

BINDURA UNIVERSITY OF SCIENCE EDUCATION



**FACULTY OF COMMERCE
DEPARTMENT OF ECONOMICS**

**THE EFFECTIVENESS OF PROCUREMENT POLICIES AND
PROCEDURES IN THE PUBLIC HEALTH SECTOR IN ZIMBABWE: A
CASE STUDY OF PARIRENYATWA GROUP OF HOSPITALS (MINISTRY
OF HEALTH AND CHILD CARE).**

**BY
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APPROVAL FORM

Title: the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. A case study of Parirenyatwa Group of Hospitals (Ministry of health and child care)

To be completed by the student

I certify that this dissertation meets the preparation guidelines as presented in the Faculty guideline and instructions for typing dissertations.

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Date

To be completed by the supervisor

This dissertation is suitable for submission to the Faculty.

This dissertation has been checked for conformity with the Faculty guidelines.

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To be completed by the department chairperson

I certify to the best of my knowledge that the required procedures have been followed and the preparation criteria has been met for this dissertation.

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(Signature of Supervisor)

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Date

DEDICATION

I dedicate this project to the Almighty, my parents Mr and Mrs Ndulo, my siblings Andrew, Varaidzo, Joakim, Nattly and Kyle and all those who supported me in the completion of this project. May God bless you in all your endeavors!

ABSTRACT

The study evaluated the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe with the Parirenyatwa Group of Hospitals as a case study, one of the largest referral hospitals in Zimbabwe. This study aimed to assess the effectiveness of procurement policies and procedures in the public health sector with a focus on identifying areas of improvement to enhance efficiency and quality of patient care. The research employed a both qualitative and quantitative approach with a sample size of 22 participants. Data collection was done through semi structured interviews, observations and questionnaires with procurement officers, hospital staff and management and was analyzed using SPSS and presented on graphs, tables and pie charts.

The findings of the study reveal that while procurement policies and procedures exist, compliance and enforcement of these policies are weak and ineffective, resulting in challenges such as delays in procurement processes, inability to respond to emergencies, duplication of efforts, and inadequate supply of essential medical supplies. The study recommends a review of procurement policies and procedures, greater accountability, and capacity building among procurement officers, as well as collaboration between all stakeholders involved in procurement process to enhance the efficiency and effective public health service delivery in Zimbabwe.

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LIST OF ACRONYMS AND ABBREVIATIONS

PGH – Parirenyatwa Group of Hospitals

Mohcc – Ministry of Health and Child Care

PPDPA – Public Procurement and Disposal of Public Assets Act

PPOA – Public Procurement and Oversight Authority

PRAZ – Procurement Regulatory Authority of Zimbabwe

MCAZ – Medical Association of Zimbabwe

PHS – Public Health Sector

S.I – Statutory Instrument

CHAPTER I

INTRODUCTION

1.0 Introduction

The effectiveness of procurement policies and procedures in the public health sector has been an area of interest over the years in developing countries worldwide particularly in Zimbabwe. The effectiveness of procurement policies has a direct impact on the social and economic welfare of many especially the poverty stricken rural people of Zimbabwe. The research is to focus on assessing the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. A case study of Parirenyatwa group of hospitals.

1.1 Background of the study

The public sector is responsible for funding a significant portion of public health expenditures, estimated to be around 70%. The process of purchasing goods and services, or works by government agencies or public bodies is an important area where savings and efficiency can be achieved. Its functioning is controlled by national and international legislative. The healthcare sector is a complex area for public procurement in every country due to the need for special and sophisticated technology and materials (Caparelli et al, 2015), hence the need to set a framework which provide guidelines, policies and procedures that govern the procurement of all healthcare necessities.

Procurement policies and procedures are extremely important for all procurement activities, and they may also involve other activities related to goods and services contracts throughout their lifespan. Procurement policies refer to a defined set of guidelines and protocols that are implemented to regulate and systematize the process of obtaining required goods and services by an organization in order to ensure a smooth and productive operation. From a global perspective, public procurement policies and procedures have been enacted by various governments through the establishment of

laws that govern the procurement processes by outlining the guidelines to effective public procurement so as to ensure a higher level of compliance, transparency, efficient and effective use of public funds for the betterment of the economy and the attainment of value for money. 15% of the global GDP is thought to be made up of public procurement spending.

In 1999, the World Bank conducted its initial evaluation. The World Bank issued recommendations based on the evaluations to implement systemic and legislative reforms for an exceptional and successful procurement environment. In 2002, the Government of Pakistan came to the decision of creating the Public Procurement Regulatory Authority (PPRA) at a national level, through the Public Procurement Regulatory Authority Ordinance. This was followed by the introduction of Public Procurement Rules in 2004. This resolution was formulated after engaging in discussions with relevant stakeholders and international contributors. The PPRA is an independent agency tasked with making recommendations for legislation and rules governing public procurements. It is also accountable for keeping an eye on how federal procuring agencies are performing and how well procurement regulations are being applied with an aim to improve management, transparency, governance, and achieving value for money.

Moving on, from a regional perspective, some African countries like Kenya adopted the Public Procurement and Disposal Act, The Public Procurement Oversight Authority (PPOA), which was established by the PPDA, was given the primary responsibility of ensuring that the Act's procurement guidelines were followed. In order to accomplish this, the PPOA must provide direction, establish standards, train procurement firms and professionals, and offer government advice on policy matters. The current responsibility of the Public Procurement Regulatory Authority (PPRA) is to supervise the enforcement of procurement policies to assure that Small and Medium-sized Enterprises (SMEs) are given the chance to take part in public purchasing. Additionally, they aim to enhance the skills of procurement personnel to ensure efficient procurement processes. It also focuses on enhancing suppliers' capability, allowing them to conduct business more effectively with the public sector.

There are several measures that could be implemented, such as constructing communication channels within the Public Procurement Regulatory Authority (PPRA) and procuring entities to enhance the flow of information about procurement opportunities. They could also work with the Government Secretariat in the Office of the President to promote the use of e-procurement. Furthermore, collaborating with banks to facilitate access to financial resources for SMEs and comparing existing policies are additional options. These steps were proposed by Mwiriki (2007). Since the PPDA and Regulations were passed into law, a solid legislative framework with a separate hierarchical structure has been established for public procurement in the health sector in Kenya.

The PPDA lays out in detail the procedures to be followed for submitting, receiving, and opening tenders as well as the rules and deadlines for advertising, the technical specifications and content of tender papers, assessment and award criteria, and the organization of the complaints system. However, although these policies have been put in place an assessment conducted by the World Bank proved that, the public procurement policies and procedures put in place are ineffective as procurement activities are still full of secrecy, corruption and poor resource management thereby undermining service delivery in the public health sector. Ntayi (2009) suggests that the public health sector is performing inadequately due to procurement structures, policies, and procedures that are inefficient and ineffective. Moreover, the lack of enforcement of procurement regulations has resulted in violations of those regulations without any repercussions.

In the Southern Africa, Zimbabwe over the past years ,the country's largest central hospitals have been faced with many challenges in providing super-specialist healthcare services to the nation (Magaya and Chidhawu,2016) given that there are quite a number of procurement policies and procedures at hand which govern the procurement of vital healthcare equipment or facilities and this has become a major cause of concern, hence the need to carry out this research in order to measure the effectiveness of various procurement policies and procedures in the public health sector. All public institutions are governed by different procurement policies and procedures established during or after the enactment of laws and regulations. The Government of Zimbabwe enacted the Public Procurement and Disposal of Public Assets Act chapter (22:23) in January 2018

to improve transparency, fairness, competitive bidding and value for money in procurement activities. The Act seeks to regulate all procurement disposal of public assets undertaken by public entities in Zimbabwe.

The legislation paved way for the establishment of the Procurement Regulatory Authority of Zimbabwe (PRAZ), whose role is to provide oversight and regulation of procurement activities and promote compliance with the Act. The PRAZ determines policies and strategies for procurement, enforces procurement regulations, undertakes investigations, and provides advice on procurement matters to stakeholders.

To ensure a robust and effective public procurement system in Zimbabwe, the government also adopted modern Public Procurement Regulations. These regulations provide for, among others, procurement planning and budgeting, procurement methods, bidding requirements, evaluation and award criteria, performance monitoring, and reporting.

In addition, Standard Bidding Documents and Guidelines were also adopted to provide a uniform and standardized framework for procurement activities. This framework covers the preparation of procurement documents, advertisement of procurement opportunities, preparation of bids, conducting bid evaluations, transparency, and accountability.

Overall, these measures aim to promote transparency, accountability and efficiency in public procurement activities in Zimbabwe, enhance competition, promote accountability and value for money, and reduce corruption-related risks. This does not leave out the public health sector as it is among other public institutions and this calls for the adherence to the procedures and policies outlined by the Act, however the question remains into play on how effective are the policies and procedures laid out by the PPDPA ACT to the public health sector, hence the need for this research.

Procurement policies and procedures are extremely significant in all procurement activities since they are involved in every stage of the purchasing cycle, starting the initial considerations of needs identification or evaluation, through the procurement plan and budgeting stage, bid evaluations, implementation of contracts, contract

amendments, and performance audits. This observation was made by the OECD in 2013. In some cases, procurement policies and procedures may also encompass other activities that are connected to the entire purchasing lifecycle, including the disposal of goods that have been bought. Bartik (2004) suggests that this should be included where applicable. All the above generates the centre of the research as it will explore the effectiveness or impact of the procurement policies and procedures in the public health sector with reference to Parirenyatwa Group of Hospitals (PGH) under the Ministry of Health and Child Care (Mohcc).

1.2 Statement of the problem

Despite all the laid out procurement rules and regulations, procurement policies and procedures dominating in the public health sector which are meant to ensure fairness in the procurement process that provide value for money, the procurement process in real practice seems to be inefficient, ineffective, corrupt and grounded in undercutting of costs leading to wastage of inadequate resources and provide opportunities for abuse and malpractice (Ngari, 2012). This has been noted by the country's largest central hospitals mainly Parirenyatwa Group of Hospitals running short of major medical supplies such as pharmaceutical drugs, surgicals, safe clothing for health workers among other necessities (Mapani, 2015). An audit conducted by the Chief Accountant Auditor General at United Bulawayo hospital revealed a lot of irregularities such as procurement processes not being adhered to, goods and services not conforming to end user's specifications and long hierarchical structures (Wilding, 2008).

Bidder's often experience unnecessary delays or red tape in the procurement process, which impede their ability to bid, deliver goods, or receive payment for debts. Government officials also raise concerns about the extended lead times. Therefore, the writer seeks to explore the effectiveness of the procurement policies and this has become the major concern of the research thereby forming the center of the area of study in an effort to explore and investigate on the effectiveness of the laid out procurement policies and procedures. Therefore, this study assess the effectiveness on the new public procurement policies and procedures whether they are the cause of poor performance in the public health entities.

1.3 Purpose of the study

The objective of this study is to assess the effectiveness of procurement policies and procedures in the public health sector, with a specific focus on the Parirenyatwa Group of Hospitals. The study aims to evaluate the extent to which procurement policies and procedures are being implemented, identify any challenges or shortcomings that may hinder efficiency and effectiveness of the procurement policies, and propose strategies for improving procurement processes in the public health sector. Ultimately, the study seeks to contribute to a better understanding of procurement practices in the public health sector and provide recommendations for enhancing their effectiveness.

1.4 Objectives of the Research

The researcher looked into the following objectives:

1. To assess the efficiency and effectiveness of the procurement policies and procedures used in the public health sector, in particular Parirenyatwa Group of Hospitals.
2. To determine the objectives of the public procurement policies and procedures.
3. To come up with possible solutions which the public health sector need to embrace in order to enhance the effectiveness of the public procurement policies and procedures.

1.5 Research Questions

1. How effective are the procurement policies and procedures used in the public health sector?
2. What are the main objectives of the public procurement policies and procedures in the public health sector?
3. What can be done to enhance the efficiency and effectiveness of the procurement policies and procedures in the public health sector?

1.6 Significance of the study

The study is of great key significance to a wide range of interested parties that is the stakeholders including various organizations. The findings and recommendations of the research will assist the various stakeholders in gaining an insight and understand the paragon of all their operations. After the completion of this great project, the study will attract the attention of many as it will pose a huge benefit to the following groups of stakeholders:

1.6.1. To the researcher

The study provides comprehensive as well as systematic insight to state procurement policies and procedures .It provides room to strike a balance or link the gap between theory and practice.

1.6.2. To the policy makers

The findings will assist the policy makers (PRAZ&MCAZ) in quality decision making and enable them to put in place policies guiding running of public procurement institutions in Zimbabwe.

1.6.3. To the institute (PGH)

The thesis will act as another component of value addition to help the public health sector (PGH under The Ministry of Health and Child Care in particular) to through the identification of knowledge gaps and the mitigatory measures to the problem in question ,that is efficiency and effectiveness of procurement policies and procedures in the public health institutions. The findings and recommendations of the study will assist the public health institutions in both policy and procedure formulation, implementation, monitoring and evaluation which will enhance their effectiveness and efficiency of the procurement function.

1.6.4. To Bindura University of Science Education

The study will provide literature for future references to those students who may be interested in undertaking the research topic thus providing a ground for continued research.

