



THE EFFECT OF TOTAL QUALITY MANAGEMENT ON PERFORMANCE IN PUBLIC ENTERPRISE

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Abstract: *The study investigated the effect of Total Quality Management on the Performance of University of Nigeria Teaching Hospital Enugu (UNTH) and National Orthopedic Hospital Enugu. The specific objectives were to ascertain the extent to which leadership affect productivity, to determine the nature of the relationship between customer focus and customer satisfaction and to determine the effect of shared vision on effective service delivery. The research design adopted in the study was a survey research. The population size of 1210 out of which a sample size of 301 was realized using the Taro Yamene's formular at 5% error tolerance and 95% level of confidence. Instrument used for data collection was primarily questionnaire. A total number of 301 copies of questionnaires was distributed while 275 copies were returned. The descriptive research design was adopted for the study; three hypotheses were tested using Pearson's product moment correlation coefficient and linear regression statistic tools. The findings indicate that there is a positive relationship between leadership and productivity in organizations. Customer focus significantly affects customer satisfaction and that shared vision by all stakeholders has a significant positive effect on effective service delivery. The study concluded that Total Quality could be achieved if management is keen and workers motivated to achieve quality and satisfy the customers or patients for prosperity and business success. The study recommends that organizations should place "top management commitment to Total Quality Management" as the base or foundation.*

Keywords: *Total Quality Management, organizational performance*

INTRODUCTION

The concept of quality management (QM) is quite old and was first originated in Japan after the Second World War with emphasis on improving quality and using quality control tools in the manufacturing sector. Later the quality management concept moved to USA, UK and other countries and was applied initially in the manufacturing sector. Since then, the idea of



Quality management has been growing fast. It has now been taken a shape in a series of international standards in the ISO, 9000 series.

The force that generated the movement for quality improvement is the fierce competitiveness of the global market. In the early years of the quality trend, the focus on quality circles (Barra, 1983), quality control, and quality assurance (Ishikawa, 1991). Numerous approaches of quality management were suggested, in order to help industries improve efficiency and competitiveness through improvement of quality. One of the most popular and often recommended approaches is the philosophy of total quality management (TQM) that seeks to integrate all organizational functions to focus on meeting and surpassing customer's requirements and organizational objectives.

Total Quality Management is an integrated management philosophy and set of practices that emphasizes, among other things, continuous improvement, meeting customers' requirements, reducing rework, long-range thinking, increased employee involvement and teamwork, process, redesign, competitive benchmarking, team-based problem-solving, constant measurement of results and closer relationships with suppliers (Ross 1993).

Its adherents claim that managers can implement total quality management in any organization-manufacturing, service, non-profit or government and that it generates improved products and services, reduced costs, more satisfied customers and employees and improved bottom line financial performance (Walton 1986).

Although many adherents openly praise total quality management others have identified significant costs and implementation obstacles. Critics have suggested; for example, that total quality management entails excessive retraining costs, consumes inordinate amounts of management time, increases paper work and formality, demands unrealistic employee commitment levels, emphasizes process over results and fails to address the needs of small firms, service, firms, or non profits (Naj, 1993, Schaffer and Thomas 1992).

Total Quality Management is applicable to any organization irrespective of size, and motives, even the public sector organization are fast adopting the ideology in order to make them effective in meeting public demands. However, the adoption of the ideology by most organization has been hampered due to their non compliance with the procedures and principles of total quality management implementation. While some organization, run total quality management like a programme which they expect to function and perform the



magic all by itself, others have used a half hearted approach to it using some bits and pieces of the principles. This has accounted for the failure of most organization in meeting up to their expected target from implementing this ideology. There is need to continue to buttress the benefits that accrue to organizations from the implementation of total quality management especially in developing economics, such as Nigeria where the adoption of these principles seems far fetched to organizations. The Nigeria tertiary health institutions especially UNTH, Enugu and National Orthopedic Hospital, Enugu give a true picture of the shortcomings of organizations in their quest to make profit at the expense of quality. With the change going on in the country due to government reforms, the nature of competition seem to be changing from what it is used to be. The influx of foreign and local investors into different sectors of the economy has given rise to intense competition thus the need for organizations to look internally into their operational procedures and change strategically to meet up with these challenges.

