Knowledge Management and Role Clarity as Antecedents of Service Quality

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ABSTRACT: *The effective management of employees' knowledge has been described as a critical ingredient for organisations seeking to ensure sustainable strategic competitive advantage in the market place. The purpose of the study was to investigate the impact of knowledge management on employees' role clarity and quality of services. The study sampled 300 staff from three private hospitals in Ghana namely: Trust Hosiptal, Otoo Memorial Hospital and Cocoa Hospital. The purposive sampling technique was employed to select the private hospitals while simple random was used to select staff of the hosptials. The results revealed that service quality has a positive relationship on knowledge management and service quality.*

KEYWORDS: role clarity, service quality, knowledge management, staff.

INTRODUCTION

In this era of globalization and technologically advancement age, hosiptals have significant role to play in ensuring the general willbeing of patient, therefore the need for staff to constantly improve and upgrade their skills and capabilities in order to support the goal and mission of the hospitals (Ion & Creveanu, 2016). Concerns over knowledge management plays essential role in managing organizations in this modern era because of the perception that the organization or institutions are failing. To avoid organizational failure, especially in hospitals, the onus lies on the staff to ensure that the needs of clients seeking healthcare are accomplished both physically and psychologically as well as their social needs (Alharbi & Yusoff, 2012). Knowledge management (KM) is a practical means by which hospital staff can improve their services in the knowledge economy. This can be accomplished through the establishment of an organisational culture of knowledge sharing and capability within the hospital. It is important for hospitals to have a clear understanding of what knowledge management (KM) means to its operations if it needs to consider using those KM practices that enhance efficiency and lend value to organisational knowledge. In this way knowledge becomes a strategic resource (Kok, 2012).

In Ghana, there has been an increasing public demand for improved healthcare delivery in various healthcare facilities within the country. This can be achieved through knowledge management among staff in the hospitals through role clarity. Essentially, role claform of leadership style determines the organizations performance. This is because the leaders' style of directing the use

of resources, guiding members to implement strategies, and convincing members of the organization to work towards expected outcomes will shape the performance of the organization and the staff. (Aberese-Ako, Agyepong, & Dijk, 2018). Productivity and efficiency scores in several hospitals in Ghana have shown that organizational performances in hospitals are generally very low (Ministry of Health, 2007). Studies conducted on district hospitals in Ghana indicates that about 56.2% out of 128 hospitals recorded efficiency scores below average (0.50) (Antwi, 2017). Also, the low productivity in the health sector is backed by the World Bank Health Worker Productivity report, which indicates in regions, districts and cadres in Ghana that staff do not have theknoweldge management (Saleh, 2013).

Research Framework

Concept of Knowledge management
Knowledge Management is an important business tool being used all over the world to enhance capacity building, improve business services, develop basic and incremental innovative products and services and improve the skills of workers (Awan & Khalid, 2015). Employee's knowledge when managed efficiently considerably improve the performance and profitability of business organization whether they are functioning in public or private sector. Koranic, Bosilj, and Lončar (2006) indicated that individuals' knowledge consists of intangible awareness, learned facts and information which are manifested as ideas, judgments, talents, root causes, relationships, perspectives and concepts.

Knowledge resides in the individual's mind and only when it is articulated and/or captured it becomes encoded in organization processes, documents, products, services, facilities and systems provided that the employees have the intention to share what they know. Knowledge creation is integral, as knowledge is the only sustainable competitive advantage which is the result of learning. Furthermore, Salmador and Bueno (2007) believes that the creation and transmission of knowledge is seen as strategically significant as one of the fundamental processes that determine organizational learning abilities and innovation although human knowledge is intangible, dynamic, and difficult to measure, without it no organization can survive. Accordingly, organizations should introduce incentives for their employees to share what they know, as well as means of capturing and retaining that knowledge for organizational future use.

Huber (2001) recommended that institutions have to develop a culture for the creation of knowledge through developing ways of encouraging employees to share by creating incentives as well awareness regarding the positive values and influence sharing to the individual, the groups and the organization. In contrast to knowledge creation, knowledge acquisition involves the search for, recognition of, and assimilation of potentially valuable knowledge, often from outside the organization. In order to accomplish this, Bharadwaj, Chauhan, and Raman (2015) suggested institutions must develop an 'absorptive capacity' the ability to use prior knowledge to recognize the value of new information, assimilate it, and apply it to create new knowledge and capabilities.