1.7 Assumptions

In order for this research to be possible the researcher found it necessary to come up with possible assumptions around the following variables;

- ✓ All the basic necessities required to undertake this research will be available as and when they are required.
- ✓ All the respondents will positively take part .The respondents are assumed by the researcher to provide true and unbiased information to the interview questions.

- ✓ The data presented and analyzed will reflect on the presentations, recommendations and conclusions of the stakeholders at Parirenyatwa Group of Hospitals on the research topic.
- ✓ The methodology to be used is ethically acceptable.
- ✓ The sample population will be a representation of the population under study.

1.8 Scope of the study

The study merely focused on the effectiveness of public procurement policies and procedures in the public health sector with a specific focus on Parirenyatwa Group of hospitals as it plays a chief role in ensuring healthcare services are delivered to the nation. Specifically, the study investigated the current procurement policies and procedures in place at Parirenyatwa Hospital, their strengths and weaknesses, impact and also provided the recommendations for improvement of procurement policies and procedures at the hospital.

The study also used a qualitative research approach and data was collected through semi structured interviews, questionnaires and observations. Document analysis of procurement policies and procedures was also conducted. The research aimed at providing insights into the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe and inform recommendations for improvement.

1.9 Delimitations

The thesis mainly focused on Parirenyatwa Group of Hospitals only, leaving behind all other public health institutions behind. The time frame for the research was from 2021-2022 and the research focused on the people relevant in the area of the study.

1.10 Limitations

The researcher had limited time and resources to carry out the study but tried by all means and thrive to produce quality research results. The researcher moved an extra mile and ensured that financial constraints are eliminated so that the research could be successfully completed. Furthermore, changes taking place in the procurement particularly in public health institutions and the unstable macro environment which is dynamic and ultimately the changes taking place in the procurement industry stimulates the limitation of the study due to some new policies which are being passed on the period under the study for instance the move made by the government, the Ministry of

Health and Child Care in particular to centralize all health related materials through the Manufacturers of pharmaceuticals.

1.2 Definition of Key Terms

1. Procurement

A process of identifying and obtaining goods and services .It includes sourcing, purchasing and covers all activities from identifying potential suppliers through to delivery from supplier to the users or beneficiary (Mangan, et al, 2008).

(Lysons, 1992) also defines procurement as the function responsible for obtaining by purchase, lease or other legal means, equipment, materials, supplies and services required by an undertaken for the use in production.

2. Effectiveness

The ability to determine appropriate objectives and use of financial resources to achieve set goals (Bailey et al, 2010).

Effectiveness

Refers to the capability to produce desired results (Prince and Cooper, 2012).

3. Public procurement

Is the acquisition of goods and services by government or public sector organizations and is one of the key economic activities of government (Thai, 2001).

d) Procurement compliance

The act of conforming to the national legislation, as well as to other requirements and commitments regarding public procurement (Hugos, 2003).

e) Procurement policies

Are a set of rules and regulations put in place to govern the process of acquiring goods and services needed by an organization to function efficiently (WisegEEK, 2013).

f) Procedures

Are operating instructions detailing functional duties or tasks.

1.13. Chapter Summary

This chapter provided an overview of how the study was conducted, with a particular focus on the efficacy of procurement laws and practices in the public health sector. It also clearly stated the study's goals and the hypothesis that would be put to the test. In addition, it contained the definitions of the important terminology, the issue statement, the research questions, the significance of the study, and its limits and underlying

presumptions. As a result, the chapter establishes the framework for future study into the efficiency of procurement practices and regulations in the field of public health. In regard to public procurement policies and procedures, the literature study will be examined in the following chapter.

CHAPTER II

LITERATURE REVIEW

2.0 Introduction

This chapter intends to review related literature and provide a broader image to the area of study conducted on the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. The study took into consideration related literature or viewpoints and arguments presented by various authors on the subject under study. Public procurement policies and procedures play a crucial role in ensuring the effective delivery of public services, including healthcare.

In Zimbabwe, the public health sector has been facing numerous challenges, including shortages of medical supplies and equipment, inadequate healthcare facilities, and insufficient funding. These challenges have been exacerbated by poor procurement practices, including corruption and lack of transparency. This literature review examines the effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe, with a specific focus on Parirenyatwa Group of Hospitals.

2.1 Purpose of Literature Review

Literature review is a critical examination of a section of published body of facts through summary, classification and evaluation of prior research studies, reviews of literature and theoretical articles. Literature review is a body of text that aims to review the vital points of current knowledge on a particular topic. Oftenly literature review is connected with science-oriented literature, such as a dissertation, the literature review usually precedes a research proposal, methodology and results section. The ultimate goal is to take the researcher up to date with the current literature on a topic and form the basis for another goal such as future research that maybe needed. The literature review also enables the researcher to gain an insight on the study area by broadening and deepening her understanding and appreciation of public procurement policies and procedures as parameters towards obtaining efficiency and effectiveness in the public health institutions in particular Parirenyatwa Group of Hospitals. It has always been a

standard chapter of a dissertation. The review forms an integral chapter in a dissertation where its main aim is to provide the background and justification for the study undertaken. The review is aimed at bringing forward the research project's depth knowledge on the effectiveness of the procurement procedures and policies in the public health sector with reference to Parirenyatwa Group of Hospitals.

2.2 Theoretical Framework

According to Creswell (2009), a theoretical framework is defined as the collection of connected concepts that guides a research project and connects the reader to current knowledge. It is also defined as the collection of concerned concepts applicable to the study (Machoka, 2016). (Venom, 2010) defines theoretical support as a collection of consistent concepts that are aimed to help the researcher to make rational sense of relationships of the variables and factors that are deemed to be relevant to the problem under study. This section presents relevant theories and related literature from similar past studies that have been carried out with regard to the objectives of the proposed research, their reliability and critics shall also be remarked. The procurement policies and procedures in the public health sector in Zimbabwe are guided by various theoretical concepts and frameworks. The major theories discussed herein are the public procurement theory, linear model theory, the agency theory, bureaucracy theory, institutional theory and public value healthcare procurement theory.

2.2.1 Public Procurement Theory

The theory was formulated by Arild (1979). The theory emphasizes on the importance of transparency, accountability, and competition in the procurement process. The theory posits that a transparent and competitive procurement process ensures that the government procures goods and services that meet their intended needs, at competitive prices, and from competent suppliers. The theory is also of the assertion that public procurement must be conducted in a more transparent, open and competitive manner so that the government can achieve value for money and enhance socio economic development (Kiggundu, 2020). This framework is particularly relevant in the public health sector in Zimbabwe, where transparency and accountability are critical in ensuring that public funds are used effectively and efficiently. The theory is also important to the study as it pinpoints to the fact that public procurement practices can assist in the attainment of public policy objective such as improvement in health services delivery outcomes. The theory also puts an emphasis on designing public

procurement policies and procedures that ensure efficient, transparent and competitive procurement processes, meaning to say that all procurement decisions should be directed on objective criteria. The theory also pointed out the disruptions that may result due to bureaucratic processes thereby negatively impacting on health service delivery as there will be longer lead times when procuring vital medical healthcare necessities (Colander, 2001).

The theory also helps to relate to the PPDPA ACT, governing public procurement, where its mandate is to minimize government expenditures through preventing loopholes for loss of state funds but it ends up contributing to delays in the procurement of healthcare goods and services. Public procurement theory refers to a set of principles and assumptions that guide the processes and decision-making in government procurement. Furthermore, regarding on the significance of the theory in the public health sector in Zimbabwe, it is quite significant to note that public procurement has a major effect on the quality and accessibility of health services as effective procurement policies and procedures can guarantee that health facilities have sufficient supplies, hospital equipment and proper medicines and that they will be of better quality and more affordable to the public (Chirisa & Dube, 2019).

2.2.2 The linear model

Hasswell (1951) originally created the model, which Meier (1991) then modified. The model observed that decision-makers steer policy conceptualization by clearly outlining the problems that require policy solutions. Since it was founded on the idea that communication was a one-way street with no room for feedback or alternative methods, the theory has faced criticism since it was first proposed. Grindle and Thomas (1991) enhanced the original concept by introducing a comprehensive framework that consisted of three phases- the agenda phase, the decision phase, and the implementation phase. This new framework took into consideration the expectations of stakeholders, the decision-making process, and the ongoing challenges and adjustments required during each stage. By incorporating these additional elements, the procurement policy-making process became more complex and more reflective of the challenges that occur throughout the process. Through the consolidation of six Ps that are of utmost significance in procurement methods and processes, the model dictates how various policies will be implemented. The procurement policy-making process involves dealing with various areas of concern such as problems identified, people involved, processes

implemented, costs associated with policy options and allocation of resources, the policies and laws themselves, programs ensuing from policy execution, and overall performance in achieving the intended objectives. In other words, the procurement policy-making process is a complex undertaking that involves a multitude of factors that require careful consideration and evaluation. The model also implies that decision-makers have a rational mindset (Njeru, 2015), which makes it an excellent choice for boosting the efficacy of procurement policies and practices in the public health sector in the setting of Zimbabwe.

2.2.3 The public value health care procurement model

The model was developed by Turrell in 2013 and strives to aggregate its several characteristics and re-focusing on the procurement of health care in order to count particular challenges such as choice and competition. The framework offers a three-sided model that links the procurement function legitimacy, creation of public value and quality clinical service outcomes. The above are realized through value and strategies being implemented to conduct procurement practices which advocate social economic benefits, the authorizing environment concentrating on the employment of key and important stakeholders including the political area, whilst not forgetting the procurement staff themselves as well as the operational capacity focusing on the skill sets of the procurement staff doing the literal job and the desirable structure (CIPS, 2017).

In spite of the framework being criticized for failing to embrace various characteristics associated with “best in class” procurement operations which dominate among them include issues relating to effective procurement policies and procedures is highly critical to this research as it links procurement practices such as performance measurement and evaluation criteria within the procurement processes in the public health sector which also rely upon this theoretical account to health care (Turrell, 2017).

2.2.4 Agency Theory

Agency theory was formulated by Michael, Jensen & William in 1976. It attempts to describe the agency relationship, this is where the principal gives work to the agent who executes the work (Eisenhardt, 1989). It is a theory that embraces the relationships between two parties that is the principal allowing for an investment (Ouyang, 2013) who is the owner or authority of decisions to be made and the agent who is the executor

and accepts action on behalf of the Principal (Jensen Meckling, 1976), (Eisenhardt, 2009), (Bergen, et al., 1992). The theory emphasizes the importance of aligning the interests of the principal (in this case, the government) and the agent (in this case, the procurement officials).

The theory suggests that the government should align the incentives of procurement officials with the interests of the government, to ensure that they act in the best interest of the government. This framework is important in the public health sector in Zimbabwe, where the government needs to ensure that procurement officials act in the best interest of the government and the public, rather than their personal interests. The theory was of vital significance to this research as the study is actually focused on two relationships existing between two parties involved that is the Government symbolizing the principal plays a major in assessing compliance with the public procurement policies and procedures and setting up systems and facilities as well as an environment that encourages usefulness of the laws that establish the procurement policies and procedures and the public health institutions such as the Parirenyatwa Group of Hospitals (PGH) representing the agents with a chief role to actively act on behalf of the government to achieve effectiveness in public procurement policies and procedures in the public health sector. Therefore, it is more relevant to the study which is focusing on investigating the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe.

The institutions being Agents of the Government are expected to implement Government directives, though there is a trade-off that also exists with the Government expected also to assure the accessibility of monitoring systems as well as the incentive packages in the form of wages and bonus, non-monetary incentives such as vehicle and housing schemes for the procurement employees or even corporal punishments for non-compliance (Halepota, 2005). The other aspect where agency theory applies is the agency relationship between the procurement department and the user departments such as the assembly, the speaker's chambers, the county representative offices, the secretariat, the County assemble committees as well as other departments within the County assembly. The procurement department does the purchases on behalf of these departments and sections who then are the principals. There is however a conflict in that the user departments have their own specifications and desires which at times the

procurement function fails to meet or fulfill within the public procurement rules, (G.O.K 2005).

2.2.5 Institutional theory

The roots of institutional theory can be traced back to the works of John Meyer and Brian Rowan in 1983 and Paul DiMaggio and Walter Powell in 1983. Institutional theory is a conventional approach used to analyze public procurement practices, according to Obanda (2010). Institutional theory considers the influence of external institutional constraints on organizations. These institutions can take the form of regulatory frameworks, government, laws, courts, professions, interest groups, and public opinion (Coggburn, 2017).

