Organisational Profiling as foundation for Service Delivery Baseline Analysis

Gerrit van der Waldt


ABSTRACT

This article maintains that the implementation of Service Delivery Improvement Plans (White Paper on Transforming Public Service Delivery, 1997) could significantly be enhanced by gaining an understanding of public institutions’ core processes. A process is seen as a series of activities with an input and an output with the purpose to achieve institutional strategic objectives. By profiling the ‘DNA’ (layers of primary, secondary and tertiary processes) of public institutions, continuous process improvement initiatives would lead to more effective service delivery.

It is argued that more emphasis should be placed on profiling the ‘whole’ institution (macro, meso and micro institutional variables) to better understand implementation issues such as structure, social and historical context, systems, resource utilisation, systems, capacities, politics and culture. It is proposed that a formal organisational profile (OP) methodology be followed by managers on strategic, tactical and operational levels to obtain a more balanced framework for identifying key variables which may impact on service delivery. OP methodology should answer the “Where are we now?”-question and profile processes, and strategic considerations from qualitative as well as statistical data. The article concludes by calling for more effort to be focused on developing more pro-active and integrated approaches to analyse, model and facilitate organisational processes associated with the implementation of service delivery initiatives.

1. INTRODUCTION

It is generally perceived that South African public institutions on all tiers and spheres of Government find it difficult to adhere to their constitutional obligations and mandates to improve the quality of life of all citizens. It is further apparent that the South African Public Service is not progressing as effectively as it ought to in implementing the principles underlying the transformation of public service delivery. Service delivery is an extremely complex and multidimensional endeavour and therefore attempts to improve the levels and standards thereof need to be approached from various vantage points. The underlying reasons why public institutions struggle to adhere to service expectations should be sought.

One initiative to improve service delivery in South Africa was the establishment of the White Paper on Transforming Public Service Delivery (1997) in which the compilation of a Service Delivery Improvement Programme (SDIP) would be an essential mechanism to monitor delivery in a department. In order to develop SDIPs
there should be a clear link between the strategic objectives of the department and the various programmes and projects for implementation.

The focus of this article is first of all to contextualise the Service Delivery Improvement Programme, and secondly, to highlight best practices as far as the third step in the SDIP is concerned, namely “Establish the current service baseline”. It is argued that developing an organisational profile is the first and most necessary phase in achieving maximum performance and that Organisation Profiling (OP) as management tool should be utilised to adequately perform such a service baseline analysis.

2. THE CONTEXT: THE SERVICE DELIVERY IMPROVEMENT PROGRAMME

Abraham Lincoln once said: “The legitimate object of government is to do for a community of people whatever they need to have done, but cannot do at all in their separate and individual capacities”. This statement sums up the need for a collective effort, a common objective, if government departments are to be effective in meeting the needs of society.

Such a common objective in aligning government effort to render effective services, is the White Paper on Transforming Public Service Delivery (1997). According to this White Paper (1997:24-25) Government departments in South Africa need to develop service delivery improvement programmes, which should set out, among other things, the following:

- The existing levels of service and the proposed service standards to be adopted in the short, medium and long term.
- How service standards will be monitored and reported on, and the management information systems, which will support this.
- The organisational and systems arrangements, which will ensure standards, are met.
- The human resource training, supervision and appraisal arrangements, which will ensure that staff behave in accordance with the principles of Batho-Pele.
- How the department’s communication system will be geared up to provide information about the type and frequency of services that customers require.
- How complaints systems will be developed to identify and rectify failure to deliver the promised standard to individual ‘customers’.
- The financial management systems which will collect data on the unit costs of key services, in order to provide information for standard and priority setting in subsequent years.