Role Clarity

As defined by Shoemaker (2009), role clarity is "the degree to which a person is convinced concerning how he/she is expected to do a job". The level of clarity has also been linked to performance whereby an individual who is clear about his/her role will be more confident in fulfilling that particular function (Braxton, 2008). Smith (2003) stated that role clarity are actions that your supervisor would want you to do, though he can't make you do it formally and also cannot guarantee any reward in return. So, by this, even those behaviors comes under clarity regarding superior and hence a part of role clarity. In a study conducted by Morrison (2004), thus 18 out of 20 questions asked were identified by most as "in- role". He also added that role clarity varies from one employee to next one and from supervisor to employee. According to Nandal and Krishnan (2000) role clarity serve as the boundary between the individual and the organizations and represent the expectations of the individual and the organization. According to the role theory expect like Rizzo (2000), role clarity is seen as the degree to which required information is provided about how the employee is expected to perform his or her job. Role clarity adds positivity to service quality which in turn produces positive effect towards one's roles and responsibilities concerning his/her job (Diala & Nemani, 2011). In operationalizing role clarity, studies by Um and Harrison (2008) found that role conflict increased the levels of job dissatisfaction. Studies also have shown that role conflict has created positive impact in making employees become more open, flexible in adjusting to their roles (Jones, 2003). Hemantkumar and Premchand Babu (2017) have found that the vague boundaries in the organization structure and the job categories exist and role clarity, continuous change, diversified workforce were the reasons quoted mostly by the IT employees.

Yadav and Kumar (2017) in their study of role clarity on organizational performance found that gender of employees have a significant role in the organization's growth. Role clarity of the employees has been found to increase the consistency and perception of their job performance (Punita, 2011), improve psychological empowerment (Rizzo, 2000) and better performance (Bray, 2002). Morrison (2004) found that while a strong vision improves service quality, role clarity does not have a significant correlation with the team performance. Supervisory feedback to the employees on their favourable behaviours improves their performance in achieving the goals (Ashford, 2006). Feedback seeking by employees is a valuable resource to manage role ambiguity. Jones (2003) have suggested that individuals are active seekers of feedback. People who seek feedback are viewed positively by others (Ashford, 2006) and exhibit a better job performance. Jomon (2013) studied the role ambiguity and the role performance effectiveness with the personal feedback seeking behaviour of the employees and found that the effect of role ambiguity is reduced on their role performance. The perceptions of role clarity and job satisfaction increases significantly, when the frequency and predictability of the performance feedback for employees is increased (Kok, 2012). Abed (2016) found a significant correlation between employees' job satisfaction and the clarity of their job expectations, feedback provisions and accuracy of performance rating

The Relationship between role clarity and Service Quality in hospitals
Service quality is an important performance consequence of role clarity, although, there is limited empirical evidence regarding the relationship between role clarity and service quality (Singh,

2003). In studies which do report a relationship between role clarity and service quality, either a weak or no relationship has been found (Saleh, 2013; Micheals, 2007; Smith, 2003). However, in their extended service quality model, Zeithaml (2008) have conceptualised lack of role clarity (role ambiguity) as one of the key antecedents to the service quality gap, implying that role clarity perceived by frontline employees is critical to delivering service quality in service organizations. This is particularly true in hospitals, where frontline employees are frequently subjected to conflicting demands of achieving efficiency and customer service at the same time. Frontline employees who are clear about their roles and know what is expected of them are more likely to deliver better service quality than those who do not perceive role clarity