Institutions also comprise cultural, cognitive, and regulatory elements, as described by Dubey et al (2017). The pillar of regulation advocates for rules usage, the normative norms, laws and sanctions as well as values and the pillar of cultural cognitive are applied on the basis of shared understanding. This theory is of higher significance in evaluating the procurement of public entities. Basing on the theory, one can understand the laws, policies and regulations governing effective procurement in procurement planning, supplier selection, tendering and contract review and monitoring. The cognitive and normative pillars are equally essential in improving the organizational culture in terms of habits, work ethics, beliefs and values of employees in public procurement for better public service delivery (Tweneboah and Ndebugri, 2017)

Institutional theory provides insight into how organizations adopt new practices and why they often exhibit similar responses and behaviors (Grob and Benn, 2014). It also helps firms understand the complexity and dynamics of Corporate Social Responsibility and how to sustainably use procurement (Githinji and Maronge, 2018). The theory can be used to explain the proliferation of sustainability practices in parastatals (Grob and Benn, 2014). According to Kaylata (2017), individual agents or organization's behaviors are influenced by external factors in institutional contexts, and the environment legitimizes certain behaviors (Coggburn, 2017). In Zimbabwe's public procurement system, institutional theory is adopted, and public procurement entities in the system are governed by policies and procedures outlined in various laws, including

the PPDPA ACT of 2018, which also applies to the public health sector. For public procurement in Zimbabwe, procuring entities are entitled to establish Procurement Management Units which undertake all procurement activities within the institution. Institutional structures are supported by three transporters, which are routine, structure, and culture, operating at various levels of jurisdiction, according to Scott (2004). These elements form the basis of institutional structures and contribute to the development of institutions. The institutional pillars, namely regulatory, cultural, and cognitive, serve as an analytical framework for analyzing the primary actors and institutions involved in the regulatory, institutional, and systematic frameworks of public procurement in Zimbabwe's health sector.

2.2.6 Bureaucracy Organizational Model

The theory was formulated by Weber in 1980. Bureaucracy theory is a concept in organizational management that has been widely discussed and debated by scholars and practitioners over the years (Meisenbach & Jensen, 2017). According to the theory, organizations can be more efficient and effective by having a clearly defined hierarchy of authority, specialization of tasks, rules and procedures, and a system of merit-based recruitment and promotion. This theory suggests that the public sector needs to follow a strict set of procedures and regulations to improve its performance in delivering services to the citizens.

The theory emphasizes that organizations are formal, logical structures with well-defined rules and processes, defined by specialization, hierarchy, well-trained employees, managerial devotion, and management impartiality (Weber, 1989). The bureaucratic organizational business model is distinguished by regulated processes and rigorous standards. Each worker has a clearly definite role and duties. A common quality of bureaucracies is impersonality. Workers are hired based on their skill to perform the tasks assigned to them and character has little to do with their achievement.

In a bureaucratic organization, the recruiting procedure is formal and involves job definite tests. Promotions are merit based, independent on seniority. Workers are extremely expert, all bureaucratic organizations share similar characteristics. A formal hiring process with job-specific assessments is used in bureaucratic organizations. Promotions are given based on performance, not seniority. Employees are highly skilled, and bureaucratic organizations all have similar traits. These consist of a defined chain

of command, a job breakdown, a set of rigid guidelines, and specialization. Every employee has a job within the chain, and every position is under the supervision of someone higher up. Making decisions is a top-down process. In accordance with their abilities and the type of work they perform, workers are organized into units. They receive the same treatment as everyone else and continue to harbor animosity toward their superiors and coworkers.

The company's decisions and procedures are documented in writing, and the organization is based on rules rather than individuals. According to Weber (2010), these processes contribute to effective and efficient goal attainment. Weber's model of bureaucracy emphasizes the use of formal rules and procedures to remove uncertainty in coordinating activities and accomplish tasks in the most efficient way possible. The Administrative Management Approach, proposed by Fayol, also emphasizes the importance of well-defined rules and standards for the work environment and work responsibilities, which leads to greater coordination and equity.

To ensure consistency and clarity in the execution of roles and procedures, it is necessary to create a manual or handbook that documents the organization's practices, and ensure that all members are acquainted with its regulations. Communication between members of bureaucracies is typically in written form to maintain consistency. The theory can also be adopted in public hospitals like Parirenyatwa whereby Procurement personnel have to be employed based on skills and educations they have as it contribute to effective procurement department since relevant skills are a necessity and this help public hospitals in Zimbabwe to perform better by offering super-specialist health care services and attain the best value for money in the procurement processes.

Public Hospitals in Zimbabwe can adopt the model as it yield best results especially on the overall performance of public hospitals as highly skilled personnel who adhere to laid out procurement rules and regulations can work better and ensure that shortages of vital medical healthcare necessities are obtained for instance diagnostic equipment, therapeutic equipment and biometric equipment. The bureaucracy theory is also relevant in this research as it advocates that the public health sector must operate with a hierarchical structure in which procurement rules and regulations can be adhered to in

order to obtain a higher level of consistency when making decisions as well as implementing them(Charlotte,2023).

The theory also highlights that public procurement policies and procedures can contribute to reducing the effect of nepotism, fraud, through ensuring that procurement plans focus on objectives criteria and all those involved in procurement will be held answerable for their actions. A study conducted by Chinyamurindi and Ngwenya (2013) also supported the adoption of the bureaucracy approach to procurement policies and procedures to enhance effectiveness in the public health sector in Zimbabwe. The authors argues that the use of clear rules and regulations, well defined procurement procedures and a highly centralized decision making process would drive accountability and transparency. Mubvami and Nkala (2015) also advocated for the use of the theory in the public health sector in Zimbabwe stating that the use of procedures, regulations and standardization processes in procurement can improve efficiency at the same time reducing corruption in the health system in Zimbabwe.

2.2.7 Public procurement policies and procedures and the public health sector.

Efficiency and effectiveness in addition to economic value are of utmost importance when it comes to public procurement. In order for states to accomplish these objectives, effective and efficient procurement procedures must be implemented, claims Ballard (2012). This entails putting in place sufficient controls to encourage compliance with public purchasing policies and processes as well as getting rid of misappropriation of public funds. The method through which governments and other organizations with public funding obtain the materials, labour, and services required to carry out public projects is known as public procurement.

According to Sarfo (2011), public procurement is a practice that is used by public sector organizations to acquire goods, services and works from third parties meaning suppliers. It includes money spent by the public sector to provide key services directly to citizens. The only way it can be beneficial to all would be for it to be effective. The public procurement process is represented by a set of rules, policies and procedures that specify how government procurement activities are supposed to be carried out (Azeem 2007).A procurement policy is a collection of rules that control the requisition process. The

objective of the procurement policy is to provide fundamental guidance to the business on best practice in conducting procurement for goods and services (Masau, 2015).

The purpose of the procurement policy is to establish procedures for the business for procurement of all goods and services and ensure that all goods and services procured are obtained in cost-effective prices, at the required specifications and quality and are delivered in time. Procurement policies help procurement administrators implement their procurement strategy by creating a policy structure that is aligned with the organization's strategic purchasing requirements (OECD, 2015). A procurement policy consists of a set of policy rules. Procurement policies are associated with the procurement of internal control hierarchy purpose. Therefore, procurement policies apply only to organizations in hierarchies that have a hierarchy purpose of Procurement internal control (Victor, 2012). In Zimbabwe, public procurement in the health sector is guided by various legislative policies, acts of parliament and supporting documents. These include the Public Procurement and Disposal of Public Assets Act Chapter 22:23, Public Finance Management Act, Secretary for Health Guidelines for Procurement, Treasury Instructions, Accounting Officers' Instructions on Procurement and Ministerial circulars. In the Ministry of Health and Child Care (MoHCC), procurement is done in designated cost centres known as the Procurement Management Unit (P.M.U).

The public health sector under the Ministry of Health and Child Care seeks to provide best health care services whilst operating within a challenging economic, legislative and regulatory environment in line with the Public Procurement and Disposal of Public Assets Act [Chapter 22:23] and its related regulations are amended from time to time. They develop and implement procurement policies, procedures and guidelines to ensure fairness, transparency, efficiency and economy in MOHCC procurement undertakings (Mohccgov,nd). They also investigate effective procurement planning and preparation of adequate specifications; tendering, evaluation of bids and contract award for the procurement of standard and non-standard materials, administer and manage procurement related contracts and ensure compliance to the same by suppliers and vendors. Coordinate procurement of works, services and goods for purposes of ensuring compliance with the Public Procurement and Disposal of Public Assets Act [Chapter 22:23].

However, there have been quite some negative implications on the public procurement regulatory framework as the highly prescriptive nature of policies and procedures have been debated due to the heavy burden it puts on government institutions including the public health sector when acquiring goods and services and the service providers who take part in the bidding process. In 2013, the Minister of Energy and Power was dragged to court the reason being that he expeditiously procurement fuel for the country amid reports that the country's fuel reserves were almost empty and failed to adhere to stipulated procurement policies and procedures. This is the case with the public health sector as the procurement policies and procedures may not be able to cater for the emergencies and critical situations that are rampant in the public health sector for instance medicinal drugs, surgical consumables as well as hospital equipment cannot be delayed access to as sicknesses or health issues cannot be postponed to another future date to allow for complete authorization.

Gerson (2004) as referenced by Cabras (2011) suggested public procurement efficiency by reducing the number of inputs without compromising on quality. It has been also noted that, the major impact of this statutory provision was that the overall costs of goods and services became too high and this largely affected the medical sector as well since most of the medicines, medical equipment and medical supplies were imported (Msipa, 2018).

According to Madziva, Msipah & Tukuta (2018), they are of the view that even though there a guiding principles and reforms to the Act, a gap still exists in terms of the ability to respond to pandemics with the urgency required whilst ensuring that value for money is achieved. Moyo & Moyo (2016) argued that the effectiveness of public procurement policies and procedures in the public health sector has been hampered by corruption, lack of transparency and inefficiency in the procurement processes which has resulted to the procurement of substandard goods and services, delays in delivery of supplies and exorbitant prices.

2.3 Empirical Literature Review

Empirical literature reviews were described by Schmidt and Siegfried (2010) as a response to and an attempt to address the fundamental issues surrounding the demonstration of the validity of literary interpretation. Empirical literature refers to

research that utilizes real-world data to draw conclusions about people's actual behaviors and actions. This type of research is in contrast to abstract theorizing, as it focuses on practical observation and analysis rather than speculation or conceptualization. To assist in the creation of the most effective technique for this project, a thorough review of the empirical literature will be provided in this section. The empirical literature review examines existing studies and reports on public procurement in Zimbabwe's public health sector. The review considers studies that have assessed on the effectiveness of procurement policies and procedures in ensuring the availability of medical supplies and equipment, and improving the quality of healthcare services. It also examines the challenges faced in implementing procurement policies and procedures in the public health sector and how they have been addressed.

Iregi and Kipkorir (2018) conducted a study for the purpose of investigating on the effects of procurement processes on the performance of the public sector organizations in Kenya. The study employed a descriptive and case study approach including interviews and document analysis .Based on their findings, it can be noted that specification development, prequalification, tendering procedures and inspection have a direct negative impact on public sector procurement performance. The study recommended that public institutions should prioritize procurement planning, supplier management and inventory management to improve performance.

Makworo et al. (2018) evaluated the procurement policies and procedures in the procurement of medical supplies and equipment in Zimbabwe, highlighting the importance of transparency, accountability, and competition in ensuring that the government procures goods and services that meet their intended needs, at competitive prices, and from competent suppliers. The methodology used involved a qualitative research approach and data was collected using semi-structured interviews with procurement officers. The study found that the procurement policies and procedures were effective in ensuring that the government procures essential medical supplies and equipment, at competitive prices, and from reputable suppliers. The study recommended that public health institutions should be adequately resourced to implement procurement policies and procedures.

Chikodzi et al. (2020) investigated on the effectiveness of procurement policies in ensuring the availability of essential drugs and medical supplies in the public health sector in Zimbabwe. The objective of the study was to examine the impact of procurement policies and procedures on medical errors, patient data inaccuracies. A mixed approach was used to collect in depth knowledge from public health facilities in Zimbabwe. The study found that procurement policies were effective in ensuring the availability of essential drugs and medical supplies, but there were still some challenges in the procurement process that needed to be addressed, such as delays in the procurement process and limited competition.

Madziva, Msipah & Tukuta did research in order to assess on the impact of regulatory changes in public procurement performance particularly the Zimbabwe's public health sector in 2022. The study employed a qualitative approach for data collection. In their research, they found out that, as much as the policies were made, in order to try and guide processes that lead to a stable business environment, it eventually led to over regulation thereby making the regulations ineffective. The regulations as they impacted the economy, they seriously affected the procurement system especially the health sector where contractual violations, price fluctuations, loss of competitive edge for the local supply industry and litigations resulted on the supply chain of essential healthcare necessities and medicine shortages were prevalent thereby creating a huge vacuum. They recommended that the various laws governing the public health sector be reviewed.

Based on their findings, they recommended PRAZ to establish a consolidated research department which provide advice to the government on policy position as it has a direct correlation on the whole procurement function and as a result it will have a massive positive bearing to the local citizens. They also advocated for supplier development, goods to be priced in USD and policy makers to come up with a strong instrument that enables a direct capital injection within the local pharmaceutical industry so that it can produce adequate medicines for the country to avoid importing medicines thereby reducing dependency on other countries.

Mutunga (2018) carried out a study with the purpose of evaluating the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe, with a focus on the Parirenyatwa Group of Hospitals. The study used a qualitative approach

for data collection including interviews and document analysis .The study found that the procurement processes were slow, and there was a lack of coordination between the procurement department and other departments in the hospital. The study recommended the need for the hospital management to invest in training and capacity building of the procurement staff to enhance their skills and knowledge.

Ngari in 2022 did a research on the effects of the PPDA in the procurement of public institutions in Kenya. The study sought to assess on the effectiveness of the procurement law in public procurement, a descriptive research approach was used in the study, with a sample population of 30. Questionnaires were used as research instruments. The study found out that the PPDA lead to the procurement of quality goods and services and recommended policy makers to readdress the shortcomings of the procurement law in order to enhance its effectiveness.

