

FEATURE ARTICLE

Balanced Scorecard Implementation in a School of Nursing

A Case Study Analysis

by Cindy Brown

Implementing the balanced scorecard measurably improved the overall effectiveness of planning activities and increased individual involvement in and understanding of the strategic planning process.

THE BALANCED SCORECARD (BSC) has evolved into a powerful communications tool and strategic management system for profit-based organizations. *Harvard Business Review* has recognized the BSC framework as one of the 75 most influential ideas of the 21st century (Niven 2003). The BSC's performance-based approach links an organization's strategy to measurable goals and objectives in four perspectives: financial, customer, internal process, and learning and growth (Niven 2003). The BSC framework provides resources that assist organizations in mapping their performance improvement strategies and establishing connections among various organizational levels. The strategy map component of the BSC provides a graphical description of the organization's strategy, including the interrelationships of its elements. Cascading the BSC process allows the organization to take the scorecard down to departmental, program, unit, divisional, or individual measures of performance, resulting in a consistent focus at all levels.

While the BSC framework was originally developed for profit-based organizations, it also offers institutions of higher education (IHEs) a strategic planning tool that provides "an integrated perspective on goals, targets, and measures of progress" (Stewart and Carpenter-Hubin 2000–2001, p. 40). With increasing frequency, IHEs have undertaken strategic planning efforts aimed at improving the achievement of organizational objectives and operational efficiency (Beard

and Humphrey 2014). The scorecard affords IHEs a platform for establishing common measures across an academic unit that has shared characteristics (Umayal Karpagam and Suganthi 2012). According to Rice and Taylor (2003), there are a number of key considerations when implementing the scorecard in IHEs: involvement of faculty and staff, development of a strategic plan, establishment of lead and lag performance indicators, and improvement of organizational efficiency, effectiveness, and overall quality.

Despite the potential for application of the scorecard in IHEs, there is a dearth of published literature describing the process and evaluation of higher education BSC implementation. Explanations for this include lack of knowledge and awareness of BSC application (Beard 2009) and absence of a detailed, systematic process for executing the BSC model in higher education (Asan and Tanyas 2007). The few international and national IHEs that have published their experience with implementing the BSC approach describe positive outcomes or other measures of success (Cribb and Hogan 2003; Hafner 1998; McDevitt, Giapponi, and Solomon 2008; Mikhail 2004; Nefstead and Gillard 2006). Besides documenting the effectiveness of the BSC approach, four universities in the United Kingdom generated a checklist of key factors that contribute to success when using the framework. Those factors included clarification of the scorecard audience, identification of a BSC champion,

scorecard reflection of the university mission, consideration of clearly defined measures and key performance indicators, and attention to the scorecard's overall visual presentation and format (Taylor and Baines 2012). Documentation of campus-wide utilization of the BSC strategic framework exists; in addition, specific areas of focus in higher education that have used the framework include schools of agriculture, schools of business, library services, and university administrative services (Cribb and Hogan 2003; McDevitt, Giapponi, and Solomon 2008; Nefstead and Gillard 2006).

Prior research has resulted in resources and tools for tailoring the BSC approach to IHEs. Umayal Karpagam and Suganthi (2012) developed an IHE strategy map template and framework for assessing performance in the four BSC perspectives. An IHE methodology has been proposed for BSC implementation using Hoshin Kanri, a process-oriented approach (Asan and Tanyas 2007). Additionally, an educational scorecard has been suggested for master's-level courses that may be adapted to other courses and IHEs as a whole (Griggs, Blackburn, and Smith 2012).

The purpose of this case study is to add to the literature on the use of the BSC strategic framework in IHEs, focusing on how the framework was executed over the course of three academic years in a School of Nursing. The case study analysis describes the adoption of the BSC framework from the initial development through implementation and concludes with an evaluation of the process.

CASE STUDY SETTING

The BSC framework was implemented in a School of Nursing at a small Catholic Benedictine liberal arts college in northern Minnesota. This School of Nursing (SoN) was in a position to greatly benefit from such a framework (Brown 2012). In recent years the school had become one of the largest nursing programs in Minnesota and was faced with the challenge of organizing a complex structure. The SoN was composed of

undergraduate programs taught in traditional, accelerated, and online formats and graduate programs that included master's and doctoral degrees with five different advanced nursing practice specialties delivered online and on different physical campuses. The BSC approach had the potential to help the SoN identify "priorities and then, through the BSC improvement plan, ... establish connections and improve communication among the four nursing departments and the school" (Brown 2012, p. 48). Further, nursing accreditation standards, which articulate the quality parameters for baccalaureate and graduate nursing programs, mandate that a SoN's mission, goals, and outcomes fit with the college's mission and vision (Commission on Collegiate Nursing Education 2013). The BSC can serve as the working document that illustrates the achievement of this important quality standard.