Based on these requirements, each Government department must design and implement a Service Delivery Improvement Plan which the relevant Minister/MEC/executing authority must approve. Once approved, the head of department will be held accountable for its implementation. Based on performance contracts, senior management will in turn be held accountable for delivering in their respective key performance areas (KPAs) of the plan. To facilitate monitoring each departments need to develop appropriate mechanisms to provide relevant information to the Public Service Commission, Department of Public Service and Administration,
Portfolio Committees, the national and provincial and inter-provincial transformation co-ordinating committee, and developmental transformation units; and provide the basis for the eventual published document setting out the organisation’s service standards and other service delivery goals and commitments.

2.1 Implementation of a Service Delivery Improvement Plan

In a developing state, such as South Africa, improving service delivery is a continuous, incremental and progressive process. As service levels and standards are raised, higher performance targets must be set. Implementing a service delivery improvement programme can best be illustrated in an eight-step cycle.

**Step One: Identify the customer**

The starting point is to establish who the recipients of service are. There are a variety of customers, whose requirements do not necessarily coincide. On the one hand, there are recipients of service such as the public, external organisations, other departments and other components within the department. On the other hand, there are also indirect “customers” whose needs must also be taken into account. Taxpayers, for example, are customers, because Batho-Pele gives them a right to expect that services will be provided cost effectively.

**Step Two: Establish customer needs and priorities**

The customer’s needs and priorities will be the starting point for the setting of standards. Since delivery on standards will involve decisions about resources, it is essential to have accurate information about what customers really want. This will require systematic, regular consultation, using objective methods, which ensure that the views of all customers, including potential customers, are represented. Methods used to obtain information can vary from written questions to interviews.

**Step Three: Establish the current service baseline**

Accurate information about the current level and quality of service is essential in order to decide where and how to make improvements. A thorough scrutiny of organisational arrangements, work processes and practices involved in delivering the services provided as well as the motivation and skills of staff will be required to establish the current baseline (Van der Waldt 2004:104). Performance metrics per organisational element and functional area need to be applied and yard sticks or performance indicators should be developed to measure current successes and failures.

The establishment of a baseline, is the locus and focus of this article. Brue (2002:56) defines a ‘baseline’ as an indication of the current status of organisational performance. He (Brue) suggests that metrics need to be determined to provide management with the most important information about processes to establish a baseline. Brue (2002:57) further highlight the fact that baselining is important to set a standard for comparisons, a reference for measuring progress in improving a process, usually to differentiate between a current state and a future state. Baseline studies
include the measurement of key input variables, key process variables, and key output variables.

**Step Four: Identify the improvement gap**

If there a gap between what customers want and the level and quality of service currently provided? Closing this gap is the prime aim of a service delivery improvement programme. Accurate identification of customers’ needs and of the current service baseline will enable targets to be set for improvement in a systematic, prioritised way, taking account the availability of resources. A service delivery improvement programme will be deemed successful if there has been an improvement in the quality and quantity of services required and delivered to customers.

**Step Five: Set service standards**

Once the improvement gap has been identified, standards can be set and progressively raised for closing the gap. Service standards are commitments to provide a specified level and quality of service to individual customers at any given point in time. Standards are different from targets, which express longer-term aims for the ultimate level and quality of service to be achieved. Service standards must cover the customer’s main requirements, e.g. accessibility of services, response times, turnabout times, accuracy, courtesy, the provision of information, and dealing with complaints. Standards can be equated with what customers will be satisfied and happy with and if a drop in standards is being experienced, customer dissatisfaction will become evident.

**Step Six: Gear up for delivery**

Ensuring that service standards are met is not solely the responsibility of those directly involved in delivering the service, but depends on the whole organisation being geared up to support the commitments that have been made. Monitoring and reporting systems will be needed which enable senior management to check on progress, and take remedial action where necessary. Management information systems will be required to provide data on the unit costs of key services. Human resource training, supervision and appraisal systems will need to be refocused on service delivery. Senior management must ensure that human and financial resources are shifted from inefficient and unnecessary activities and used instead to ensure that delivery of service standards can be met. The task of ensuring that service standards are met, involves the entire department and is not task or the responsibility of a few people. It should rather be viewed as a team effort.

