20(36)	29(53)
Experience of faculty	0(0)	1(2)	22(40)	32(58)

Table 4.3 shows that participants rated the four items targeting training delivery highly with at least 89% reporting that most or all their expectation were met with respect to: module relevance (most = 47%; All = 53%); case based model of learning (most = 24%, all = 75%); modular model of MBA (most = 36%, all = 53%); and faculty experience (most = 40%, all = 58%). Students reported the modular model gave time for one to immerse themselves in the course content. Students reported burn out towards the end of the program due to the intensity of the program and the backlog of work on returning to the office. It also required a very understanding work environment.

4.3.2 Resource availability

Table 4.4 shows that participants were satisfied with the learning resources especially classrooms (met most expectations for 31% and all expectations for 69%), audio-visual equipment (most = 40%, all = 60%), class assistant (most = 16%, all = 78%), and security (most = 44%, all = 53%). On the other hand, the three leading areas of concern with respect to resource availability were parking space (met none of the expectation for 18% and some expectation for 29%), cafeteria (some = 15%) and library (some = 11%). They reported a need for more variety with options for vegetarians when rating the cafeteria.

17% took issue with the syndicate rooms reporting they were not adequate for the student numbers. There were also suggestions for audio visual equipment to be provided for in the syndicate rooms. 7% took issues with the textbooks reporting that a lot of the examples centered on the US healthcare system. 10% reported dissatisfaction with the library and another 10% with the audio-visual equipment citing challenges with lectures conducted over skype.

Table 4.4 Participants' rating of resource availability

	None	Some	Most	All
Classroom	0(0)	0(0)	17(31)	38(69)
Cafeteria	0(0)	8(15)	23(42)	24(44)
Textbooks	0(0)	4(7)	24(44)	27(49)
Library	0(0)	6(11)	28(51)	21(38)
Parking	10(18)	16(29)	19(35)	10(18)
Security	1(2)	1(2)	24(44)	29(53)
Syndicate rooms	0(0)	4(7)	33(60)	18(33)
Class assistant	0(0)	3(5)	9(16)	43(78)
Audio-visual equipment	0(0)	0(0)	22(40)	33(60)

4.4 Employability

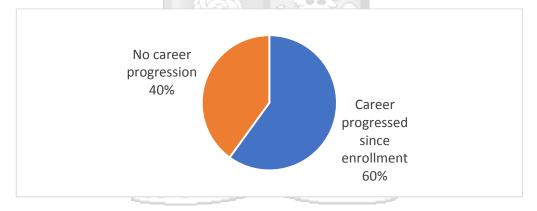


Figure 4.2 Career progression

60% of the participants reported that they had progressed in their careers following enrolment into the MBA program. 31% reported a new position, 21% reported a new job, 17% reported starting a new business and 10% reported business growth. When queried on their future plans, of the 54 responses received, 57% reported their plans were to continue on their employment path. 24% were focusing on self-employment and thus becoming employers. 19% were considering furthering their education. This was mostly through a PHD though one respondent was considering pursuing a clinical program.

Table 4.5 Correlation between career progression and course completion, relevance and student entry characteristics

Career progression			
Polyserial	Duration between undergraduate	Correlation Coefficient	0.233
correlation	studies and MBA enrolment		
	(years)	Sig. (2-tailed)	0.172
Tetrachoric	MBA HCM is first Master's	Correlation Coefficient	0.1
correlation	program pursued by student	Sig. (2-tailed)	0.739
Polychoric	Course completion	Correlation Coefficient	0.223
correlation		Sig. (2-tailed)	0.224
Tetrachoric	Exposed to managerial role prior	Correlation Coefficient	0.09
correlation	to MBA enrolment	Sig. (2-tailed)	0.769

^{**} Correlation is significant at the 0.05 level (2-tailed).

Table 4.5 shows correlation coefficients between career progression and course completion, its relevance and student entry characteristics. There was no significant association between career progression and duration between undergraduate studies and MBA enrolment (p = 0.172). Similarly, career progress after enrolment in MBA was not significantly associated with whether a student had attended another masters course (p = 0.739), completed the current program (p = 0.224) or had exposure to managerial roles prior to program enrolment (p = 0.769).