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METHODOLOGY

DEVELOPMENT PHASE

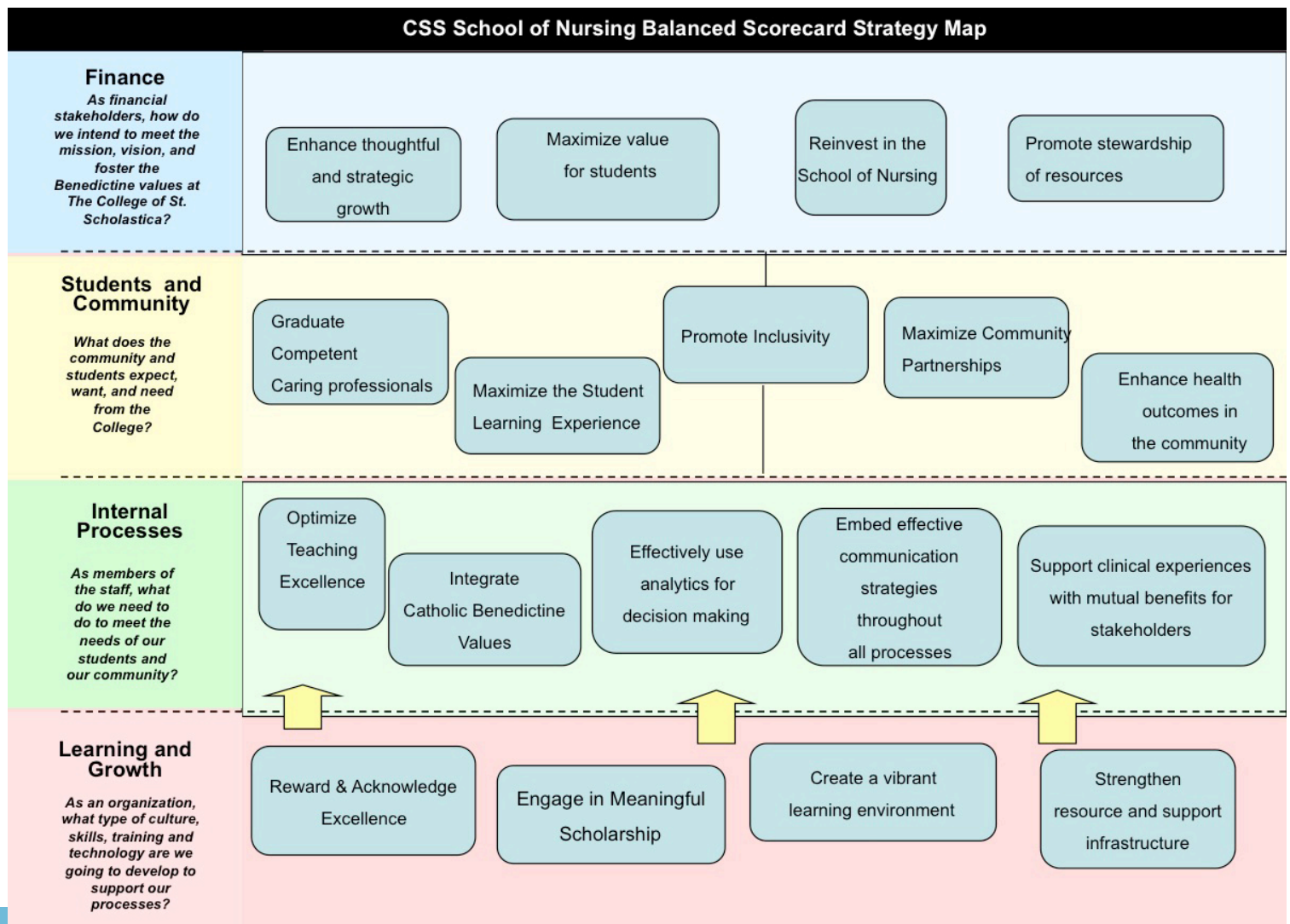
Applying Stewart and Carpenter-Hubin's (2000–2001) process for successful BSC implementation begins with clear delineation of the mission and vision, including translating the vision into specific strategies with a set of performance measures. Using this process, development of the BSC conceptual framework in the SoN commenced in the 2012–2013 academic year with the first SoN meeting, which started with an overview of the BSC approach and a general description of the implementation process. Following this informational meeting, faculty and staff input was solicited through two anonymous surveys. The BSC Assessment Survey (Appendix A) gathered information on faculty and staff perceptions and understanding of their role in SoN and program/department strategic planning using a Likert scale.