In trying to gain competitive advantage, health institutions try to outshine their competitors by providing quality services that meet or exceed the expectation of customers. Thus, customer satisfaction in the health institutions is never ending as they face numerous challenges and competition daily. This makes quality management critical to the health institutions as they strive to continuously improve their services, to meet customers' expectation.

Total quality management enables innovativeness as it empowers employees to take decisions that affect their job. The implementation of Total quality management involves the buying in of different units involved in the process of service delivery into the ideology and practices of quality management, which should be championed by the leadership of the health institutions. So the support and primary activities of service delivery must inculcate quality in their activities.

STATEMENT OF PROBLEM

In the 1990's Total Quality Management applications to a number of areas in the private sector had been reported successful, such as banking and financial institutions (Latzko, 1986), health Care Institutions (Cunningham1991), and manufacturing and services institutions (Walton, 1986 1991). Total Quality Management applications continue to carry on this record of achievement with several success stories in recent years in the same areas



of banking and financial Institutions (Paschal and Ahmed 2008), health care institutions (Joyce, et al, 2006), and manufacturing and services institutions (Buckman, 2009). The “Customers” in these applications are often understood as the consumers the citizens or “external customers’ of the organizations.

Companies like Proctor and Gamble, Nestle, Shell oil company, Unilever, Emirates Airline etc having quality as the focus have gained customers’ reputation, profit and business worldwide. Generally, competitive advantage suggest that each organization has one or more of the following capabilities when compared to its competitors, such as lower prices, higher quality, high dependability and shorter delivery time. These capabilities will enhance the organizations overall performance (Mentzer, 2000).

The reason quality has gained such prominence is that organizations have gained an understanding of high cost of poor quality. Quality affects all aspects of the organization and has dramatic cost implications. The most obvious consequence occurs when poor quality creates dissatisfied customers and eventually leads to loss of business. Other consequences, include; customer complaints, product returns and repairs, to warranty claims, recalls, and even litigations, lost sales and lost customers (Rosenberg, 1996).

The problems of poor services have consistently characterized the Nigerian tertiary health institutions with different stakeholders accusing one another for inefficiency in service delivery (This Day, 2014). This has prompted the researcher’s interest on the topic.

OBJECTIVES OF THE STUDY

The specific objectives of the study are as follows:

1. To ascertain the extent at which leadership affect productivity
2. To determine the nature of the relationship between customer focus and customer satisfaction.
3. To determine the effect of shared vision on effective service delivery.

RESEARCH QUESTIONS

The research is designed to provide answers to the following questions:

- i. To what extent does leadership affect productivity in two federal tertiary health institutions in Enugu State.
- ii. To what extent does customer focus relate to customer satisfaction in the two teaching hospitals under study.



iii. To determine the extent of shared vision on effective service delivery.

RESEARCH HYPOTHESIS

Three research hypotheses have been formulated to guide the study. They are as follows:

- i) Leadership to a large extent does not enhance productivity in the tertiary health institutions under study
- ii) There is no significant relationship between customer focus and customer satisfaction
- iii) Shared vision to a large extent does not sustain effective service delivery.

SCOPE OF THE STUDY

The focus of the study is to determine the extent to which total quality management enhances performance in the tertiary health institutions in Enugu state. These tertiary health institutions studied includes, the University of Nigerian Teaching Hospital, Ituku/Ozalla and the National Orthopedic Hospital Enugu.