4.5 Productive sector linkages

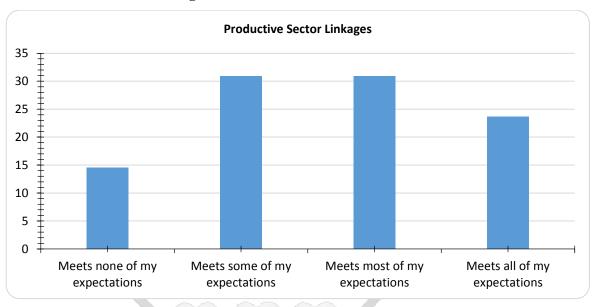


Figure 0.3 Productive sector linkages

The mode for productive sector linkages was tied at 2 (Meets some of my expectations = 30.9%) and 3 (Meets most of my expectations=30.9%). 14.5% of the respondents reported none of their expectations were met. 83% of the students reported they were unhappy with the alumni program and a majority reporting they had never attended alumni events.

4.6 Net Promoter Score

The net promoter score based on the recommendations report shows that most (60%) of the participants were promoters of the program (loyal enthusiasts who would keep referring others – score 9-10), 30.9% were passives (satisfied but unenthusiastic - score 7-8) and 9.1% were detractors (unhappy customers who can damage the brand - score 0-6). This gives an overall net promoter score of 50.9 (Promoters – Detractors).

Figure 4.4 shows the likelihood that a participant would recommend the MBA program to a friend or relative.

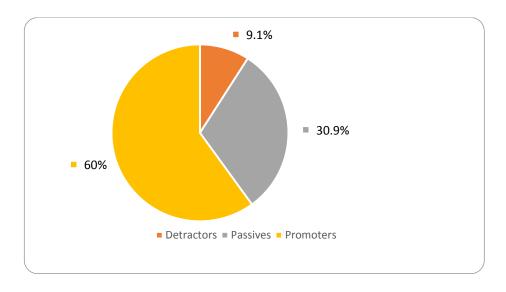


Figure 4.4 Likelihood for recommending the program

There was no significant correlation between likelihood for recommending the program and ratings for relevance of program (p = 0.100), case based model of learning (p = 0.151) or experience of faculty (p = 0.221) as shown in Table 4.7. There was evidence of a weak positive correlation (rho = 0.325) between recommendation of the program and rating on modular model of the MBA program (p = 0.061).

Table 4.2 Student rating of quality of training and the participant recommendation of program

Likelihood of recommendation					
2,2	Relevance of modules	Correlation Coefficient	0.326		
VI	OMNES TOWN S	Sig. (2-tailed)	0.1		
	Case based model of learning	Correlation Coefficient	0.283		
Polychoric correlation		Sig. (2-tailed)	0.151		
	Modular model of MBA	Correlation Coefficient	0.325		
		Sig. (2-tailed)	0.061		
	Experience of faculty	Correlation Coefficient	0.226		
		Sig. (2-tailed)	0.221		

^{**} Correlation is significant at the 0.05 level (2-tailed).

Table 4. 3 Student rating of resource availability and the participant recommendation of program

r8					
Likelihood of recommendation					
	Classroom	Correlation Coefficient	0. 402 **		
		Sig. (2-tailed)	0.041		
	Cafeteria	Correlation Coefficient	-0.007		
		Sig. (2-tailed)	0. 966		
	Textbooks	Correlation Coefficient	0.422**		
		Sig. (2-tailed)	0.014		
	Library	Correlation Coefficient	0.186		
		Sig. (2-tailed)	0.292		
Polychoric	Parking	Correlation Coefficient	-0.028		
correlation	Security	Sig. (2-tailed)	0.867		
		Correlation Coefficient	0.039		
	(43). <u>(</u> 3	Sig. (2-tailed)	0.825		
	Syndicate rooms	Correlation Coefficient	0.055		
		Sig. (2-tailed)	0.764		
	Class assistant	Correlation Coefficient	0.321		
		Sig. (2-tailed)	0.108		
i i	Audio-visual equipment	Correlation Coefficient	0.263		
	VT OMNES IV	Sig. (2-tailed)	0.181		

^{**} Correlation is significant at the 0.05 level (2-tailed).

The likelihood of recommending the program was positively and significantly correlated with rating of the classrooms (rho = 0.402; p = 0.041), and textbooks (rho = 0.422; p = 0.014) as shown in Table 4.7. There was no correlation between recommending the program and the remaining resource factors.

Table 4. 4 Correlation between program recommendation and career progression, course completion and prior managerial exposure

Likelihood of recommendation				
Polychoric correlation	Career progression since	Correlation Coefficient	0.107	
	enrollment	Sig. (2-tailed)	0.589	
	Course completion	Correlation Coefficient	0.178	
		Sig. (2-tailed)	0.384	
	Prior exposure to managerial	Correlation Coefficient	0.038	
	role	Sig. (2-tailed)	0.817	

^{**} Correlation is significant at the 0.05 level (2-tailed).