The Visioning Survey (Appendix B) adapted questions from the scorecard building process (Kaplan and Norton 1996) in order to seek input on the priorities and vision for the SoN in each of the four BSC perspectives: financial, students and community, internal processes, and learning and growth.

The SoN BSC task force was composed of several scorecard champions: one from each of the four nursing programs/ departments, the SoN dean, an administrative staff member, and this author. This task force then partnered with a college scorecard champion who had extensive BSC experience in the nonprofit sector for the purpose of analyzing the scorecard visioning results and identifying common themes in each of the four BSC perspectives. These themes were presented

to the entire SoN for further input and clarification. Based on this feedback, the task force, again in consultation with the college champion, established specific strategies for three of the four perspectives; the SoN dean assumed responsibility for establishing strategies for the financial (fourth) perspective, using her expertise and the visioning results. The college’s mission, vision, and academic goals and the SoN’s mission and vision were also considered in the creation of these strategies. The culminating product of this work was the SoN balanced scorecard strategy map (figure 1), which was finalized at the end of the 2012–2013 academic year and provided a graphical description of the 18 strategies conceived for the SoN.

Figure 1 SoN Balanced Scorecard Strategy Map



IMPLEMENTATION PHASE

For academic year 2013–2014, as a result of seeking input at several SoN meetings, five strategies representing each of the four perspectives were selected as strategic priorities: (1) enhance thoughtful and strategic growth, (2) graduate competent and caring professionals, (3) promote inclusivity, (4) embed effective communication strategies throughout all processes, and (5) strengthen resource and support infrastructure. The BSC implementation goal for that academic year was to develop performance measures for each of these strategies. In the end, the 2013–2014 SoN balanced scorecard (figure 2) included performance measures for all strategies except “graduate competent and caring

professionals.” SoN members agreed that this particular strategy should be measured at the program/department level because the parameters that identify competency are different for undergraduate and graduate levels of nursing practice. SoN inclusivity task force goals were adopted as the performance measures for the strategy “promote inclusivity.” Late in the spring semester, work on the communication performance measure was relegated to the SoN executive committee, which in turn charged the BSC task force with developing a comprehensive communication plan for the SoN for the following academic year (2014–2015). The SoN balanced scorecard shown in figure 2 provides information relating to the achievement of performance measures for each of the five strategies.

Figure 2 2013–2014 SoN Balanced Scorecard

| STRATEGY | WHO | MEASURE | TARGET/GOAL | PROGRESS |
|---|--|--|--|--|
| Enhance Thoughtful & Strategic Growth | Non Traditional Traditional Post Baccalaureate Graduate | Gap analysis completed for each department by March 1, 2014. | 1) Conduct a gap analysis on current resources and needs, expected growth & barriers that inhibit growth by March 1, 2014. | No outcomes reported. |
| Enhance Thoughtful & Strategic Growth | Dean and Chairs | Identify and itemize the actual cost of each SON program at the department level by March 1, 2014. | 1) Identify and itemize the actual cost of each SoN program at the department level by March 1, 2014. | No outcomes reported. |
| Enhance Thoughtful & Strategic Growth | SoN | Long term strategic plan exists to address the nursing faculty shortage. | 1) Long term strategic plan exists to address the nursing faculty shortage. | 1) Gap analysis work was completed in Fall 2013 which included brainstorming of ideas to address nursing faculty shortage. |
| Graduate Competent & Caring Professionals | Departments Admission and Progression Committees Admission and Progression Committees Admission and Progression Committees Department Chairs | Evaluate screening process for all program admissions. Baseline Benchmark of Program Admission Criteria with other schools. Determine factors that contribute to student success and students at risk. Exit Strategy established for students that are not successful (department level-standardized clinical cases). Percentage of nursing students who remain in good academic standing. | 1) The admission screening process for each program is evaluated. 1) Program admission criteria are benchmarked with other schools. 1) A “profile” of successful student attributes and barriers for success is created. 1) Each department provides an exit strategy for students who are not successful. 1) Ninety percent of all nursing students remain in good academic standing each semester. | Not measured at the SoN level. |