**Step Seven: Announce service standards**

When the foregoing steps have been taken, the organisation will be ready to announce its service standards and launch its service delivery programme. There is no single right method for publishing standards: the key is that all customers and potential customers must know and understand which level and quality of service they can expect to receive, and what recourse they have if the standard is not met. The method or methods adopted must be tailored to the needs of different customers. The launch
of a department’s service delivery programme is crucial if a department wishes to establish or determine what customers want, expect and experience.

**Step Eight: Monitor delivery against standards and publish the results**

The final step is to check whether services have met the standards that were set, to announce the results to customers, and to explain the reasons where the service has fallen short of what was promised. These results not only complete the accountability loop, but will provide valuable insights to guide further efforts to improve services in the future.

**Fig. 1 Service Delivery Improvement Plan: A Simple Model**

3. **ORGANISATIONAL PROFILING: FOUNDATIONAL ASPECTS**

In his book “The Principles of Scientific Management” (1911), Frederick Taylor searched for the one best way of managing. Although the ‘scientificness’ of his approach is debatable, it laid the foundation for the careful analyses of all processes in an organisation with the view to improve it.

Also known as ‘Organisational Competency Profiling’ (Cohen & Brand, 1993), ‘Organisational Fitness Profiling’ (Beer, Voelpel & Leibold, 2003), ‘Organisational Genetic Coding’ or ‘Corporate DNA’ (Kell & Carrott, 2007), ‘Organisational Effectiveness Profiling’ (Ross, 1999), Organisational Profiling or Mapping (OP) can be regarded as the scientific process of applying sophisticated metrics to organisational assessments. It is a proprietary process by which a unique and holistic perspective of an organisational entity (such as a state department) can be created.

Currie (1977:48) and Evan (1993:135) highlight the fact that all organisations need to strive to maintain or improve their level of performance. To accomplish this goal, they introduce changes in their structure and processes. These changes can be the direct result of managerial choice (planned change) or can be imposed by external
conditions. Regardless of the origin of forces inducing organisational change, innovations are a means of creating changes to ensure adaptive behaviour.

Smit and Cronjé (2001:148) define an organisational profile as an “internal analysis of an organisation...to identify the strategically important strengths and weaknesses on which the organisation should base its strategies”. The analysis should indicate to senior management what departmental capabilities are. OP refers to a review process from which an observable and measurable description of an organisation is generated. This review (profile) can then be used as a baseline to improve processes and systems; for change management, or as confirmation of success areas. Profiling is an orderly, rational process through which strengths and limitations of staff, policy, and operations are identified, and changed, by way of a series of focused reinforcements or corrective measures. This modification may be in the form of such things as benchmarking, training initiatives, implementation of best practices, or system and procedural changes. Each intervention must be in response to a defined problem that is measurable, and which can be monitored for progress from the baseline.

The profiling process should also identify whether issues are systemic, or common to the organisation, or result from isolated personnel matters. As a result of conducting an organizational profile, an implementation plan should be developed which should include the prioritization of remedial actions according to best results.

Crosby (1995:2) argue that organisation profiling is more complex for service organisations (such as government departments) as product organisations since non-conformances to performance criteria is more difficult to measure and usually not well documented. In an organisation where non-conformance is the norm there is a constant flow of problems. This consistency alone convinces employees that ‘this is the way organisational life is’ and thus the situation feeds on itself. A bureaucracy could become self-sustaining, inward focused and not customer or output (service delivery) oriented. Without profiling or organisational mapping to uncover issues, Crosby argues, the status quo will be maintained.

4. ORGANISATIONAL PROFILING VARIABLES

A comprehensive and integrative model of OP should make provision for the structure of the department, its systems, processes and employees.