Career progression after enrolment (p = 0.589), completing the program (p = 0.384) and prior exposure to managerial roles (p = 0.817) were not significantly correlated to the likelihood of recommending the program (Table 4.8).



4.7 Trend Analysis

Table 4. 5 Statistical test for linear trend

VARIABLE	P VALUE FOR TREND
Case based	0.9398
Relevance	0.6605
Alumni program	0.8249
Audiovisual	0.9434
Cafeteria	0.6284
Class assistant	0.6941
Classroom	0.71
Experience	0.2252
Library	0.7485
Modular	0.9013
Parking	0.8635
Productive sector	0.8068
Quality	0.0452
Security	0.0558
Syndicated room	0.481
Textbooks	0.6284

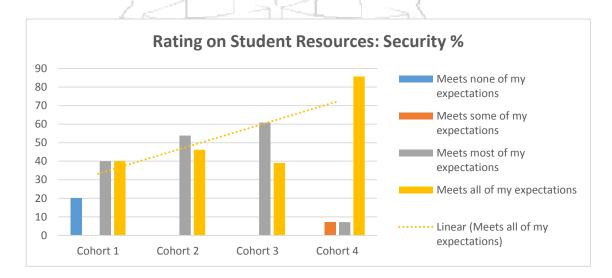


Figure 4.5 Linear trend for Security



Figure 4.6 Linear trend for Quality

On review for a linear trend across the modules, the only statistical evidence for a linear trend was noted for quality and security. Security was noted to be trending up and quality was noted to be trending down. Note that the respondents were 5 from cohort 1, 13 from cohort 2, 23 from cohort 3 and 14 from cohort 4.



CHAPTER FIVE:

DISCUSSION, CONCLUSION AND RECOMMENDATIONS

5.1 Discussion

The data reveals that the average SBS student enrolls on average 6.42 years after clearing their undergraduate. They mainly hear about the program through referrals. This is supported by the fact that the programs has a high net promoter score of 20 with 60% of the respondents being promoters.

The training offered is relevant with respondents reporting that the program better equipped them to handle their work assignments. Students are gaining skills that employers seek in MBA graduates of critical analysis, communication and people management. These are in line with the skills employers look for in MBA graduate (Tay, 2001). There are proposed areas of improvement though. Students recommend incorporation of project management, risk management, supply chain management and procurement.

Respondents highlighted the presence of international faculty, case based learning and professionalism of the staff and the international trip to be exceptional. Lecturers who are encouraging and constructive are appreciated by students (Hill, 2003). They however reported that the case based learning would have been more engaging had there been more local cases for discussion. There was a weak positive correlation between the modular model and recommendations by students to friends and colleagues to join the program. Respondents reported that it enabled those who are out of Nairobi town to attend classes and it allowed for breaks to catch up with work and family. The con is that it meant long hours in class, a mountain of work on return to the office and burn out towards the end of the program.

The respondents were not happy with the availability of parking which they found to be inadequate. The variety of the cafeteria food and the lack of a vegetarian option. Syndicate rooms were noted to be few and they lacked audio visual equipment. There was a positive correlation between recommending the program and the rating of the classrooms and the text books. Textbooks were noted to have a lot of the examples centered on the US healthcare system.

Majority of those who responded that they had fallen behind sited the research as their stumbling block. Those who had completed the program or were on course cited supportive environments at SBS, at work and at home coupled with self-discipline to be key.

60% of the students who have enrolled have seen their careers progress. There was no correlation with duration from undergrad to MBA, having attended another master's, having been exposed to managerial roles or having completed the program. This shows the need the market has for healthcare professionals with the relevant managerial and leadership skills to tackle health systems challenges.

The productive sector linkages variable had the lowest scores. Respondents reported that the linkages were inadequate. Cost of attending alumni events was noted to be prohibitive to some. This indicates that more needs to be done to build linkages between the university, government and firms (Ranga 2005).

5.2 Recommendations

Addition of project management, risk management, supply chain management procurement to the program should be considered when reviewing the course content. The program received approval for its international faculty, case based learning and professionalism of its staff. These are strengths that the institution should work to maintain. There is a need to develop local case based learning material. This will help the students to better relate to the content by utilizing challenges familiar to their operation environment.