Nyabadza et al (2020) conducted a research highlighting the importance of effective procurement policies and procedures in ensuring timely delivery of medical supplies, equipment, and essential drugs. The objective of the study was to identify the factors affecting the implementation and effectiveness of procurement policies and procedures including technological advancements, staff capacity and stakeholder involvement. The study applied a mixed methods approach, including interviews and surveys to collect data from public health institutions in Zimbabwe. They results of the study indicated that technological advancements, stakeholder involvement were significant determinants of the implementation and effectiveness of procurement policies and procedures. The study recommended that the government should invest in the procurement of medical supplies and equipment to improve the quality of healthcare services in the public health sector.

Dzuke and Naude (2015) carried out a research in order to identify the challenges in the Zimbabwean public procurement process that detract from service delivery. A qualitative research design was employed in order to collect data through the use of questionnaires, document analysis. The findings showed that there were irregularities in the tendering processes, lack of strategic recognition of the procurement function and procurement policy; a lack of professional, managerial and leadership skills; a lack of appropriated funds from Treasury; and a lack of accountability in the procurement

process. The need to comply with SPB procedures was the main reason for poor service delivery, therefore basing on their findings they recommended that the public procurement legal framework be reformed and public procurement staff get training through workshops in order for them to improve their knowledge, understanding and interpretation of the Procurement Act and regulations. These changes could result in a quicker turnaround time of the procurement process and thus improve service delivery.

Manzini (2020) also embarked on a study which sought to analyze the effects of procurement procedures on customer satisfaction through a case study of United Refineries Limited ,the industry in Zimbabwe had been expanding both in size and intricacy, so did the constraints encountered in the public procurement sector. Instances of such challenges comprised of varying customer preferences ,the requirement for ecological practices and the need to sustain relationships in the supply chain .The results showed that most customers were not satisfied with the procurement procedures given the incidence of malpractices such as bureaucracy, long lead times which act as a hinderance in achieving the effectiveness of procurement procedures which as a result led to the dissatisfaction as well as substantial discrepancies in public procurement procedures. They concluded that, the strategic significance and the latent forthcoming influence of public procurement procedures at United Refineries was difficult to ignore. There was room for improvement in procurement procedures in order for them to attain maximum customer satisfaction.

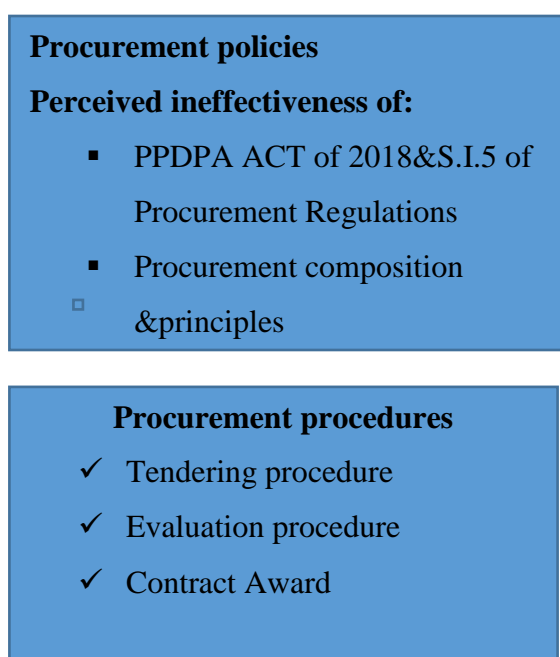
The Transparency International (2012) carried out a research with the purpose to investigate the public procurement in the health sector, it sort to make comparisons on rules and practices of public procurement in the health sector of the Czech Republic, Bosnia and Herzegovina and to gain an understanding that would improve public procurement processes in the health sector in Bosnia and Herzegovina, with special emphasis on procedures and processes of procurement. In its recommendations, it stated that," it is necessary to strive towards greater centralization of public procurement. In an effort to eliminate the abuse and preferential treatment of specifications for medical equipment to be procured". It also advocated for quality standards, the use of open procedure as the most transparent one and ensure that transparent procedures are given precedence over those that are more opaque. It further recommended that there should be enhanced procurement transparency by ensuring that tender documents are made publicly available, more resources and attention be devoted to contract drafting and

employees should receive more training regarding the awarding of the most economically advantageous tender.

There are similarities in Musanzikwa and the Transparency International research as both studies agreed that there is a huge need to train and develop the procurement in practices. Despite the theoretical lectures on procurement procedures, staff should also get additional training on new procurement policies, procedures, technology like SAP and Pastel and any other new developments in the procurement arena.

2.4 Conceptual Framework

Independent Variables



Dependent

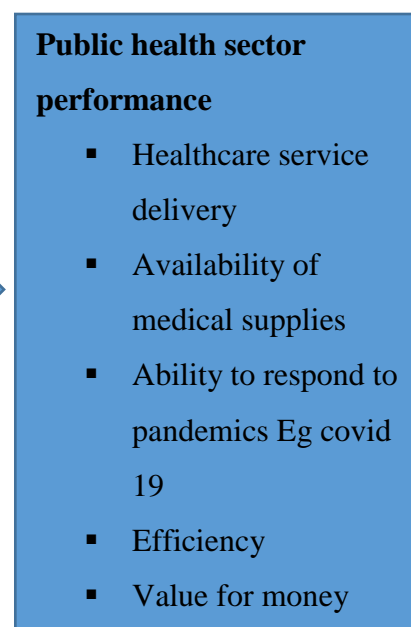


Table 2.1: **Conceptual Framework**

The relationship between independent variables and dependent variables is demonstrated by the conceptual framework and provides a lens through on how the two influence each other. In this research, the independent variables are the procurement policies and procedures stipulated in the PPDPA Act chapter 22:23 of 2018 and Procurement regulations. The dependent variable is the public health sector performance comprising of health service delivery, availability of medical supplies, efficiency and value for money in the procurement of vital healthcare necessities.

2.5 Research Gap

The literature review above highlighted that a few or an elite group of authors have presented their opinion or comments about public procurement in Zimbabwe particularly in the health sector on the issues related to the public procurement policies and procedures centering on their effectiveness. There is a research gap in this field of study as previous studies focused more on the general public procurement aspects and the new public procurement and Disposal of Public Assets Act chapter 22:23 ,for example studies done by Musanzikwa in 2013,Chigudu (2014) concentrated more on the challenges in the public sector procurement functions. The other study that was done in the health sector was the one conducted by Chimberengwa et al in 2015 which only focused on the procurement processes at a single hospital, Gwanda Provincial hospital.

This research dwelled much on the procurement policies and procedures particularly in the public health sector. The study sought to examine in depth knowledge, the effectiveness of the laid out policies and procedures seem to be homogenous but there are exceptional cases which occur in state central hospitals nationwide hence the need for the investigation on how they cope up given that the procurement policies are in place.

2.6 Chapter Summary

The literature review above highlights the comments and opinions of various authors on the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. This literature review provides a scope for future studies on the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. The next chapter will focus on research methodology.

CHAPTER III

METHODOLOGY

3.0 Introduction

According to (Bellamy and Perri, 2012) methodology allows the researcher to properly design research so that justifiable conclusions can be drawn about what might be causing the things observed. This chapter will present the research design, data collection instruments, sampling methods and data presentation techniques, validity of instruments and reliability of instruments. The research methodology for this project is a mixed methods research design which includes both the quantitative and qualitative data collection techniques. The study will employ a case study approach focusing on Parirenyatwa, a public health institution in Zimbabwe. The qualitative method will be used to explore the effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe, while the quantitative method will be used to analyze the data that will be collected from the study.

3.1 Research Design

According to Blumberg et al (2008), the research design is the plan and structure of the investigation so conceived to obtain answers to research questions. Cooper & Schindler (1998) highlighted that the research design is grounded in theory which helps to answer the how, why and what question. The research design for this study is a case study. This design is mainly suitable for this study because it enables the researcher to collect in-depth information about the research problem. The study concentrated on Parirenyatwa, one of the best public health institution in Zimbabwe. Cooper and Schindler (1998) says that, information can be grouped into both primary and secondary data. Both primary and secondary sources of data were used in collecting data. Primary data is more useful when answering research questions.

3.1.1 Primary Data

Primary data is data that has been generated by the researcher using surveys, interviews, experiments, specially designed for understanding and solving the research problem at

hand. Primary data was collected through questionnaires, interviews as well as observations. Observations were carried out in the Procurement Management Unit at Parirenyatwa Group of Hospitals and questionnaires were distributed to the clinical director and hospital director of operations and interviews were conducted.

3.1.2 Secondary Data

Secondary data is data that already exists, collected by someone else earlier. Both internal and external sources of secondary data were used by the researcher. The internal sources consists of memorandums, circulars and internal reports.

3.2 Target Population and Sample size

The population size below was used in this research based on their participation and involvement in the procurement of goods and services at Parirenyatwa Group of Hospitals. The researcher embarked on a purposive research in order to come up with the actual staff members directly involved in the procurement of goods and services at Parirenyatwa.

Table 3.1 Population and sample size

Respondents	Population	Sample
Chief Executive Officer	1	1
Clinical Director	1	1
Hospital Senior Administrator	1	1
Procurement Management Unit	11	11
Stores Management	8	8
Doctors and Nurses	450	0
General Staff	100	0
Total	572	22

[Source: Author's calculations]

3.3 Sampling

Sampling Technique

3.3.1 Convenient Sampling

In order for one to collect data easily and quickly about a phenomenon of interest, convenient sampling method is the best to use. In this study, the researcher opted to use

this method and suggested Parirenyatwa Group of Hospitals which was more convenient to the researcher during the data collection period.

3.3.2 Purposive Sampling

According to (Saunders et al, 2016), purposive sampling is a non-probability data-gathering technique which allows the researcher to use their discretion when choosing samples which will help them in addressing their research questions and achieve their goals. The researcher selected the most appropriate respondents who are directly involved in procurement in order to obtain the best reliable and dependable results and ensure that the topic is effectively addressed.

3.4 Research Instrument

Pierce (2009) defines a research instrument as a tool designed to measure the variables, characteristics or information of interest. Research instruments are also referred to as the tools used to collect data when carrying out the research (Kombo,2009).The research instruments used in this study include interviews, observations and questionnaires. The researcher conducted face-to-face interviews with the procurement officers at Parirenyatwa to explore their experiences with public procurement policies and procedures in the public health sector in Zimbabwe. The researcher also administered questionnaires to the procurement officers and other stakeholders in the public health sector to gather their views on the effectiveness of public procurement policies and procedures in Zimbabwe.

Table 3.2 Research Instrument

Respondents	Population	Sample size	Research Instruments
Chief Executive Officer	1	1	Questionnaire
Clinical Director	1	1	Questionnaire
Hospital Administrator	1	1	Telephone Interview
Procurement Management	11	11	Questionnaire & Observations
Stores Management	8	7	Face to face Interview

[Source: Primary Data]

3.4.1 Questionnaires

A questionnaire is defined as a research instrument comprising of a series of questions and other prompts for the purpose of gathering data from respondents (Creswell, 2009). It is also known as the primary data collection technique which is widely used. The questionnaire includes questions which are presented in written form for the respondents to give or air their views. Shukla (2008) says that a questionnaire is set of questions which are formalised in writing, which includes one or more scales of measurement designed to gather needed primary data.

Questionnaires were administered as they can be answered on one's spare time without any disturbances. Saunders, (2012) is of the view that questionnaires can be easily analysed and critically examined which makes them a better way to obtain best response or results and that is if they are structured in the correct manner. Self-administered questionnaires were employed when the study was being carried out and were completed by different procurement personnel in the Procurement Management Unit, the clinical director and the chief executive officer at Parirenyatwa Group of Hospitals.

There was a high degree of confidentiality as the respondents opinions were not disclosed to anyone else and the reliability of the information was certain as there were no third parties involved. The information gathered through responses from the questionnaires were easy to capture as the respondents are closely located and the questionnaires had clear instructions on how to answer them and they comprised of both closed and open ended questions which allowed the participants to express their opinions in as much as they could as supported by (White,2014).

3.4.2 Interviews

Interviews are also a way of collecting primary data. Interviews include appointments and face to face interaction with respondents, which requires appointments. An interview is also defined as a conversation between the interviewer and the interviewee in order to serve a specific purpose (Panneerselvam, 2005). In order to obtain information that is more relevant and authentic in the area of the research, the interviewer initiates the interview. Interviews help one to create a relationship with client and obtain relevant information in depth. The researcher sought to obtain in depth knowledge and information in the area of study by conducting structured, face to face interviews with the Stores members. Telephone interviews were also conducted as a

means to obtain the information needed from all relevant participants especially for those who could not be found in their offices. The hospital administrator was the one interviewed through telephone.

3.4.3 Participatory Observations

In an effort to get a full view of the organization's operations as they will be happening, the researcher sought to find firsthand information by participating in the tendering process and managed to observe each and every stage of the procurement cycle focusing merely on the procurement policies and procedures. This gave room to the researcher to get to understand on how the procurement policies and procedures are being upheld and how they impact the procurement of vital healthcare essentials at the hospital from need identification to the delivery and closure of the procurement. The observation was done over a period of three weeks when the researcher was on semester break.