LITERATURE REVIEW

There is no consensus on the definition of quality. There are many definitions of Total Quality Management, Youssef, Boyd, Williams (1996:128), defined Total Quality Management as "An over all philosophy whose objectives is to meet or exceed the needs of the internal and the external customer by creating an organizational culture in which everyone at every stage of creating the product as well as every level of management is committed to quality and clearly under its strategic importance". Demirbag, Tatoglu, Tekin Kua, Zain (2006:829) on the other hand, defined total quality management as "A holistic management philosophy aimed at continuous improvement in all functions of an organization to deliver services in line with customer's needs or requirements under leadership of top- management". Christofi, Sisaye, Bodnar (2008:34) defined total quality management as "A supply-chain-wide quality commitment from the supplier, to the producer, to the consumer of an organization, in order to achieve excellence in production and service management". Total quality management is defined as an action plan to produce and deliver commodities or service, which are consistent with customers' needs or requirements by between, cheaper, faster, safer, easier processing than competitors with the participation of all employees under top management leadership (Lakha, Pasin, Limari 2006:51).



Dale (1999), total quality management is described as the mutual cooperation of everyone in an organization and associated business processes. In order to produce products and services which meet and hopefully exceed the needs and expectations of customers. Oakland (1989), described TQM as an approach to improve competitiveness, efficiency, and flexibility for a whole organization. Shiba, Araham, Walden (1993:92) defines TQM as an evolving system, consisting of practices, tools, and training methods for managing organizations in a rapid changing context.

Another, definition, provided by Dahlgaard, Kristensen, Kenji (1999:63), describes TQM as a corporate culture that characterized by increased customer satisfaction through continuous improvement, involving all employees in the organization. Deming (1986), Feigenbaum (1986), and Juran (1988) defined quality due to customer satisfaction, expectations, and needs, of quality as “fitness for use”. Ifan (1989) defined TQM as an approach for continuously improving of quality of service and the delivered goods in organizations through participations from all individuals. Similarly, Gao (1991) defined TQM as a philosophy that help organization to generate efficiency and quality of goods and services through increasing satisfaction of customers and improving the quality of products and services. TQM is an approach whose goal is to maximize competitiveness through continuous improvement of product quality, human resources, services, processes and environment (Jumenez & Martinez- Costa, 2009). TQM can be explained as a relationship between systems and the implementation of quality, closely related to competitiveness and performance (Azizan, 2010).

ORGANIZATIONAL PERFORMANCE

Performance measurement is very important for the effective management in organization. According to Deming, without measuring something, it is impossible to improve it. Organizational performance refers to how well an organization achieves its market-oriented goals as well as its financial goals (Li et al, 2006). A number of Prior studies have measured organizational performance using both financial and market criteria, including return on investment, market share, profit margin on sales, the growth of return on investment, the growth of sales, and the growth of market share (Stock et al, 200). In line with the above literature, the same items will be adopted to measure organizational performance in this study.



THEORETICAL REVIEW

TQM was first developed in Japan and then spread in popularity. However, while TQM may refer to a set of customer based practices that intend to improve quality and promote process improvement, there are several different theories at work guiding TQM practices:

Deming's theory: Deming's theory of total quality Management risks upon fourteen points of management. He identified, the system of profound knowledge and the shewart cycle (Plan-Do-check —Act).He is known for his ratio- Quality is equal to the result of work efforts over the total costs. If a company is to focus on costs, the problem is that costs rise while quality deteriorates. Deming's system of profound knowledge consists of the following four points:

- **System Appreciation:** an understanding of the way that the company's process and systems work.
- **Variation knowledge:** an understanding of the variation occurring and the causes of the variation.
- **Knowledge theory:** The understanding of what can be known.
- **Psychology knowledge:** The understanding of different types of knowledge associated with an organization, then quality can be broached as a topic.