A vegetarian option to cater for the needs of vegetarian students. Expansion of available parking space or reserving the available space to accommodate the cohort in session can be looked into. Complaints on the number of syndicate rooms imply that the student numbers may need to be managed to ensure adequacy of resources. Communication of the challenge in good time can be used as a learning opportunity to encourage students to improve on their prioritization and planning. Availability of audio-visual equipment in the syndicate rooms can aid the students to work on their assignments and improve on their presentation skills. A lot of the examples in the textbooks provided highlighted challenges in the western world that may not be transferable to a local setting. Text books with local examples would help students

relate better to the course content.

Research is a major hurdle for those who fall behind in the program. SBS needs to put more emphasis on empowering students to overcome this hurdle. Clearing certain chapters of a thesis should be made compulsory to clearing modules as you move through the program. Alternatives can be offered such as extra units for those who opt out of pursuing a research project.

The score on productive sector linkages indicates SBS is doing what most universities do by bringing in key opinion leaders as guest lecturers or invited guests during dinners such as alumni events or end of module mixers (Ssebuwufu 2012). These act as opportunities to interact and network with thought leaders to enrich the learning experience. Other forms and levels of partnerships need to be considered such as contract or sponsored or joint research, professional courses, consultancy, creating opportunities for student placements, staff exchange, developing local case based learning scenarios and joint curriculum development.

5.3 Limitations

An additional question asking students to weigh the significance they assigned to the measured parameters would have helped to gauge the importance of the various parameters when assessing their overall experience.

Inclusion of both current students and graduating students might have affected the data as some students would have gone through the whole program while others were on the program and having their judgment affected by their current challenges. Basically gathering data from two sets of cohorts with different views.

Data collected was qualitative in nature and therefore the researcher was required to analyze this data using content analysis. The method is subjective and involves a lot of decision making which can lead to different conclusions by different researchers while analyzing same research data.

Being an online questionnaire, the response rate was low. The format can be employed to be utilized as an exit interview for students on completion of their class work.

5.4 Recommendations for future studies

Future studies should incorporate the employer. What benefits they have received from having an employee who has been through this MBA, what challenges they have had with the modular model and the relevance of the course content. As the program seeks to produce employers, it will be interesting to track this cohort 5 or 10 years down the road to see if they have embraced entrepreneurship.

For the self-employed, a look at the stability of their business in terms of return on investment and other indices to compare before and after the MBA training can help determine the impact of the program. A look at SBS's ability to mobilize funds for running their programs as well as a look at the university faculty's contribution to research and industry projects should be incorporated in future studies. A further breakdown of the variables would help identify strengths and weaknesses. For instance, other studies have broken down infrastructure components review to include feedback on reliability, assurance, responsiveness and communication (Bigirimana, 2015).

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APPENDICES

Appendix 1: Questionnaire

Part 1

- 1. Title
- 2. First Name
- 3. Last Name
- 4. Sex
- 5. Marital status
- 6. Children?
- 7. Dependents who are not part of your nuclear family
- 8. Designation: Medical officer | Nurse | etc.
- 9. How many years after your undergraduate did you start your MBA?
- 10. Is this your first Master's program?
- 11. Where do you currently work?
- 12. Has your career progressed since enrolling for the program? Please elaborate.
- 13. As regards the discharge of your duties: based on your current position and comparing to people with other qualifications (not MBA) has the MBA been beneficial? Please elaborate.
- 14. How did you hear about this program? Please elaborate?
- 15. Have you completed the course? Please elaborate.
- 16. Had you been exposed to a managerial role before applying for the MBA?
- 17. What do you find to be exceptional about the program? Please elaborate.
- 18. What were your concerns prior to starting the program? Please elaborate.
- 19. How do you feel about your concerns after enrolling? Please elaborate.
- 20. Are there any notable improvements as a result of the MBA in your work/business/society? Please elaborate.
- 21. What are your professional future plans? Please elaborate.

Part 2

The following questions are rated on a scale of 1 to 4.