3.5 Data Validity and Reliability

Pilot Study

Validity shows if the data collected produce the intended results or not. According to Joppe who cited in (Golafshani, 2003) reliability is the degree in which results are consistent over a certain period of time. In order to prepare for a larger study, a pilot study can be described as a short study that tests protocols, data collection tools, sample recruitment strategies, and other research approaches (Teijlingen, 2019; Malmqvist, 2019). The researcher embarked on a pilot study after the completion of construction of the questionnaires and interviews and tried it out on a small population, a sample of five people to be precise. The following questions were asked:

Were the questions clear enough?

Did the questions focus on the area of study being under- taken?

Do the questions intend to serve the purpose of the study?

Basing on the sample results, it showed that the questions asked in the questionnaires and interviews were useful, purposeful and unbiased as the questions were clear enough.

3.6 Data Collection Procedures

Borg and Gall (1990) defined data collection as the process that involves gathering of data or information through the use of data collection instruments. The researcher used purposive sampling to select the participants of the study. The researcher issued a letter of request to the public relations department to carry out the research and in response,

a letter of authority was granted to the researcher by the Public Relations Officer on behalf of Parirenyatwa Group of Hospitals. A letter accompanied by the questionnaires were administered to the participants merely focusing on the research topic. After a period of two weeks and a few days, the researcher went to collect them, editing the data in order to make it more relevant. The procurement officers at Parirenyatwa were the main participants of the study.

The researcher conducted face-to-face interviews with the stores management staff to explore their experiences with public procurement policies and procedures in the public health sector in Zimbabwe. The researcher used open-ended questions to allow the participants to express their experiences freely. The researcher also administered questionnaires to the procurement officers and other stakeholders in the public health sector to gather their views on the effectiveness of public procurement policies and procedures in Zimbabwe. The questionnaires were designed using Likert scales to allow the participants to rate their experiences on a scale of one to five. The researcher analyzed the data collected from the interviews and questionnaires using thematic analysis and descriptive statistics, respectively.

3.7 Data analysis and presentation

The process of inspecting, cleaning, transforming and modelling data in order to present relevant knowledge and facts commenting on results as well as vying for decision construction is what is referred to as data analysis. Data, as defined by the Oxford Dictionary of 2021, are facts or information, particularly when analyzed and applied to learn more or make judgments. Research findings were constructively analyzed and critically examined in order to come up with both qualitative and quantitative data. The researcher presented quantitative information on graphs, pie charts and tables while qualitative data was presented in a descriptive manner, where the researcher narrated the results.

3.8 Ethical Consideration.

The researcher made an informed consent with the research respondents during the whole study. At first, the writer asked for permission to conduct the research at Parirenyatwa Group of Hospitals and notified the respondents about the main agenda of the study so that they ratify. This was in accordance to Walliman (2011) who advocated

that when researchers want to embark on a study in organizations, they have to be given a go ahead from the relevant authority.

Respondents were also guaranteed of confidentiality as questionnaires used did not allow the respondents to write their names, no source of information was to be reviewed except when the respondent had actually written to that effect. The review operates under the presumption that the rules governing public disposal and procurement won't change during the investigation period. It will be assumed that the participants will respond correctly and usefully. In this respect, the researcher won't pressurize the subjects into answering the questionnaire. Additionally, responses were kept private.

3.9 Limitations.

The researcher had limited time and resources to carry out the study but tried by all means and thrive to produce quality research results. The researcher moved an extra mile and ensured that financial constraints were eliminated so that the research could be successfully completed. Furthermore, changes taking place in the procurement particularly in public health institutions and the unstable macro environment which is dynamic and ultimately the changes taking place in the procurement industry stimulated the limitation of the study due to some new policies which were being passed during the period of the study for instance the move made by the government, the Ministry of Health and Child Care in particular to centralize all health related materials through the Manufacturers of pharmaceuticals.

3.10 Chapter Summary

This chapter presented the research instruments, design, the data collection procedures undertaken in order to gather the relevant information needed for this research to be more useful and serve the purpose intended. The next chapter will focus on data presentation and analysis.

CHAPTER IV

DATA PRESENTATION, ANALYSIS AND DISCUSSION

4.0 Introduction

In this chapter, the researcher will present, make an analysis and discuss her findings from chapter three. The researcher mainly used questionnaires and interview guides to collect data from the research field and because of the nature of the information gathered the researcher opted to present the data using tables, graphs and pie charts. Analysis and interpretation of the data obtained from the primary sources was made on each graph, table or chart. The data analysis on this research is merely focused on the topic which reads effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe.

Table 4.1 Response rate

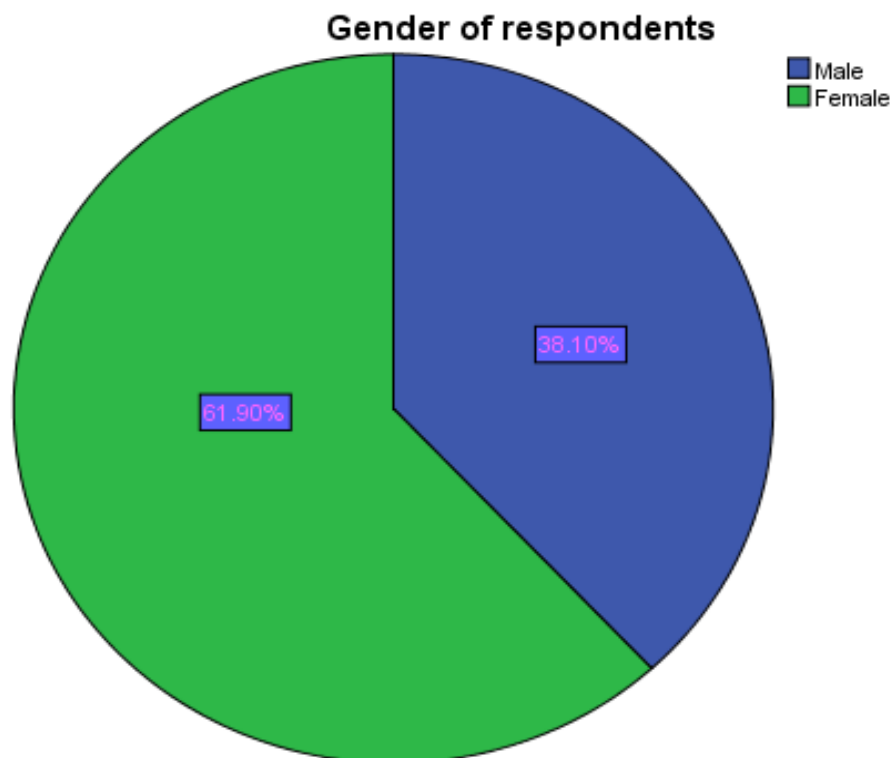
Respondent	Expected	Actual	Research Instrument	Response rate
Chief Executive Officer	1	1	Questionnaire	100%
Clinical Director	1	1	Questionnaire	100%
Hospital Administrator	1	1	Telephone Interview	100%
Procurement Management	11	11	Questionnaire and observations	100%
Stores Management	8	7	Face to face interviews	87.5%
Total	22	21		

[Source: Primary Data]

Table 4.1 above shows the response rate for the research in percentages. According to Best (2009), successful studies are supported by a greater response rate. In this research, there was a higher response rate totaling to 95.5% and only one expected respondent was on sick leave during the time when the study was being undertaken. The response rate for the questionnaires and telephone interview was 100%, while the face to face interviews had a response rate of 87.5%. A response rate that is above 60% is considered reliable and ideal (Bell, 2000). The researcher made greater efforts in order to collect much information on the topic under research by following up and expediting on the questionnaires that had been administered to the respondents and conducted the interviews through scheduled appointments. This significantly pushed the response rate to a higher level thereby ensuring the validity and reliability of the research results and this in accordance with Huger, Rooney, Wilson and Pollars (2003) who postulated that for a research response to be dependable, it should range above 75%.

4.2 Demographic Data

4.2.1 Gender composition of the respondents

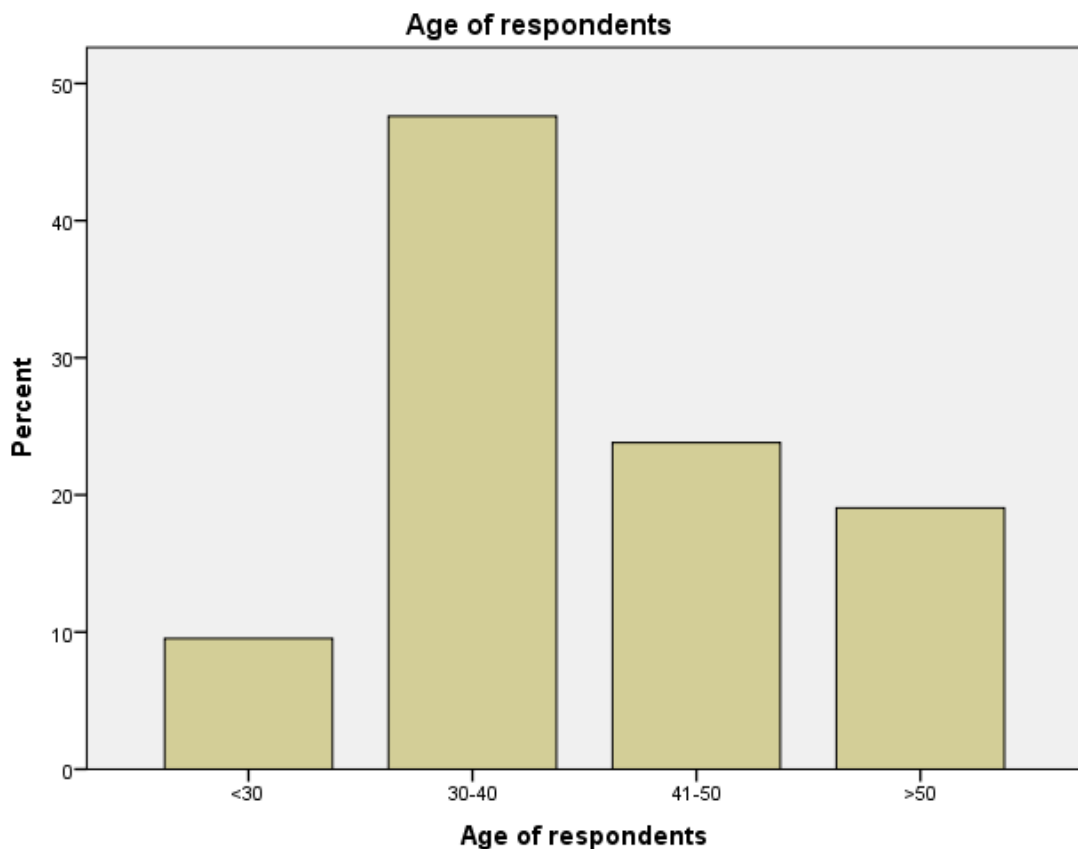


[SOURCE: PRIMARY DATA]

FIGURE 4.1 GENDER COMPOSITION

From the data presented on figure 4.1, it can be noted that 61.90% of the respondents were female while only 38.10% were male. Therefore the distribution of the gender portrays that females are more dominant than their male counterparts in the public procurement in particular the public health sector hence they have more influence in the procurement policies and procedures. The researcher sought to find out the reason why females are more dominant in the field, the human resources department pointed out that ,the need to empower women in the country has led the females to become more dominant and they also pointed out that the development in procurement professionalization has motivated many young women and girls to study procurement and this can be evidenced in local colleges or universities resulting in them occupying the procurement positions in the procurement entities.