| STRATEGY | WHO | MEASURE | TARGET/GOAL | PROGRESS |
|--|----------------------------|---|--|--|
| Promote Inclusivity | Inclusivity task force | Inclusivity task force plan includes meeting three times each semester for the purpose of developing a strategic plan and goals by May 2014. | Inclusivity task force | 1) The task force met more than three times this semester. Task force is waiting for the College consultant's report on inclusivity and diversity. Consultant's report will guide the recommendation for strategic plan and goals. |
| | Inclusivity task force | Task force conducts a SoN inclusivity community forum each semester. | Inclusivity task force | 1) Three forums took place Spring semester. The fall forum was canceled due to bad weather. |
| Embed effective communication strategies throughout all processes. | SoN | Complete gap analysis that identifies the top 3 opportunities for communication improvement. | 1) Gap analysis that identifies the top 3 opportunities for communication improvement. | 1) College librarian conducted gap analysis training fall semester which included some initial work on communication issues; 2) Survey conducted in April 2014 identified top 4 communication priorities. » Enhance communication between undergraduate programs » Improve intraschool communication to reduce redundancy » Enhance communication with distance learning sites » Sharing of successes & failures across programs & administration |
| | | Identify resources available to meet goal of communication transparency | 1) Determine resources available to meet goal of communication transparency. | No outcomes reported. |
| Strengthen resource and support infrastructure | ????? | By 2015, the faculty role will be defined and the current SON support structure will be examined and contrasted with the ideal structure leading to recommendations for SON infrastructure. | 1) By 2015, the faculty role will be defined and the current SON support structure will be examined and contrasted with the ideal structure leading to recommendations for SON infrastructure. | 1) Staff group developed document delineating roles and responsibilities, identification of gaps, led to Staff "officer on duty" 2) Gap analysis work in the area of SoN support structure was completed in Fall 2013. |
| Strengthen resource and support infrastructure | Dean and Department Chairs | A plan will be devised to explore strategies to increase opportunities for staff development in the SON by the end of the 2013-2014 academic year. | 1) A plan will be devised to explore strategies to increase opportunities for staff development in the SON by the end of the 2013-2014 academic year. | No outcomes reported. |
| Strengthen resource and support infrastructure | Departments | Evaluate trends in adjunct faculty support needs annually for the next three years. | 1) Evaluate trends in adjunct faculty support needs annually for the next three years. | No outcomes reported. |

The emphasis of BSC implementation for academic year 2014–2015 was to review the SoN BSC strategy map (figure 1), prioritize the strategies of focus for the year, and then subsequently establish performance measures for those strategies. Based on accreditation feedback from the Commission on Collegiate Nursing Education and direction from the SoN dean, the strategies of “engage in meaningful scholarship” and “optimize teaching excellence” were added as priorities for the academic year and “graduate competent and caring professionals” was removed. As a result, there were six strategy priorities for 2014–2015. One of the performance measure directives was to include documentation of aggregate faculty scholarly work, including benchmarks. Performance measures for the strategy “promote inclusivity” were established using the 2014–2015 goals set forth by the SoN inclusivity task force.

The SoN administrative staff had cascaded the SoN scorecard by developing its own performance measures in relation to SoN strategies. Staff performance measures for “strengthen resource and support infrastructure” were adopted as SoN performance measures in the learning and growth dimension. Performance measures were thus identified for all six strategies. The 2014–2015 SoN balanced scorecard (figure 3) included documentation of the performance measures and the progress in achieving those measures. At the end of the third academic year (2014–2015), the same BSC Assessment Survey (Appendix A) was re-administered to assist in evaluating faculty and staff perceptions and understanding of their role in strategic planning. The end of this three-year period also coincided with the retirement of the SoN dean.