- 1 Meets none of my expectations, 2 Meets some of my expectations, 3 Meets most of my expectations and 4 Meets all of my expectations.
- 1. How would you rate the relevance of the modules? Please elaborate.
- 2. How would you rate the case based model of learning? Please elaborate.
- 3. How would you rate the modular model of the MBA? Please elaborate.
- 4. How would you rate the experience of faculty? Please elaborate.
- 5. How would you rate the quality of student resources:
- Classrooms
- Cafeteria
- Textbooks
- Library
- Parking
- Security
- Syndicate rooms
- Class assistant
- Audio-visual equipment
 Please elaborate on the above resources
- 6. How would you rate the quality of training? Please elaborate.
- 7. How would you rate the employability of skills imparted? Please elaborate.
- 8. How would you rate the university productive sector linkages? Please elaborate.
- 9. How would you rate the alumni program? Please elaborate.
- 10. Is there anything about the program you would like to see changed? Please elaborate.
- 11. Are you likely to recommend the program to a friend or colleague? Please elaborate.

Appendix 2: Consent form

PARTICIPANT INFORMATION AND CONSENT FROM

Evaluation of students' perception of the MBA (Healthcare Management)

program at Strathmore University

SECTION 1: INFORMATION SHEET-HEALTH PERSONNEL

Investigator: Dr. James Mokua Soki

Institutional affiliation: Strathmore Business School (SBS)

SECTION 2: INFORMATION SHEET-THE STUDY

2.1: Why is this study being carried out?

UT OMNE

To help the University identify and address areas of weakness regarding improving the

program to respond to market needs. This is relevant because good health is important

for sub-Saharan Africa to achieve its development goals. The questionnaire will

address the issues causing graduate unemployment in Africa, namely a) poor quality

of education, b) poor relevance of programs, c) poor employability skills and d) poor

university-productive sector linkages.

2.2: Do I have to take part?

No. Taking part in this study is entirely optional and the decision rests only with you.

If you decide to take part, you will be asked to complete a questionnaire to get

information on your experience in your time at Strathmore Business School. If you are

not able to answer all the questions successfully the first time, you may be asked to sit

through another informational session after which you may be asked to answer the

questions a second time. You are free to decline to take part in the study from this

study at any time without giving any reasons.

35

2.3: Who is eligible to take part in this study?

The eligible parties are those who were enrolled between 2013 and 2015 or Cohorts 1 to 3 who have completed the course work.

2.4: Who is not eligible to take part in this study?

- 1. Any member of the MBA in Healthcare Management cohort 1 to 5 who has not completed course work.
- 2. Any eligible participant who opts out of taking part in the study.

2.5: What will taking part in this study involve for me?

You will be approached via email and requested to take part in the study. If you are satisfied that you fully understand the goals behind this study, you will be asked to sign the informed consent form (this form) and then taken through a questionnaire to complete.

2.6: Are there any risks or dangers in taking part in this study?

There are no risks in taking part in this study. All the information you provide will be treated as confidential and will not be used in any way without your express permission.

2.7: Are there any benefits of taking part in this study?

The information will be used to improve quality and relevance of the MBA in Healthcare Management program at Strathmore Business School.

2.8: What will happen to me if I refuse to take part in this study?

Participation in this study is entirely voluntary. Even if you decide to take part at first but later change your mind, you are free to withdraw at any time without explanation.

2.9: Who will have access to my information during this research?

All research records will be stored in securely locked cabinets. That information may

be transcribed into our database but this will be sufficiently encrypted and password protected. Only the people who are closely concerned with this study will have access to your information. All your information will be kept confidential.

2.10: Who can I contact in case I have further questions?

you;

You can contact me, Dr. James Mokua Soki, by e-mail jamiesoki1@gmail.com, or by phone 0700586828. You can also contact my supervisor, Prof. Kokwaro, at the Strathmore Business School, Nairobi, or by e-mail gkokwaro@strathmore.edu.

ELECTRONIC CONSENT: Please select your choice below. You may print a copy of

this consent form for your records. Clicking on the "Agree" button indicates that:-• I have been informed about this study's purpose, procedures, possible benefits and risks.
• I have been given the opportunity to ask questions before I agree to give informed consent. • I have been told that I can ask other questions at any time. • I voluntarily agree to participate in this study. • I am free to stop this participation in the study at any time without the need to justify my decision. Please tick the boxes that apply to

Partic	ipation in the research study
	I AGREE to take part in this research
	I DO NOT AGREE to take part in this research
Storag	ge of information on the completed questionnaire
	I AGREE to have my completed questionnaire stored for future data analysis
I I	OO NOT AGREE to have my completed questionnaire stored for future data
	is



Completion of Online Research Ethics Review Submission

You have successfully submitted your application for ethics review "n/a"

Certificates awarded to: james soki

Research ethics review cycles: Ethics Review Cycle 06/04/2017 - 03:04:09

Date: 06/04/2017 - 03:04:18 RHInnO Reference Number: 16590