4.2.2 Age distribution of the respondents.

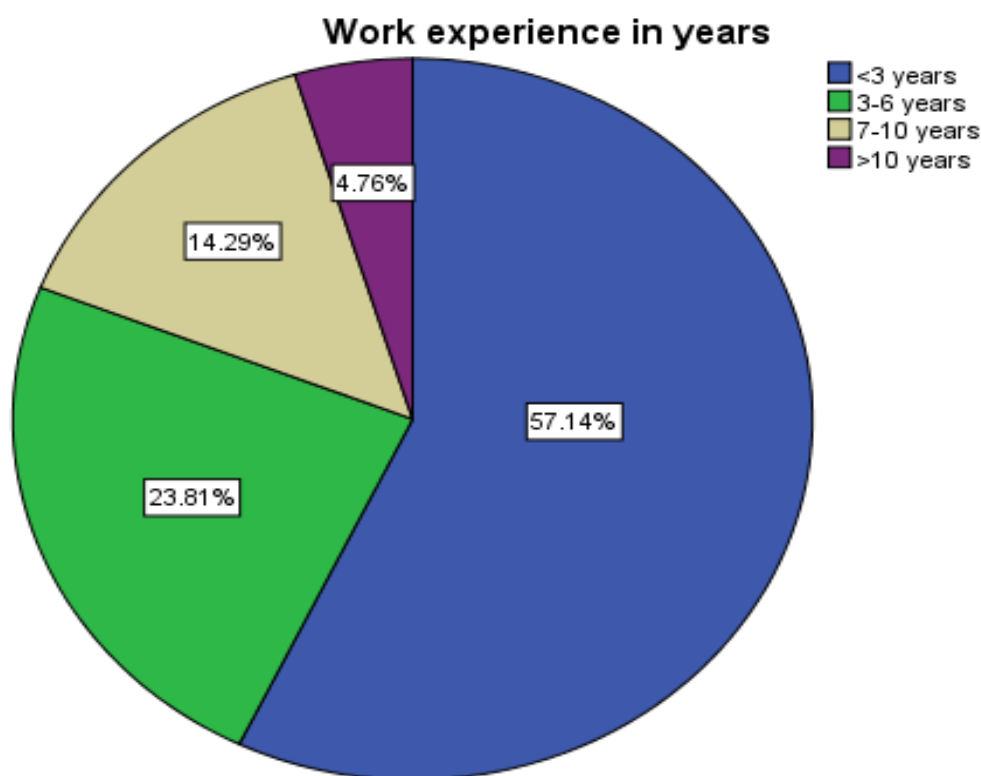


[Source:Primary Data]

FIGURE 4.2 AGE DISTRIBUTION OF RESPONDENTS

The graph above indicates that majority of the procurement personnels in the public health sector range between the ages of 30-40, followed by those between 41-50 repectively.4out of 21 respondents have above 50 years of age while only 2 people have less than 30 years of age .This clearly shows that the field is occupied with the most active age who can significantly contribute to enhancement of the procurement policies and procedures in the public health sector in order to revive the health sector from deteriorating and as a result lead to better health service delivery in public hospitals.The old aged who are over 50 years are few,but their presence is appreciated as they have better experience and skills acquired during their work experience,therefore they might offer better solutions on how best they can make public procurement policies and procedures more effective to the health sector in Zimbabwe.

4.2.3.Work experience of the respondents



[SOURCE: PRIMARY DATA]

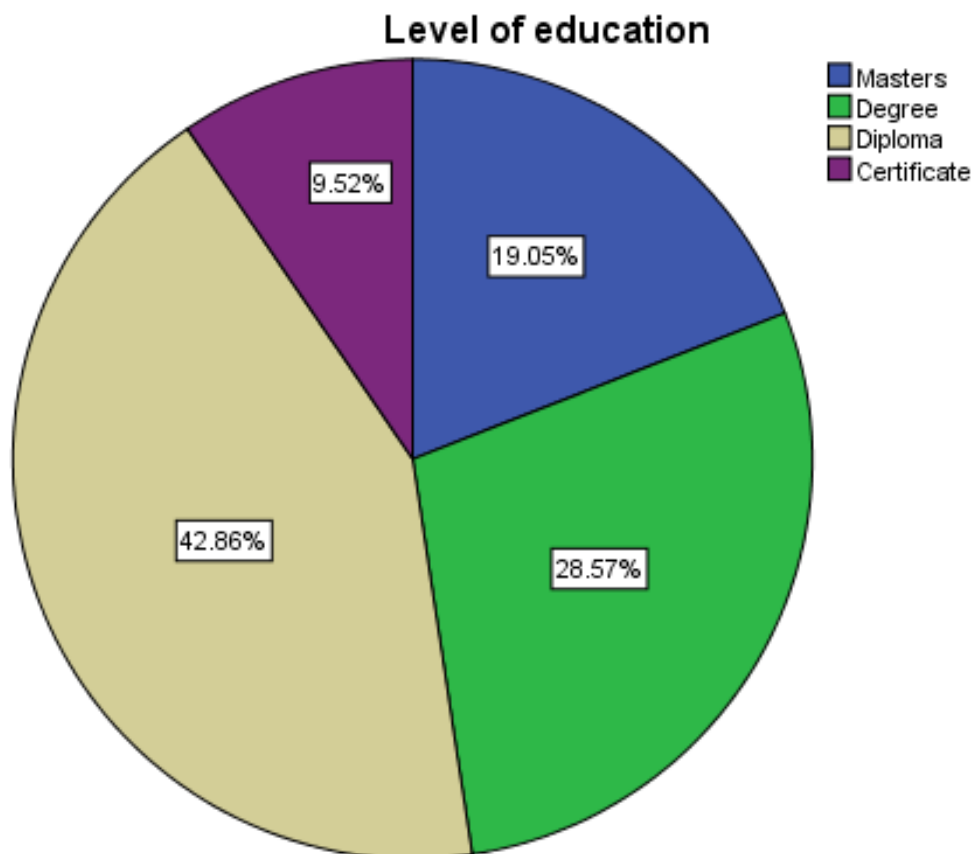
FIGURE 4.3 WORKING EXPERIENCE OF RESPONDENTS

The above pie chart presents the distribution of the working experience of the respondents in this research. The chart clearly indicates that 57.14% of the respondents

have less than 3 years working experience in their current work position and they cover a larger scale of the total population. 23.81% of the respondents range between 3-6 years working experience while 14.29% of them have 7- 10 years working experience at the job and 4.76% also having more than 3 years working experience.

The results shown above display a better margin of the respondents working experience as they are in line with the notion that most Zimbabwean procurement personnel constantly rotate from one organization to another (Mukubaba,2011).The job experience presented on the graph simply show that the in experience of the majority of the respondents who are directly linked to the procurement of vital healthcare essentials at the hospital contributes significantly to the ineffectiveness and inefficiency of the public health sector in Zimbabwe as the procurement professionals lack greater experience in the procurement arena ,therefore may lack the necessary skills required and knowledge on how best they can deliver better health care services through effective and proper implementation, adherence to the laid out procurement policies and procedures.

4.2.4. Level of education of the respondents.



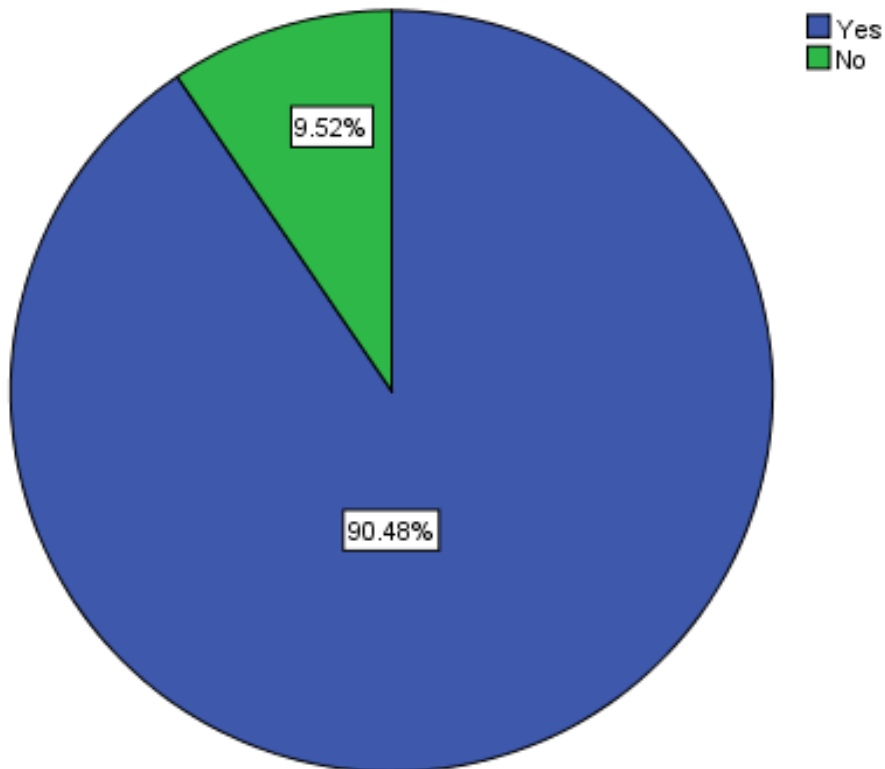
[SOURCE: PRIMARY DATA]

FIGURE 4.4 LEVEL OF EDUCATION OF RESPONDENTS

Upon conducting the research, the researcher found it necessary to also find out about the respondent level of education, how far have they gone in terms of acquiring procurement related education. All respondents were educated but reached different levels. 42.86% were holders of national diplomas, 28.57% were degree holders, and 19.05% had masters' degrees while only 9.52% had advanced certificates only. Majority of the respondents were diploma holders meaning they still need to acquire more knowledge in procurement. The knowledge they possess is shallow and cannot fully sustain the organization in order to make the procurement policies and procedures more effective to the public health sector such that super specialist healthcare services can be delivered. This is supported by Hayward (2014) who highlighted that formal education is the only efficient means of upgrading skill acquisition at work. Kiage (2013) is also of the notion that educational qualifications and work experience have greater impact on procurement performance.

4.2.5. Adherence to procurement policies and procedures.

Adherence to procurement policies and procedures in the PHS



[SOURCE: PRIMARY DATA]

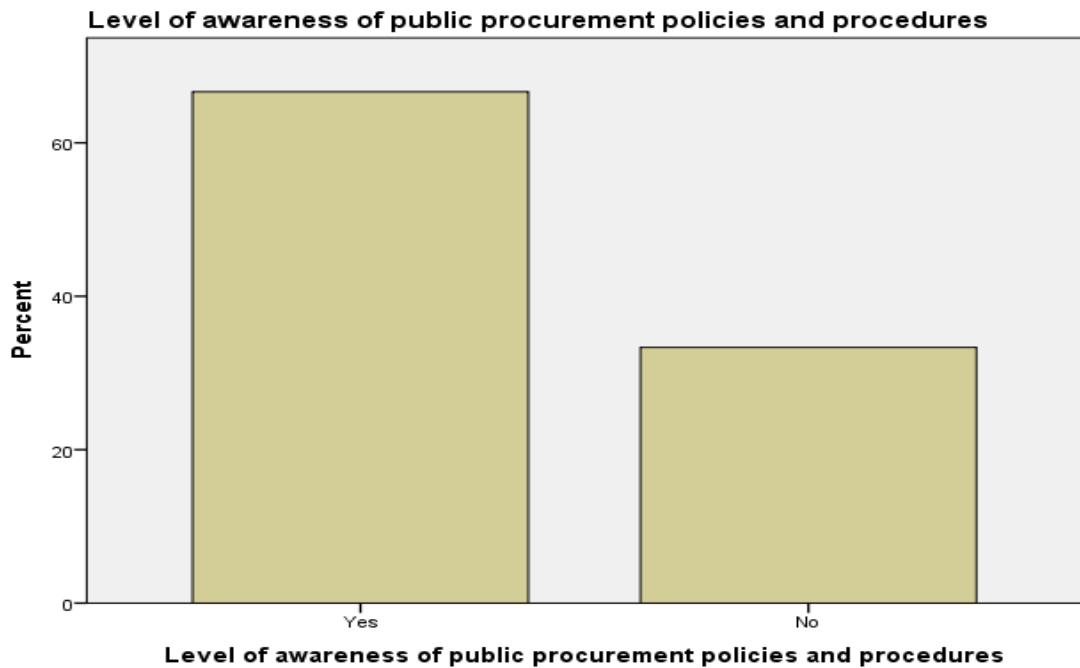
FIGURE 4.5 LEVEL OF ADHERENCE

Figure 4.5 illustrates that 90.48% of the respondents were in agreement that the public procurement policies and procedures were being adhered to in the public health sector, particularly Parirenyatwa while only a few individuals among the respondents denied that public procurement policies and procedures were being adhered to, only 9.52% of them. The respondents who said yes to the above statement stated that, the reason why the public procurement policies and procedures are ineffective to the public health sector is because they are being adhered.

They further explained that the policies comprise of long procedures that have to be undertaken when procuring goods and services for the hospital putting some constraints to the acquiring of emergency goods and services leading to longer lead times, shortage of vital medicines, safe clothing for the healthcare workers among other things thereby negatively affecting health service delivery. This is also in conjunction with the findings of Dzuke and Naude (2015). They narrated that, the public health sector is different from other sectors of the economy as public hospitals deal with exceptional cases that are of extreme emergency and at some point contain human health and safety that is human life.

They related to the COVID 19 era where the pandemic unexpectedly hit the country and there was need to procure healthcare essentials that could be used to save those that would have been affected by the pandemic with immediate effect but the exhausting and frustrating tendering procedures like competitive bidding blocked the procurement process from speeding up in order to cater for the emergencies. Many people lost their lives during that period and the death toll increased by each day that passed, the number of new cases also increased because there was no medication, no preventive kits to issue to the public. All this makes the public procurement policies and procedures ineffective to the public health sector.

4.2.6. Level of awareness of procurement policies and procedures in the PHS.



[Source: Primary Data]

FIGURE 4.6 LEVEL OF AWARENESS OF PROCUREMENT POLICIES AND PROCEDURES

The graph above indicates that majority of the respondents were familiar and fully aware of the public procurement policies and procedures that exist in the public health sector in Zimbabwe, however only a few said that they were not fully aware of them. Those who are fully aware constitute 67% while those who are not are only 33%. The respondents who are fully aware of the public procurement policies and procedures mentioned that the existence of PRAZ, Procurement Regulatory Authority of Zimbabwe being the regulator of all public procuring entities has made them become more aware of the procurement policies and procedures.