Figure 3 2014–2015 SoN Balanced Scorecard

| STRATEGY | MEASURE | TARGET/GOAL | FREQUENCY | PROGRESS |
|--|---|--|----------------------|--|
| Enhance Thoughtful & Strategic Growth | In collaboration with enrollment management and academic affairs, the Dean and Chair of each program will set the budget for nursing program student enrollments. | Before the College budget is set, all Graduate and Extended Studies (GEO) nursing program chairs and the Dean will have at least one meeting with marketing, recruitment and academic affairs to set enrollment goals. | Annually | Goal met. |
| Promote Inclusivity | The SoN Inclusivity task force will conduct training sessions on diversity flashpoints at SoN Meetings. | 1) Diversity Flashpoint training will occur at 100% of the SoN meetings Spring Semester 2015. | Monthly | Goal partially met. Training occurred at 60% of the meetings. |
| Embed effective communication strategies throughout all processes. | Each SoN department and the administrative group will provide an update at each SoN meeting. | 1) Updates from the identified groups/departments occur at 100% of SoN meetings throughout the academic year. | Annually | Goal met. Department updates have been provided at all SoN meetings 2014-2015. |
| Embed effective communication strategies throughout all processes. | SoN Executive Committee will conduct a resurvey on targeted areas for communication. | 1) Resurvey on targeted areas for communication will be conducted by November 2014. | Fall Semester 2014 | Goal met. Resurvey completed 11/14. |
| | | 2) The executive committee to discuss strategies to target communication issues identified by the survey. | Spring Semester 2015 | Goal met. Strategic Communication Plan in place 2/15. |

| STRATEGY | MEASURE | TARGET/GOAL | FREQUENCY | PROGRESS |
|--|---|--|--|--------------------------------|
| Optimize Teaching Excellence | Implementation and appraisal of the new faculty evaluation tool. | 1) The new faculty evaluation tool will be utilized this academic year for all faculty performance reviews. 2) A method for evaluating the tool will be established by Fall 2015. | Spring Semester 2015 Fall Semester 2015 | To be implemented Spring 2015. |
| Optimize Teaching Excellence | Faculty participates in a professional development training/opportunity in the area of teaching | 1) Seventy-five percent of faculty participates in a professional development opportunity/training to enhance teaching. | Annually | Incomplete data collection. |
| Engage in Meaningful Scholarship | Faculty engagement in scholarly work that supports self-identified area of expertise. | 1) Twenty percent of faculty will engage in a minimum of one of the four Boyer (1990) areas of scholarship: discovery, teaching, practice or integration; in the identified area of expertise. | Annually | Incomplete data collection. |
| Strengthen Resource and Support Infrastructure | SoN staff participates in and utilize concepts from the CSS Professional Development Institute. | 1) Eighty percent of SoN staff will attend the Institute. 2) Eighty percent of SoN staff will utilize concepts/training with six months of attending the institute. | Annually | Goal met. |
| Strengthen Resource and Support Infrastructure | SoN staff participates in one campus related committee. | 1) On an annual basis, 100% of SoN staff participates in one campus committee outside of assigned tasks/roles/job position description. | Annually | Goal met. |
| Strengthen Resource and Support Infrastructure | The SoN members engage in a health and wellness activity. | 1) Ninety percent of SoN members will participate in a Well-U activity or a self-identified health and wellness activity. | Annually | Incomplete data collection. |

RESULTS

As described under “Methodology,” both a pre- and post-BSC Assessment Survey were administered to SoN staff and faculty to assess their perceptions and understanding of, as well as their involvement in, the strategic planning process, and the mean survey results were compared. The survey was administered at the end of SoN meetings to 43 faculty and staff; 58 percent ($n = 25$) completed the pre-survey and 51 percent ($n = 22$) completed the post-survey. When comparing mean pre- and post-assessment survey results, a statistically significant ($p < .05$) difference was found for all questions except two that related to understanding the link between SoN goals and college goals and having an awareness of SoN goals (figure 4). After implementation of the BSC framework,

survey participants reported a significant increase in their understanding of how their individual performance is linked to the SoN ($p = .008$), how goals are measured in the SoN ($p = .000$), and what the strategic plan and priorities are for the SoN ($p = .004$). In addition, post-survey mean results indicated more individual involvement in the strategic planning process ($p = .002$) and revealed that participants believed that SoN planning activities are more effective in helping achieve goals ($p = .003$).

Participants reported a significant increase in their understanding of how their individual performance is linked to the SoN, how goals are measured in the SoN, and what the strategic plan and priorities are for the SoN.