The fourteen points of Deming's theory of total quality management are as follows: (1) create constancy of purpose (2) Adopt the new philosophy (3) stop inspections (4) don't award business upon the price (5) Aim for and service improvement (6) Bring in cutting-edge on the job training (7) 1mplemenion cutting-edge methods for leadership (8) Abolish fear from the company (9) Deconstruct departmental barriers (10) Get rid of quantity-based work goals (11) Get rid of quotas and standards (12) Support pride of craftsmanship (13) Ensure everyone is trained and educated (14) make sure the top management structure supports the previous thirteen points

Crosby's theory: Philip Crosby is another person credited with starting the TQM movement. He made the point, much like Deming that if you spend money on quality, it is money that is well spent. Crosby based on four absolutes of quality management and his own list of fourteen steps to quality improvement. Crosby's four absolutes are: (a) We define quality as adherence to requirements (b) Prevention is the best way to ensure quality (c) Zero defects



(mistakes) is the performance standard for quality (d) quality is measured by the price of non-conformity. The fourteen steps to continuous quality improvement for Crosby are:-

1. Attain total commitment from management
2. Form a quality improvement team
3. Create metrics for each quality improvement activity
4. Determine cost of quality and show how improvement will contributed to gains
5. Train supervisors appropriately
6. Encourage employees to fix defects and keep issues logs
7. Create zero defects committee
8. Ensure that employees and supervisors understand the steps to quality.
9. Demonstrate your company's commitment by holding
10. Goals are set On 30,60. or 90day schedule
11. Determine root causes of errors, remove them from processes.
12. Create incentives programs for employees
13. Create a quality council and hold regular meetings
14. Repeat from step one

Joseph Juran's Theory: Joseph Juran is responsible for what become as "Quality Trilogy". The quality trilogy is made up of quality planning, quality improvement and quality control. If a quality improvement project is to be successful, than all quality improvement actions must be carefully planned out and controlled. Juran believed there were ten steps to quality improvement the steps are:

- (1) An awareness of the opportunities and needs for improvement must be created
- (2) Improvement goals must be determined
- (3) Organization is required for reaching the goals
- (4) Training needs to be provided
- (5) Initialize projects
- (6) Monitor progress
- (7) Recognize performance
- (8) Report on results
- (9) Track achievement of improvements
- (10) Repeat



The EFQM Framework: The European foundation for quality management (EFQM) model is based upon nine criteria for quality management. There are five enablers (criteria covering the basis of what a company does) and four results (criteria covering what a company achieves). The result is a model that refrains from prescribing any one methodology, but rather recognizes the diversity in quality management methodologies. The EFQM nine criteria are:

1. **Focus on Results:** Pleasing company stakeholder with results achieved by stakeholders is a primary focus.
2. **Focus on customers:** it is vital that a company's quality management leads to customer satisfaction.
3. **Constancy of Purpose and consistent visionary leadership:**
4. **Process and facts form the management focus:** management breaks down everything into systems, processes and facts for easy monitoring.
5. **Training and involving employees:** Employees should receive professional development opportunities and be encouraged to remain involved in the company.
6. **Continuous learning:** everyone should be provided with opportunities for learning on the job:
7. **Developing partnerships:** it is important to encourage partnerships that add value to the company's improvement process
8. **Social responsibility of the corporation:** The company should always act in a way where it is responsible towards the environment and society at large.

Ishikawa's Theory: Dr Kaoru Ishikawa is often known for his name sake diagram, but he also developed a theory of how companies should handle their quality improvement projects. He takes a look at quality from a human stand point and points out seven basic tools for quality improvement. The tools are:

1. **Pareto Analysis:** Pareto Analysis helps to identify, the big problems in a process.
2. **Cause and effect diagrams:** This helps to get to the root cause of problems.
3. **Stratification:** This analyses how the information that has been collected fits together
4. **Check sheets:** Look at how often a problem occurs
5. **Histograms:** Monitor variation
6. **Scatter charts:** demonstrate relationships between a variety of factors



7. Process control charts: A control chart helps to determine what variations to focus upon.

EMPIRICAL REVIEWS

AlJaz Iman (2006). The impact of the modern systems cost to control the overall quality in industrial farms. The work aimed to study the system, costs a tool to apply the concept of total quality and as a tool to adjust the overall quality in industrial enterprises. The study pointed out the importance of having quality products and comprehensive study highlighted the most important concepts, tools and techniques for managing the overall quality. It shows the important role of modern systems as a tool for cost control, organization and coordination and enhances the performance and quality control in industrial enterprises Sudanese. It concluded that the system is based on a comprehensive quality control systems and methods of modern costs mainly. It recommends the use of trainings to ensure that the cost of poor quality does not occur in organisations.