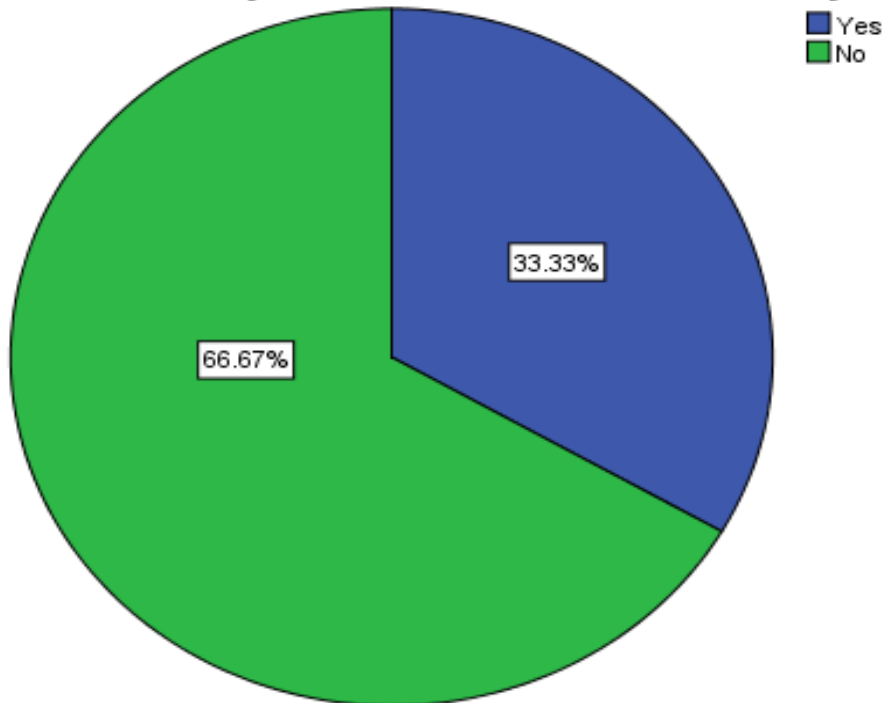
They further pointed out that, PRAZ constantly holds sensitization training workshops for all members that take part in procurement activities at various organisations countrywide they include Parirenyatwa as well, the recent one being in November 2022 at Parirenyatwa. It sensitizes all participants about its ongoings, the procurement policies

and procedures, the principles, the new laws and reforms or amendments made by the government thereby increasing their level of awareness about public procurement policies and procedures.

This increases the level of compliance to the procurement policies and procedures as procurement personnel fear the consequences of not adhering to the laid out rules and regulations. It is this awareness and adherence that will negatively affect the public health sector as it takes long to procure essential medical facilities given that there are long bureaucratic structures, channels or procedures outlined by the policies and procedures outlined in the PPDPA ACT of 2018 that have to be followed in all tendering processes yet the hospital will be dealing with emergency cases like serious accidents, cholera outbreaks inter alia. Those who said they were not fully aware of the procurement policies and procedures were those that are still new in the procurement arena.

4.2.7. Alignment between procurement policies objectives and health service delivery.

Alignment between procurement policies objectives and health service delivery



[Source: Primary Data] [Secondary Data, 2023]

4.7 ALIGNMENT BETWEEN PROCUREMENT POLICIES AND PROCEDURES AND HEALTH SERVICE DELIVERY

public procurement policies and procedures and the public health sector as 66.67% of the responses show that there is no alignment, while only 33.33% of the responses agree that there is some alignment or correlation there between the two variables, the public health sector and the public procurement policies and procedures.

From the research findings, the researcher noted that public procurement policies and procedures seek to secure value for money in all procurement proceedings (HM Treasury, 2000), without any violation of the laid out procurement policies and regulations meaning there is need for high level of compliance with the PPDPA Act and all other relevant laws that outline the public procurement policies and procedures to be adhered to when procuring goods and services.

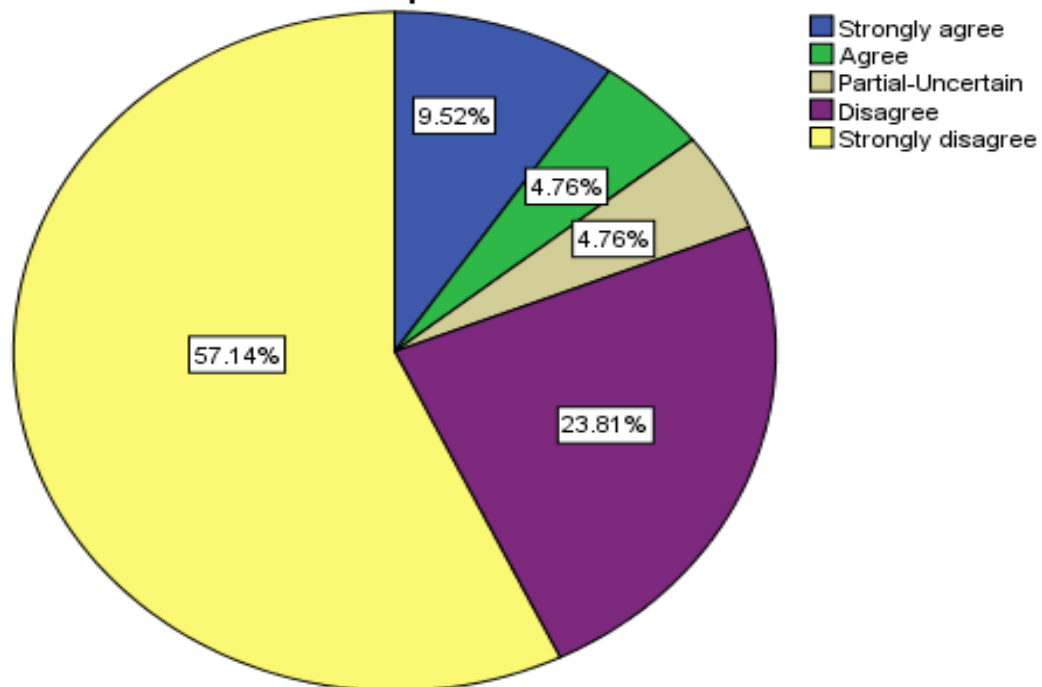
On the other hand, the public health sector seek to provide super specialist healthcare services as mentioned in the Ministry of Health and Child Care mission statement. With this vision and knowledge in hand, public hospitals will have to become more flexible in their tendering procedures and all procurement proceedings such that they can adapt to any situation and respond rapidly to viruses, diseases that may rock the country. Their procurement function must be free from procurement policies and procedures that prevent them from adjusting their procurement methods so that they will be in a position to cater for all health emergency issues and procure all the required healthcare facilities at the right time which will result in super specialist healthcare service delivery to the public.

Also, there is a contradiction between the public procurement policies and procedures and the public health sector in Zimbabwe as the policies mandate is ensure there is value for money always which implies that there must be a combination of whole life costs and quality in the procurement of goods and services and this can only be achieved by conducting market consultations so that the right goods can be purchased at the right price, right time, quality and quantity and delivered to the right place but with the public health sector, it is a matter of delivering best healthcare services to the nation at the least cost meaning all medical facilities must be in place at all times and all emergency cases must be attended to without fail but this cannot be successful because the policies make

it too long to purchase medical essentials and make sure they are available at all times due too long procurement procedures that have to be undertaken,market consultations is time consuming on its own and cannot be applied where emergency medications need to be procured.The results simply show that there is no alignment with each side objectives and this was supported by Manzini(2020).

4.2.8. Effectiveness of procurement policies and procedures in the PHS.

Effectiveness of public procurement policies and procedures in the public health sector



[Source: Primary Data]

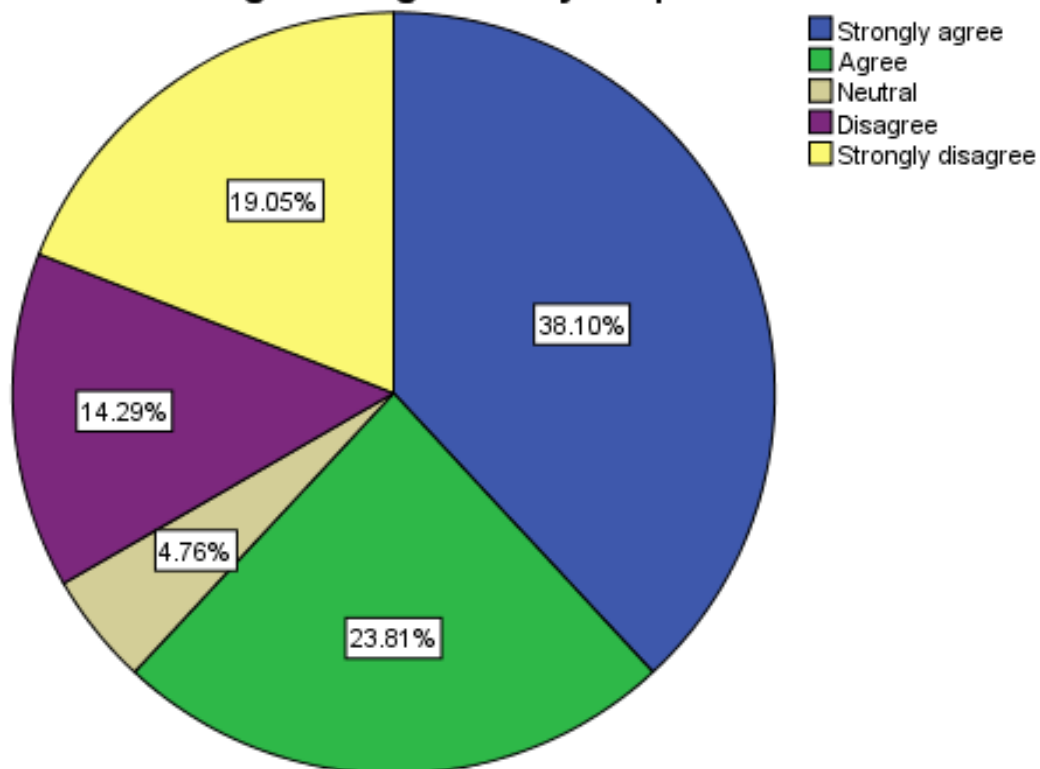
FIGURE 4.8 EFFECTIVENESS OF PROCUREMENT POLICIES AND PROCEDURES

The above pie chart above presents the different view points of the respondents on the effectiveness of the public procurement policies and procedures in the public health sector in Zimbabwe. The respondents rated their views on a scale of one to five. 57.14% of the respondents strongly disagreed that public procurement policies and procedures are effective in the public health sector and they constitute a very large portion of the participants, 23.81% also disagreed, while 9.52% strongly agreed that the public procurement policies and procedures are effective followed by 4.76% others who agreed to the statement. Only 4.76% of the respondents were not certain, they were in partial agreement of both sides. Therefore it can be shown from the results presentation that the public procurement policies and procedures are ineffective in the public health

sector in Zimbabwe, this is also similar to the study carried out by Mutunga (2018) who stated that, lack of coordination and slow tendering procedures drive the ineffectiveness.

4.2.9. Public procurement policies and procedures are to blame for causing most of the challenges in the PHS.

Public procurement policies are the main cause of most of the challenges being faced by the public health sector



[Source: Primary Data & Secondary Data, 2023]

FIGURE 4.9 PUBLIC PROCUREMENT POLICIES ARE THE MAIN CAUSE OF MOST OF THE CHALLENGES BEING FACED BY THE PUBLIC HEALTH SECTOR

Figure 4.9 demonstrates the opinions of the various individuals who took part in the research on the statement that public procurement policies and procedures are the main cause of most of the challenges being encountered in the public health sector in Zimbabwe. Their viewpoints are rated on a Likert scale of one to five.

38.10% strongly agreed to the notion and 23.81% also agreeing as well while 19.05% strongly disagreed with the notion and 14.25% also disagreeing with the statement. Only 4.76% of the respondents were indecisive or neutral, they were caught in between the idea of agreeing or disagreeing with the statement that public procurement policies and procedures are the main cause of most of the challenges being faced in the public health sector in Zimbabwe. The researcher found it relevant to allow the respondents to support

their answers, majority of them mentioned that the public procurement policies and procedures had become a heavy burden on their shoulders that cannot be taken off easily as the policies governing the procurement of vital healthcare essentials like pharmaceutical drugs,x-ray machines, safety clothing for the doctors and nurses especially those who work in the theatre department, food for the patients and staff among many other things act as restrictions or barriers to better healthcare service delivery.They pointed out that the public health sector had been ruined and was deteriorating because of the stringent rules governing their procurement function making it difficult for the public to access specialist medical attention and the findings are similar to (Msipa et al,2022) .