Figure 4 **BSC Assessment Survey Results**

| Survey Questions | Pre-Test Mean/SD n= 25 | Post-test Mean/(SD) n= 22 | P Value |
|--|---------------------------|------------------------------|-------------|
| 1. I understand how my individual performance links to the School of Nursing | 3.92/(0.49) | 4.36/(0.58) | .008 |
| 2. Goals in my Department and/or School of Nursing are directly linked to the College goals | 3.72/(0.94) | 3.95/(0.90) | .386 |
| 3. I am involved in the strategic planning process for my department and/or School of Nursing. | 3.28/(1.06) | 4.14/(0.64) | .002 |
| 4. I can identify my departmental and School of Nursing annual goals. | 3.80/(0.91) | 4.04/(0.90) | .359 |
| 5. I understand how goals are measured in mydepartmentand/or the School of Nursing. | 2.75/(1.07) | 4.00/(0.98) | .000 |
| 6. Progress in achieving SoN/department performance measure outcomes are frequently reviewed or monitored. | 2.68/(1.03) | 3.36/(1.00) | .026 |
| 7. I have a clear understanding of the strategic plan and priorities for the School of Nursing. | 2.52/(0.87) | 3.45/(1.18) | .004 |
| 8. I feel that School of Nursing planning activities are effective in helping us achieve our goals. | 2.80/(0.87) | 3.63/(0.95) | .003 |

Note: 5 = Strongly Agree; 4 = Agree; 3 = Don't Know; 2 = Disagree; 1 = Strongly Disagree

During the three-year process of implementing the BSC framework, a SoN BSC strategy map (figure 1), two SoN scorecards (figures 2 and 3), and one cascaded staff scorecard were developed. In addition, a total of 15 performance measures were developed for the five strategies in academic year 2013–2014 (figure 2). Outcomes were reported for five (33 percent) of these performance measures. (While five performance measures were developed for the strategy “graduate competent and caring professionals,” those measures were not addressed at the SoN level.) In academic year 2014–2015, a total of 13 performance measures were developed for six strategies (figure 3). Outcomes were reported for nine (69 percent) of these performance measures. Data collection was incomplete for the three performance measures that reflected teaching excellence, meaningful faculty scholarship, and strengthening resource and support infrastructure through personal health and wellness.

During the two-year timeframe of scorecard implementation, of the 28 performance measures established, nine (32

percent) of the outcomes were met (figures 2 and 3).

Outcome measures were met in each of the four scorecard dimensions. Some examples of performance measures that were met included SoN dean and program chair meetings with marketing, recruitment, and academic affairs to set enrollment goals for various programs; department/program communication updates at all SoN meetings; implementation of a new faculty evaluation tool; diversity Flashpoint training at SoN meetings; development of a strategic communication plan; and completion of gap analysis work.

DISCUSSION

Implementation of the BSC framework over three academic years in the SoN generated many positive outcomes as supported by survey results. Executing the framework had a favorable effect on individual involvement in and understanding of the SoN’s strategic planning process. Improvement in the overall effectiveness of SoN planning activities reinforced the fact that the school was moving in the right direction in support of its goals.

SoN members expressed enthusiasm for adopting the BSC as indicated in pre-survey comments and revealed during a self-reflection exercise conducted at the end of the 2012–2013 academic year. Representative pre-survey comments that supported readiness to adopt the scorecard included

- » “We’re working toward a better understanding of the goal-setting process and making realistic goals but the process is new and not cemented in standard operating procedures.”
- » “I am enthusiastic about the introduction of the balanced scorecard.”
- » “We need a meaningful vision. Goals and objectives need to follow from the vision. Goals need to be very visible, i.e., an agenda item at SoN and department meetings. There needs to be an objective measurement of each goal.”

During the self-reflection activity, the majority of faculty identified the BSC framework as the greatest positive change in the SoN over the course of the year. Faculty and staff were excited about the opportunity to become a more cohesive school united by common strategies and corresponding performance measures that would contribute to both viability and success. SoN members indicated that communications throughout the school were improved as part of implementing the framework. McDevitt, Giapponi, and Solomon (2008) also reported university success in creating a communications network between faculty and staff as part of BSC implementation.

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A generally favorable impression of BSC implementation was reflected in the following post-survey comment: “Feels a bit disjointed at times but progress seems to be being made.” The overall positive experience in implementing the BSC

came to the attention of the college’s School of Education (SoE). As a result, several SoN scorecard champions shared the BSC implementation process with the SoE, which in turn instituted principles from the BSC framework.