Al-Amin Taha (2005), the impact of the application of the concept of total quality management (TQM) on the institutions of the state. This aims to improve the performance of organizations through the interest component of quality. The study aimed to establish a relationship between the application of total quality management and increase productivity, and that the application of total quality management means increased profitability. It concluded that there is a weakness in the official interest by the state apparatus of administrative development ordered the overall quality and not give it enough priority and that most of the public institutions that have tried total quality management implementation was a result of the initiatives of self-originated from within, the concepts and principles of total quality management in its ability to strengthen authority competitive capabilities in the future, disinterest supervisory authorities and other development-related administrative concepts of total quality management and the provision of material and moral support to the body in order to develop the experience of the application. It recommended that overall TQM practices improve all performance measures.

No man Al-Musawi (2003), entitled: Developed a tool to measure the total quality management in higher education institutions. The study aimed to build a tool to measure the total quality management in higher education institutions through the verification from sincerity and persistence and their applicability in the educational institutions and the study



found building measure included 48 paragraph divided into four areas of quality management in institutions of higher education, a quality requirements and follow up and the development of human resources and decision making, community service and study recommended the application of this measure in-higher education institutions in the Arab region.

Waks and Frank (1996) titled (Entrance list of total quality management: Principles and 150 standards (9000) in engineering education). The study aimed to identify the principles and standards of total quality management and discussed the principles and strategies of total quality management in engineering education has also developed several tools and methods for managing the overall quality suitable for the effectiveness of education and suggested a course for total quality management includes discussions and readings and case study and suggestions

Mitivani (1995) entitled (The application of total quality management in education efforts, modern and future trends). The study included four theoretical trends in the quality of education: the definition and procedures, and normative studies, and conceptual models and the application and evaluation. The study includes on the stages of the application of total quality management in education which is awareness and commitment, planning, program implementation and evaluation and future trends to those aspects of the proposed.

Alexander &Keeler (1995) entitled: (The application of the entrance of Total Quality Management TQM in Education). The results indicated that the total quality management is working to solve educational problems, has been organizing this study in four sections linked model of total quality management: application form (TQM) in business and industry, schools and language, use of the formula rhetorical. It recommends that effective strategic quality planning efforts improve employee performance

Study of Bin Billa Hamed (2004) (the impact of the application of the concept of total quality management on job satisfaction).

The problem of the study is that some businesses lack the application of some of the methods of modern management, which negatively affects the continuity, including the manner of total quality management, which works to upgrade the performance and provide product and service excellence, so the quest is considering the extent to which the



application of total quality management in the factory (Bizyanos) water invasive satisfaction employees and thus improve the performance of increased production. It found that the most important requirements of total quality management need persuasion and consent of senior management of the importance of these modern management and require TQM. order all of the senior management staff to make effective efforts to apply this administration which in turn help upgrade management as the application of TQM comprehensive application leads to job satisfaction for employees because TQM aims to improve the work at each stage is also working on improving the performance of employees and their attention and improve their living conditions.

Wen (2009) explains how QTM effects customer satisfaction in the service sector: The researcher investigate the relationship between TQM practices and customer satisfaction as perceived by manager's perspectives in the services sectors. The different TQM constructs considered include leadership, human resource focus, process management, customer focus, strategic planning, information and analysis and their effect on customer satisfaction is measured for both internal and external customers. The results have shown that leadership commitment has a strong effect on customer satisfaction while customer focus, information and analysis, human resource focus are found positively related to customer satisfaction.

METHODOLOGY

The methods of data collection: Information and data from secondary sources: This have been collected from Journals, books thesis, and the information network (Internet).