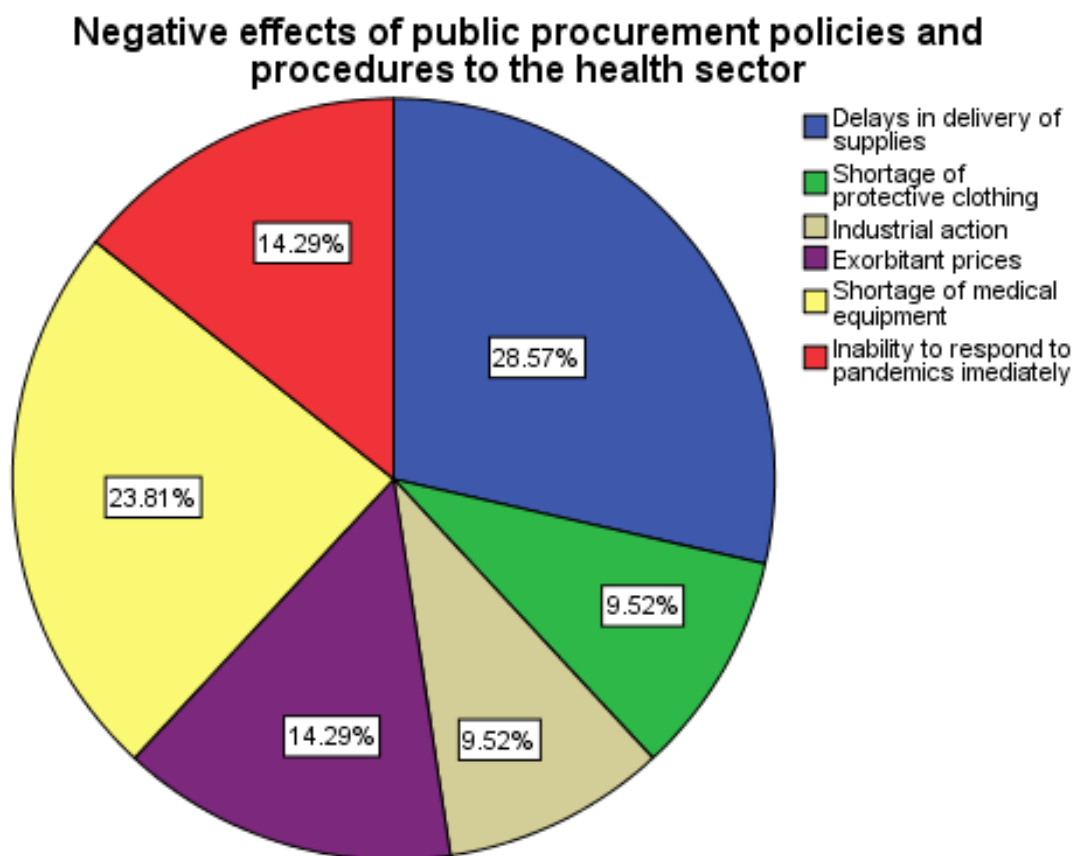
Some gave reference to the COVID 19 era between 2020 and 2021 where COVID 19 patients died due to shortages of medicines at quarantine centres and this was because the tendering procedure took too long to be completed in order for the medicines to be delivered to the hospitals and some health practitioners refused to attend to the patients because they had no enough protective clothing that would protect them from containing the virus or affection during their operations at work.This resulted in the death toll increasing each day that passed at an increased speed.

Some also said that ,the public procurement policies and procedures were among the main drivers of strikes that continue to be experienced in the country where health practitioners will be demonstrating against the government trying to express their grievances on poor working conditions.Doctors and nurses who work in labor wards,theatre,paeds and COVID 19 units resist working without protective wear like scrubs, theatre gowns,masks,gloves among many other things because they feel they are being denied their right to safe working conditions and might lose their lives due to infections that they may contain during their operations.

The shortages are as a result of the long procedures that have to be undertaken in all procurement activities and the long bureaucratic structures in government organizations. Suppliers also fail to deliver the medical facilities on time because they have to wait until they get the purchase order forms from the procurement so that they can deliver the goods. Some also take time to deliver because of late payments, all being a result of the public procurement policies and procedures that regulate the procurement

function at all procuring entities inclusive of the health sector. They pointed out that the public health sector in Zimbabwe will continue to make headlines for poor health service delivery until they revise the procurement policies so that they can comply with the public health sector objectives and goals.

4.2.10. Negative effects of procurement policies and procedures in the PHS.



[Source:Primary Data]

FIGURE 4.10 NEGATIVE EFFECTS OF THE PROCUREMENT POLICIES AND PROCEDURES IN THE PUBLIC HEALTH SECTOR

Figure 4.10 above shows some of the challenges facing the public health sector that are a result of the procurement policies and procedures. 28.57% of the challenges cover for the delays in delivery of medical supplies by suppliers due to issues of delayed payments, long tendering processes. 23.81% is for the shortages in medical equipment while 9.52% account for the shortages in protective clothing for the surgeons, theatre staff and all other medical practitioners. The other 14.29% of the is for the high pricing of goods and services by suppliers to the hospitals. Only 9.52% account for the demonstrations by health professionals due to non availability of protective clothing

like theatre gowns, masks and 14.29% is for the inability to respond to emergencies. These results are similar to previous studies conducted, the likes of Msipa, Madziva and Tukuta(2022) who indicated that procurement policies and procedures are leading to challenges such as exorbitant prices, delays in medical supplies among others in the public health sector.

4.3 Chapter Summary

The chapter clearly presented, critically analyzed and discussed the data collected from the previous chapter. The researcher made use of graphs, pie charts and tables in order to make it easy to present the data and make it more effective. The next chapter will focus more on the summary, conclusions and recommendations that can be withdrawn from the research topic, effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe.

CHAPTER V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0 Introduction

The chapter intends to provide a total summary of the whole research and highlight the main recommendations and conclusions withdrawn on the effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe. The possible recommendations and conclusions were withdrawn from the research findings presented in the previous chapter. The research objectives mentioned earlier on in chapter one will be related to the findings of the research.

5.1 Summary of the research findings

Basing on the research results obtained, the researcher realized that most of the procurement personnel had very little knowledge on procurement as majority of them had National Diplomas only, they have not acquired much in terms of procurement. The researcher also found out that there was no correlation between public procurement policies and procedures objectives and those of the public health sector in Zimbabwe. The procurement policies and procedures governing procurement in the public health sector seem to cause so many challenges resulting in poor health service delivery. Procurement Management Unit adhered to the public procurement policies and procedures outlined both in the PPDPA Act chapter 22:23 of 2018 and all other relevant laws governing them which led to delays in procurement of goods and services used in the health sector. Members involved in the public procurement in the health sector were fully aware of the policies and procedures and followed them closely to increase compliance.

The researcher also discovered that procurement policies and procedures governing the public health sector in Zimbabwe contribute significantly to most of the challenges facing the public health institutions in Zimbabwe especially, the strikes by health by health practitioners, large number of deaths the delays in delivery of medical supplies resulting in shortages of pharmaceutical drugs, protective wear, food for the patients among many other necessities. There is also a large population practicing procurement but lacking relevant experience at work.

5.2 Conclusions

The main aim of the research was to explore on the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe. The research concludes that public procurement policies and procedures implemented in the public health sector are ineffective to a greater extent. In addition, the study further concludes that most of the challenges facing the public health institutions in Zimbabwe are as a result of the stringent procurement policies and procedures outlined in the PPDPA Act, Procurement Regulations among many other laws governing procurement activities. Some of the challenges include delays in medical supplies, industrial action by health practitioners due to shortage of protective clothing, large number of deaths inter alia. This has also been highlighted in the literature review.

5.3 Recommendations

Basing on previous presentations made on conclusions and summary about the effectiveness of procurement policies and procedures in the public health sector in Zimbabwe, the research recommends that all public procurement policy makers and relevant authorities embrace their efforts in ensuring that public procurement policies are adjusted or amended in such a way that they become more useful and effective in the public health sector in order to deliver best healthcare services to the nation.

Procurement management and stores department should make efforts in drafting procurement plans and improve medical inventory control so that they make their purchases on time to avoid running out of stock.

The research must also be used by the relevant management board in the public health sector to embrace the positives of the procurement policies and procedures by implementing mechanisms that enhance the knowledge about procurement policies,

procedures, principles and many other things by all employees at health institutions so that they can work together to drive efficiency and effectiveness in their operations through that knowledge, resulting in super specialist health service delivery as the main objective.

Some of the operations in the public health sector are being delayed due to the absence of signatories and skilled employees. There is need to decentralize authority so as to avoid inconvenience in the delivery of other services. The relationship between systems and staff should also be improved through training and development programs.

There is also need to enforce accountability and transparency in the procurement processes to as to reduce cases of corruption and violations of the procurement policies and procedures such as bidders who engage in air supply thereby enhancing the effectiveness of procurement policies and procedures.

5.4 Suggestions for future research

The research recommends that other studies should be conducted on the effectiveness of public procurement policies and procedures in all public institutions, how they affect their performance. This will shade more light on the major effects of the procurement policies and procedures and will also help in devising new strategies on how they can be amended in order to become effective.

5.5 Chapter Summary

The chapter presented a comprehensive summary of the research findings, a roundup of the conclusions that can be withdrawn from the research and finally made some recommendations through which the public procurement policies and procedures can become more effective in the public health sector in Zimbabwe in order to improve health service delivery.

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Journals

All health Executives or qualified personnel's.

APPENDICES

APPENDIX 1

My name is Modester Ndulo, a current student at Bindura University of Science Education in the final year pursuing a Bachelor of Commerce Honours Degree in Purchasing and Supply.

I'm carrying out a research on the effectiveness of public procurement policies and procedures in the public health sector in Zimbabwe: Case of Parirenyatwa Group of Hospitals which requires your support and participation. Therefore I kindly request you to complete the questionnaire with utmost good faith exercising honest and integrity.

The information gathered from this research will be specifically used for academic purposes and may also be used to make better recommendations in order to improve the effectiveness of public procurement policies and procedures in the public health sector in the country.

Your usual cooperation will be greatly appreciated.

Regards

Modester Ndulo

Research Questionnaire

Instructions

- i) Do not state your name or that of your organization on the questionnaire
- ii) Put a tick or fill in the required information on the spaces provided where appropriate

SECTION A

Background Information

1. Age: Less than 30 years 30-40 years
 41-50 years Over 50 years

2. Gender Female Male

3. How long have you been serving at your current work position?

- Less than 3 years 3-6 years
 7-10 years Over 10 years

4. How far have you gone in terms of education?

- Certificate Diploma/College
 Honours Degree. Masters Degree

Any others (Please specify)

SECTION B:

Public procurement policies and procedures

5. Does your organization have any procurement policies? if yes state any two of them

- No Yes 1.....
2.....

6. Do you think that all members involved in the procurement of vital healthcare goods and services are fully aware of the current procurement policies and procedures?

Support your answer?

- Yes No

Reason:

.....

7. Do you agree with the notion that procurement policies and procedures being used in the public health sector are effective? Give specific reasons

- Strongly Agree Strongly Disagree
 Agree Disagree
 Uncertain/Partial

.....

8. Do you think that the procurement policies and procedures laid out in the public health sector in Zimbabwe might be the main cause of most of the challenges being faced in all public health institutions in Zimbabwe.

- Strongly Agree. Strongly Disagree
 Agree Disagree
 Neutral

Section C: Possible solutions

9. In your opinion, do you think that the objectives of the procurement policies and procedures being used in the public health sector align with the goals of the public health sector in Zimbabwe? State reason

.....

10. How would you rate the performance of the public health sector in Zimbabwe since the establishment of the procurement policies and procedures being used currently?

Excellent	Good	On average	Poor	Extremely Poor

11. What do you think are some of the negative effects of the procurement policies and procedures to the public health sector?

.....

12. What might be the possible solutions that maybe implemented in order to enhance the effectiveness of the procurement policies and procedures in the public health sector?

.....

Your participation is greatly appreciated, thank you.

INTERVIEW GUIDE

1. Age
2. Working experience
3. Educational level
4. What are some of the procurement policies and procedures being implemented at your organization?
5. In your opinion, do you think that the procurement policies you mentioned above are being adhered to?
6. Is everyone aware about these procurement policies and procedures you mentioned previously? Rate the level of awareness out of 100%
7. Do you think that there is an alignment between public procurement policies and procedures objectives and those of your organization, what is your opinion?
8. Can you say that public procurement policies and procedures currently being used at your organization are effective?
9. What is the level of performance of your organization from the time of the implementation of the current procurement policies and procedures?
10. What are some of the challenges being caused by the procurement policies and procedures
11. Should we blame the procurement policies for causing most of the challenges you are facing today in delivering health services to the public?
12. What can you suggest or recommend in order to enhance the effectiveness of these procurement policies in the public health sector in Zimbabwe?

LETTER OF REQUEST

P Bag 1020
BINDURA, Zimbabwe
Tel: 271 – 7531-6, 7621-4 ,6230
Fax: 263 – 271 – 7534
Cell No 0777603758



**BINDURA UNIVERSITY OF SCIENCE EDUCATION
FACULTY OF COMMERCE
ECONOMICS DEPARTMENT**

29 May 2023

To Whom It May Concern

Dear Sir/Madam,

RE: REQUEST FOR PERMISSION TO COLLECT DATA

This letter serves to inform you that Ndulo Modester (B193325B) is pursuing Bachelor of Commerce in Purchasing and Supply Degree with our Department. Please assist him with data for his dissertation titled "The effectiveness of procurement policies and procedures in the public health sector in Zimbabwe: A case study of Parirenyatwa group of hospitals."

The information gathered from this research will be used purely for academic purposes and your response will be classified as private and confidential.

Your cooperation will be greatly appreciated.

Yours sincerely,

A handwritten signature in blue ink, appearing to be 'S. Mutsvangwa'.

Dr. S. Mutsvangwa (Chairperson)