Unfortunately, a limitation existed with the BSC Assessment Survey. The wording of some survey questions asked participants to provide a response for both the SoN and their department/program instead of asking two separate questions. Two respondents differentiated between the SoN and their department/program in their responses by providing two responses for each of these questions. However, it was evident, based on their more favorable rating, that these survey participants had a greater understanding of department goals than SoN goals and were more involved in strategic planning for their departments than for the SoN as a whole. Since the intent of the survey was to focus on the SoN, the designated SoN responses for these two individuals were used in the data analysis. It is plausible that responses from other survey participants were skewed as they tried to account for differences in their perceptions and understanding between the SoN and their department when completing the survey.

The major challenges that emerged during the execution of the BSC framework in the SoN related to the inefficient decision-making process, unsustained commitment of task force members, unclear role delineation of the BSC task force, and loss of the campus BSC champion expert. Rice and Taylor (2003) emphasized the importance of including staff and faculty in the development of the BSC; therefore, bringing all decisions to monthly SoN meetings was felt to be the best way to engage all members in developing the strategy map and scorecard. Historically, staff members had infrequently attended these meetings and so were encouraged to join them.

Bringing the decision-making process to the entire SoN, however, led to delays in implementing the framework. Delays in achieving consensus were also experienced during BSC

implementation at Fairfield University School of Business (McDevitt, Giapponi, and Solomon 2008). While it was common to have the BSC on the SoN meeting agenda, often adequate time was not allotted to BSC issues and consensus was not achieved in making decisions related to those issues. For example, SoN faculty agreed on the strategy measure of “faculty engagement in scholarly work,” but grappled with identifying what constituted scholarly work and establishing performance goals for undergraduate and graduate faculty, considering that there may be differences in expectations between the two levels of nursing education. Despite deliberating the use of Boyer’s (1990) four areas of scholarship to define scholarly work—scholarship of discovery, scholarship of teaching, scholarship of practice (application), and scholarship of integration—an agreement could not be reached. This inability to compromise led to inconsistent data collection for this strategy during the 2014–2015 academic year.

It was difficult to maintain momentum in adopting the BSC framework due not only to delays in the decision-making process but also to a lack of commitment from BSC champions/task force members. Previous work at the university level attributes success in adopting the BSC strategic framework to the use of BSC champions (Hafner 1998; Taylor and Baines 2012). The role of the champions is to exchange dialogue and information related to organizational performance measurement and management. Some champions were assigned to the SoN BSC task force as opposed to volunteering. Additionally, nursing program commitments and curriculum development and teaching responsibilities limited dedication to the BSC initiative. As a result, there was some champion disengagement and turnover on the task force during the three-year period; the majority of the responsibility for scorecard implementation was diverted to this author and the SoN dean. In some instances, responsibility for directing scorecard strategy work was never established, which contributed to lack of follow-through in monitoring and managing the identified performance measures. The absence of key task force members and the

inadequate advance preparation for SoN meetings by the task force committee also contributed to a drawn-out process of implementation. Further, losing the campus BSC champion expert produced a gap in the expertise and experience needed to guide the process and maintain momentum in implementing the framework.

While it was evident that the BSC task force was charged with executing the BSC framework for the SoN, the task force’s roles, responsibilities, and authority in relation to this undertaking were not clear. As previously mentioned, the BSC task force was instructed to develop a comprehensive communication plan for the SoN during the implementation process. This questionable task delegation resulted in the evolution of the BSC task force to the BSC strategic planning committee with a number of explicitly defined tasks: provide oversight for the SoN’s strategic planning performance management system; offer direction and problem solving related to strategic planning issues; build support and momentum for scorecard implementation; support and assist designated programs and the administrative group in cascading the scorecard to all nursing programs; and oversee the data collection and reporting process for the SoN strategic plan. The SoN recognized the need for a standing committee as opposed to a task force to lead the BSC strategic planning performance management system on an ongoing basis.

FUTURE RECOMMENDATIONS

The SoN’s experience in implementing the BSC reinforced the importance of developing a systematic plan for implementation and engaging faculty and staff in the process. There are numerous recommendations that would enhance the SoN’s overall success in adopting the BSC framework going forward. These recommendations relate to the involvement of a BSC champion with expertise in scorecard implementation, changes in the decision-making process, and increased scorecard visibility. A BSC champion with expertise in implementing the framework should serve

as a consultant throughout the entire implementation. To expedite the decision-making process, the BSC committee should develop proposed measures, etc., in advance of SoN meetings, using the meeting time to discuss the committee's recommendations with the goal of making decisions regarding those recommendations prior to the end of the meeting.