Based on the preceding arguments, the following hypotheses are stated for testing:
H1: Effective KM will have a significant positive influence on role clarity.
H2: Effective KM will have a significant positive influence on service quality.
H3: Role clarity will have a significant positive influence on service quality.
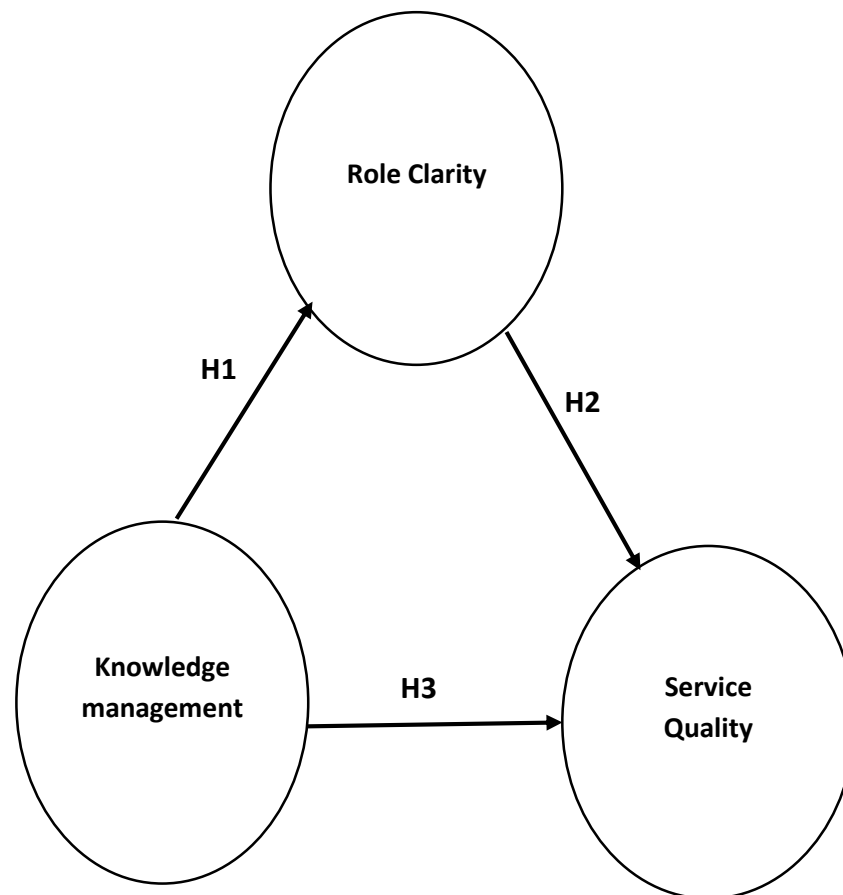**H4: Role clarity will mediate the influence of KM on service quality.**

Figure 1: Research Model

METHODOLOGY

The cross-sectional survey approach was employed in this study to investigate the impact of Knowledge Management on role clarity and service quality among private hosptials in Ghana, namely: Trust Hosiptal, Otoo Memorial Hospital and Cocoa Hospital. The purposive sampling technique was employed to select private hospitals based on the assertion that purposive sampling relies on the judgment of the researcher regarding subjects who are representative of the phenomenon or topic being studied (Creswell, 2006). The sample for the study constituted 300 employees selected using simple random sampling technuiqe. Data was collected using the questionnaire. Responses to the questions in the scale were anchored on a 5 point Likert scale ranging from 1-Never to 5-Always. Data collected through the use of the questionnaire was analyzed using the Statistical Package for Social Sciences (SPSS) version 20 from which inferential statistics were computed. The Pearson's product moment correlation analysis was used to determine the relationship between study variables whiles the hierarchical regression analysis was also used to establish the moderating effect of one variable on the relationship between the dependent and the independent variables. Structural equation modeling (SEM) technique was conducted using SmartPLS Application.

RESULTS ANS DISCUSSION

Reliability and validity of the measurement model
The study first assessed the reliability of the model. Two forms of reliability were employed. Indicator (items) reliability and composite reliability. Indicator reliability was computed by finding the square of each of the outer loadings (items). However, much acceptable value for indicator reliability should be a value larger than the minimum acceptable level of 0.4 (Hair, 2012). Larger values of items for indicator reliability indicates that the items used to measure the variables explains the variables well. Table 1.1 present the results of the indicator reliability. The study also looked at the cumulative or composite reliability of the variables as seen in table 1.1. According to Hair (2012), the cut-off score for composite reliability is 0.7. From the table, it is realized that all the items and variables meet the requirement of reliability, hence our variables can be said to be reliable. Convergent validity of the variables was also estimated. This specifies that items of a construct should share a high proportion variance (Hair, 2012). To check for this validity, the Average Variance Extracted (AVE) for each variable should be above the recommended cut-off 0.50 (Bagozzi & Yi, 2008). From table 2, it was found that allthe AVE values were greater than the acceptable threshold of 0.5, so convergent validity was confirmed.