Primary Source: This was obtained through a questionnaire that was designed for the purpose of testing hypotheses. **The sample of the study:** The population of the study included all the senior and junior staff of the two federal tertiary health institutions in Enugu. The population size per health institutions is given below:

Health Institutions	Population Per health institutions
1. University of Nigeria Teaching Hospital, Enugu	878
2. National Orthopedic Hospital Enugu	332
Total	1210



A sample size of 301 was obtained from the population of 1210 at 5% error tolerance and 95% degree of freedom using the Taro Yamane's statistical formula. 275 (91%) of the questionnaire distributed were returned while 26(9%) of the questionnaire distributed were not returned. The questionnaires were designed in Likert scale format.

A pretest on the questionnaire was conducted to ensure the validity of the instrument. The data collected were presented in frequency tables, Pearson product moment correlation coefficient and linear regression statistical tools were used to test the hypotheses.

DATA ANALYSIS AND DISCUSSION

The data obtained from the field were presented and analyzed with descriptive statistics to provide answers for the research questions while the corresponding hypothesis were tested with Pearson's product moment correlation coefficient and linear regression at 0.05 alpha level.

The analyses of the responses to the three objectives are presented below.

Table Coded Responses on Leadership and productivity, in the Health Institutions

S/N	Questionnaire Items	Strongly Agree Frequency	Agree Frequency	Undecided Frequency	Disagreed Frequency	Strongly Agreed Frequency	Total Frequency
1.	Management takes the responsibility for quality performance	220	38	3	9	5	275
2.	Management views improvement in quality as away to increase the profit	243	20	2	6	4	275
3.	Management has objectives for quality	251	17	2	3	2	275

Coded responses on customer focus and customer satisfaction

4.	Top management ensures that each new product and service meets customer expectations on customer focus and customer satisfaction	210	46	10	7	2	275
5.	Frequently are in close contact with their customers	240	25	2	6	2	275
6.	Activity and regularly seek customer inputs to identify their needs and expectations.	230	31	8	4	2	275
7.	Link customer satisfaction with our internal performance indicators	210	35	12	10	8	275
8.	Determine customer satisfaction relative to the customer satisfaction by the competitors on shared vision and effective service delivery	205	35	15	13	7	275



Coded responses on shared vision and effective service delivery

9.	Employee turnover rate is low	250	18	2	23	2	275
10.	Market share of our hospital is high	190	61	15	7	2	275
11.	The number of patients in our hospital has increased	248	13	8	4	2	275
12.	The revenue from over the last three years is high.	231	28	10	3	3	275

HYPOTHESIS ONE

Model Summary

Model	R	p Square	t	Sum of the square	F	Adjusted R Square	Std. Error of the Estimate	Durbin Watson
1	.869 ^a	.755	21.531	49.593 16.057	179.134	.751	.52616	.273

a. Predictors: (Constant), Leadership b, Dependent Variable: productivity

R = 0.869

R² = 0.755

F = 179.134

T = 21.531

DW = 0.273

Interpretation:

The regression sum of squares (49.593) is greater than the residual sum of squares (16.057), which indicates that more of the variation in the dependent variable is explained by the model.

The significance value of the F statistics (0.000) is less than 0.05, which means that the variation explained by the model is not due to chance.

R, the correlation coefficient which has a value of 0.869, indicates that there is positive relationship between leadership and productivity. R square, the coefficient of determination, shows that 75.5% of the variation in productivity is explained by the model.

With the linear regression model, the error of estimate is low, with a value of about .52616.

The Durbin Watson statistics of 0.273, which is not more than 2, indicates there is no autocorrelation.

The leadership coefficient of 0.869 indicates a positive significance between leadership and productivity, which is statistically significant (with t = 21.531). Therefore, the null hypothesis should be rejected and the alternative hypothesis accordingly accepted.