Additionally, the SoN scorecard should be finalized prior to the start of the new academic year so that progress can be made in cascading the scorecard to the various programs/departments (graduate, RN to BS, undergraduate traditional, undergraduate post-bac accelerated program) and staff during the year. The SoN scorecard should clearly identify the individual(s) responsible for each performance measure. Further, scorecard visibility should be increased through a variety of venues. The scorecard should be accessible through a common computer drive, and BSC progress in achieving measured outcomes should be a standing SoN meeting agenda item.

It would also behoove the SoN to involve other key stakeholders such as students, community health leaders, and health care institutions and clients in future strategic planning efforts in order to expand the depth and scope of the scorecard by including additional perspectives. It is imperative that adequate resources (staff, time, and finances) be made available to support such an endeavor.

CONCLUSION

The SoN experiences presented in this case study analysis offer further evidence of the applicability and value of the BSC in IHEs. Implementation of the BSC framework provided the SoN with a powerful strategic management and communication tool that led to numerous positive outcomes. The more notable outcomes included a strategic plan that supports the college's mission and vision, improved communication within the SoN, a united effort to

institute strategies to sustain the future of the school, and performance indicators to measure success in achieving those strategies. The achievement of performance measures also enhanced the overall quality, efficiency, and effectiveness of the SoN.

This case study analysis described the process of BSC implementation in the SoN. This incremental process commenced with a Visioning Survey (Appendix B) that identified common themes, which through further discussion and clarification led to the SoN BSC strategy map (figure 1). The strategy map included 18 strategies to guide future work in the school. Each academic year, this strategy map was reviewed in order to prioritize that year's focused effort. After five to six yearly priorities were determined, performance measures were created for each as shown in the scorecards (figures 2 and 3). A SoN consensus decision-making process was used in the development of the strategy map, yearly priority strategies, and performance measures. SoN inclusivity task force performance measures, staff cascaded scorecard performance measures, and mandated regulatory performance measures were also adopted as outcome measures in the SoN scorecard. Ongoing commitment to the BSC framework gave the SoN the tools needed to identify its priorities and, through development of a BSC, continue to enhance connections and improve communications among the four nursing programs/departments.

APPENDIX A

BSC ASSESSMENT SURVEY

The information you provide will help in identifying current perceptions, understandings, and involvement in the strategic planning process. All individual responses will be kept confidential with reporting only at the aggregate level. Completion of this survey is voluntary; if you choose not to participate there will be no repercussions for your decision. Thank you for your consideration.

The SoN Balanced Scorecard Champions

Please circle the response that most accurately reflects your level of agreement with each of the eight statements.

1. I understand how my individual performance links to the School of Nursing.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

2. Goals in my Department and/or School of Nursing are directly linked to the College goals.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

3. I am involved in the strategic planning process for my department and/or School of Nursing.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

4. I can identify my departmental and School of Nursing annual goals.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

5. I understand how goals are measured in my department and/or the School of Nursing.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

6. Progress in achieving SoN or department performance measure outcomes are frequently reviewed or monitored.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

7. I have a clear understanding of the strategic plan and priorities for the School of Nursing.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

8. I feel that School of Nursing planning activities are effective in helping us achieve our goals.

Strongly Agree Agree Don't Know Disagree Strongly Disagree

9. In which program area is your primary workload assignment?

Undergraduate Graduate

Any Additional Comments:

APPENDIX B

VISIONING SURVEY

Financial

In order to meet the needs of our department, SoN, and the College, as well as delight and dazzle our customers, what do we need to look like financially?

Customers (Students, Patients, Families, Alums) and Community Partners

What does delighting and dazzling our customers and community partners look like? What do our community partners and customers need from us? Who are our proposed customers? What value do we add?

Internal Processes

In order to delight and dazzle our customers and maintain financial stewardship, what internal processes do we need to excel at and what does that look like?

Infrastructure (Learning & Growth)

In order to delight and dazzle our customers, maintain financial stewardship, and rock our internal processes, what does our people and infrastructure (technology, space, training/development, etc.) need to look like?

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