Table 1.1: Measurement Reliability

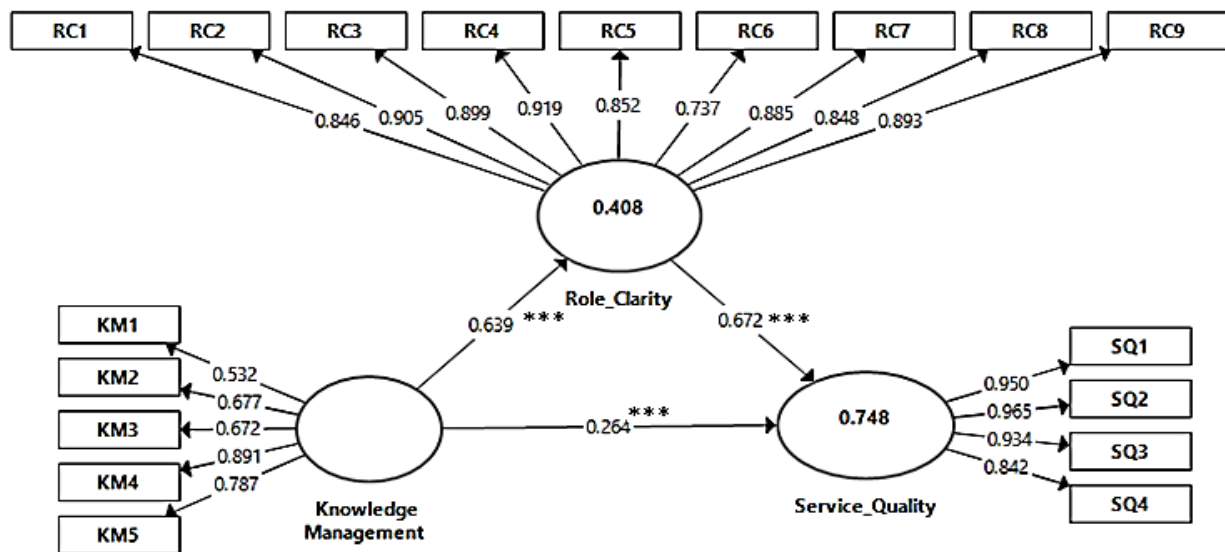| Latent Variables	Items (Indicators)	Factor Loadings	Indicator Reliability Loadings2)	(I.E.	Composite Reliability	Discriminate Validity
Knowledge Management	KM1	0.532	0.473			
	KM2	0.677	0.458			
	KM3	0.672	0.4515			
	KM4	0.891	0.7934		0.841	0.58
	KM5	0.787	0.6189			
	RC1	0.846	0.7153			
	RC2	0.905	0.8198			
	RC3	0.899	0.8076			
	RC4	0.919	0.8442			
Role Clarity	RC5	0.852	0.7252			
	RC6	0.737	0.5435		0.954	0.751
	RC7	0.885	0.7830			
	RC8	0.848	0.7199			
	RC9	0.893	0.7974			
	SQ1	0.950	0.9018			
Service Quality	SQ2	0.965	0.9312		0.959	0.854
	SQ3	0.934	0.8732			
	SQ4	0.842	0.7084			