HYPOTHESIS TWO

Table Descriptive Statistics

	Mean	Std. Deviation	N
Customer focus	2.0826	1.31097	550
Customer satisfaction	2.0435	1.25690	550

Table Correlations

		Customer focus	Customer satisfaction
Customer focus	Pearson Correlation	1	.728
	Sig. (2-tailed)		.000
	N	550	550
Customer satisfaction	Pearson Correlation	.728	1
	Sig. (2-tailed)	.000	
	N	550	550

** . Correlation is significant at the 0.01 level (2-tailed).

The table shows the descriptive statistics of the Customer focus via, Customer satisfaction with a mean response of 2.0826 and std. deviation of 1.31097 for Customer focus and a mean response of 2.0435 and std. deviation of 1.25690 for Customer satisfaction and number of respondents (604). By careful observation of standard deviation values, there is not much difference in terms of the standard deviation scores. This implies that there is about the same variability of data points between the dependent and independent variables.

The table is the Pearson correlation coefficient for customer focus and customer satisfaction. The correlation coefficient shows 0.728. This value indicates that correlation is significant at 0.05 level (2tailed) and implies that there is a significant positive relationship between customer focus and customer satisfaction($r = .728$). The computed correlations coefficient is greater than the table value of $r = .195$ with 548degrees of freedom ($df = n-2$) at alpha level for a two-tailed test ($r = .728, p < .05$). However, since the computed $r = .728$, is greater than the table value of 195 we reject the null hypothesis and conclude that there is a significant relationship between customer focus and customer satisfaction($r = .728, P < .05$).



HYPOTHESIS THREE

Model summary^b

Model	R	R Square	Sum of the Square	Adjusted R Square	Std. Error of the Estimate	Durbin Watson	t	F	
1	.844 ^a	.712	43.622 17.6281	.707	.55130	.309	6.541	143.525	.309

a. Predictors: (Constant), Share vision

b. Dependent Variable: Effective service delivery

R = 0.844

R² = 0.712

F = 143.525

T = 6.541

DW = 0.309

Interpretation:

The regression sum of squares (43.622) is greater than the residual sum of squares (17.628), which indicates that more of the variation in the dependent variable is explained by the model.

The significance value of the F statistics (0.000) is less than 0.05, which means that the variation explained by the model is not due to chance.

R, the correlation coefficient which has a value of 0.844, indicates that there is positive relationship between share vision and effective service delivery. R square, the coefficient of determination, shows that 71.2% of the variation in effective service delivery is explained by the model.

With the linear regression model, the error of estimate is low, with a value of about .55130. The Durbin Watson statistics of 0.309, which is not more than 2, indicates there is no autocorrelation.

The share vision coefficient of 0.844 indicates a positive significance between share vision and effective service delivery which is statistically significant (with t = 6.541). Therefore, the null hypothesis should be rejected and the alternative hypothesis accordingly accepted.



CONCLUSION

Quality could be achieved if management is keen and workers motivated to achieve quality and satisfy the customers for prosperity and business success. The analysis indicates that the data supports twelve significant relationships postulated in the study hypotheses. These results shed light on the precise nature of the inter relationships among the quality management practices and manner in which these practices influence measures of organizational performance.

RECOMMENDATIONS

1. Placing “top management” commitment to total quality management as the base of foundation is recommended. It concluded that without the visible and active support of the senior officers and top management, total quality management programme is unlikely to succeed. Once the foundation is in place, the second pillar of TQM is “customer focus and satisfaction. Thus service industries must continuously evaluate the customer perceptions and expectations on regular basis for continuous improvement. Measure need to be made where improvement is possible rather than merely monitoring people’s work.
2. Top management of service organizations needs to understand the importance of quality culture as a strategic weapon.
3. Regular participation of top management team in the process will motivate employees to take active part in quality activities
4. Service organizations needs to train and educate their employees regularly on industries operation.
5. Managers and practitioners of service organizations should also consider suppliers or patients as important business partners. They have to be involved in development of improved process, quality information and data management and initiating the quality policy. This may result to better quality and hence, increased customer satisfaction.

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