Figure 1.2 outer loadings and R-values

Structural Model Assessment

The study computed the T-statistics to check for the significance of the model using a procedure called bootstrapping in SmartPLS. Path coefficient assessment was included in the structural model indicating the power of the relations among the R-square value and the latent variables (both independent and dependent variable). A 5% significance level ($p < 0.05$) was used as a statistical conclusion measure. The level of significance was determined using the t-values. As indicated by Hair (2012), t-values greater than the cut-off criteria (1.96) reflects significance in the model. Table 1.2 provides the summary of the results. The analysis shows (Table 1.2) that Knowledge management (KM) can explain 41.1% of the variability in Role Clarity and can also explain 75% of the variability in Service Quality. From Table 1.2, the hypothesis path for H1 was positive and significant ($\beta = 0.639$ P < 0.00). This indicates that knowledge management has a significant influence on role clarity. The hypothesis path H2 of the relationship between knowledge management and service quality was also found to be positive and significant, with P<0.00 and $\beta = 0.264$. finally, the hypothesis path for H3 was positive and significant ($\beta = 0.627$, P < 0.00).

Table 1.2 Model Assessment

HP	Path	Original sample (β)	Sample Mean (M)	Standard Deviation (Stdev)	T Statistics (|O/Stdev|)	P Values	Decision
H1	KM -> RC	0.639	0.647	0.042	15.288	0.000	Supported**
H2	KM -> SQ	0.264	0.258	0.063	4.172	0.000	Supported**
H3	RC -> SQ	0.672	0.677	0.052	12.984	0.000	Supported**
	RC (R^2) = 0.408 ≈ 0.41			**SQ (R^2) = 0.748 ≈ 0.75**			

*p < 0.10; **p < 0.05; ***p < 0.01. Key: KM = Knowledge Management, RC = Role Clarity SQ = Service Quality

Model Accuracy and Usefulness

The accuracy and usefulness of the model was also estimated using Stone-Geisser Indicator (Q^2) and Cohen's Indicator (f^2) (Hair, 2012). The Stone-Geisser Indicator (Q2) measures the model quality or significance model. As per Hair (2012), to obtain a good prediction quality, indicator value greater than zero should be obtained. However, a perfect model would have $Q^2 = 1$, which indicates the model reflects reality and is without any errors. Also, Cohen's Indicator (f^2) measures the usefulness of each construct. For Cohen's Indicator (f^2), Values of 0.02, 0.15 and 0.35 are considered small, medium, and large respectively (Hair, 2012). Table 1.2 shows that the values of Q^2, as well as those of f^2, indicate that the model is accurate and that the constructs are important for the general adjustment of the model.

Table 1.3: Values For Stone-Geisser Indicator (Q^2) And Cohen's Indicator (F^2)

Construct/variable	CV RED (Q^2)	CV COM (f^2)
Knowledge Management	0.301538	0.487263
Role Clarity	0.646884	0.501884
Service Quality	0.685532	0.497532
	$Q^2 > 0$	**f^2**> {0.02, 0.15 and 0.35 are considered small, medium and large}

Discussion of Findings

The unique contribution of the study was to ascertain the influence of knowledge management on role clarity and service quality. In confirmation with research hypotheses, findings demonstrated that knowledge management acts as a moderator of the relationship.The study further indicated that that the when employees become more open to each other in terms of sharing of information in solving problems service quality increased. Again, this study supports the claim made by Organ (2004) that employees portray a wide variety of knowledge management more often when they reach at a higher level of work experience. The present study is also in confirmation with the findings of Mowday (2018) that employees with high level of work experience demonstrates attitudes that produces authenticity of their past behavior and hence have stronger ties with the organization that yields service quality. It means that employees who have spent quite a long time in the organization turn to develop confidence in his/her role and learn to provide help and direction to fellow workers. Long term of work experience provides confidence in helping staff leading to and service quality.

Managerial Implications

The results from the study can be useful to the employees as well as the management in career planning and advancement. Management is advised to provide full understanding of the roles to the employees; full information regarding expectations from all the work colleagues' whether it is written or psychological in nature. The study showed that role clarity fosters service quality; organizations may persuade supervisors to provide support to employees in understanding their jobs.

CONCLUSION

Overall, this study indicates that a significant positive correlation was found to exist between Role Clarity and service quality. This result predicts that the more working experience an individual acquires "the more that he or she responsibly participates in, is involved in, or is concerned about the life of the company through knowledge management leading to role clarity and customers being happy with the services of the hospitals.

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