- Assess to uncover issues
- Identify and prioritize issues
- Plan and facilitate decision-making meetings
- Recommend action plans for development
- Facilitate implementation of the plans
- Provide follow-up evaluations of the success of the work

Cook (1997:41) indicates that profiling is about gaining an in-depth knowledge of the organisation’s processes in order to fully understand its functioning and the key factors which determine its success. Until an organisation its functions and processes it is difficult to compare them with other parts of the organisation, or with similar external organisations.
Everything which happens in an organisation is part of a process. All processes should lead to achievement of an organisation’s vision and mission statements. According to Cook (1997:46) a process is a series of steps or sequence of activities, the end result of which is to achieve customer satisfaction, i.e. providing what the customer needs, when they need it and as they expect it. Customers may be internal or external.

Cook (1997:100) proposes that the following organisational variables be mapped:
- Activities: operations
- Functions: IT, Finance, HR
- Organisation: core, support
- Relationships: reporting lines, teams, layers, coordination, communication
- Hierarchy: managers, professionals, operational staff
- Working practices: methods, procedures, outsourcing, techniques, tools
- Technology: application of ICT, reliability of management information

The concept of a value chain can contribute to assist organisations identify the various processes within an organisation which offer value to both the internal or external customer. It is useful to map out an organisation’s process to identify critical success factors (Cook, 1997:47). In his study McCormack (1999) identified the following components of a process-oriented organisation:
- a process view of the organisation,
- structures that match these processes,
- jobs that operate these processes,
- management and measurement systems that direct and assess these processes, and
- customer focused, empowerment and continuous improvement oriented values and beliefs (culture) that are embodied in all components.

This is the discovery phase where problems are uncovered and defined. One of the best ways to accomplish this is to learn how things work in an organisation...and a simple technique for doing this is "Process Definition."

Cook (1997:47) maintains that processes can be divided into primary and secondary processes. Primary processes are directly concerned with delivering a product or service to the external customer. Secondary processes support the primary processes within an organisation and are often concerned with providing a service to the external customer. Fig. 2 below illustrates how government institutions, such as the National Department of Health as example, can be divided into secondary and primary processes.

**Fig. 2 Value chain in the Department of Health (Example)**

<table>
<thead>
<tr>
<th>National Department of Health (organogram)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Secondary, Support processes</strong></td>
</tr>
<tr>
<td>Strategic Planning</td>
</tr>
<tr>
<td>Corporate Services (Legal Services, International Health Liaison, Communications, Information Communication Technology Support Services)</td>
</tr>
<tr>
<td>Human Resources (Bargaining Council &amp; Employment Relations, Gender Focal Point, Human Rights)</td>
</tr>
</tbody>
</table>


### Primary Processes

<table>
<thead>
<tr>
<th>Strategic Health Programmes</th>
<th>Health Service Delivery</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Communicable Diseases</td>
<td>• Health Information Research &amp; Evaluation</td>
</tr>
<tr>
<td>• HIV &amp; AIDS and STI’s</td>
<td>• PHC, Districts and Development</td>
</tr>
<tr>
<td>• Pharmaceutical Policy and Planning</td>
<td>• Non-Communicable Diseases</td>
</tr>
<tr>
<td>• Medicines Regulatory Authority</td>
<td>• Office of Standards Compliance</td>
</tr>
<tr>
<td>• Maternal, Child &amp; Woman’s Health and Nutrition</td>
<td>• Hospital Services</td>
</tr>
<tr>
<td></td>
<td>• Health Economics</td>
</tr>
</tbody>
</table>

*Source: Adapted from [www.doh.gov.za/department/main.html](http://www.doh.gov.za/department/main.html)*

### Setting Metrics for the Measurement of Departmental Processes

Thomson (Brue 2002:36) explain the importance of metrics as follows: “When you can measure what you are speaking about, and express it in numbers, you know something about it”.

A ‘metric’ refers to a unit of measurement that provides a way to objectively quantity a process. Any measurement that helps management understand departmental functions and processes, might be a metric. This could include the quantity of services rendered (i.e. houses built, water supplied, etc.), the percentage defects from a process; time required to respond to community needs via a certain service, etc. Without metrics it is extremely difficult to identify target areas for improvement in departmental processes. Metrics enable managers to evaluate, correct, control, and improve processes and thus reduce costs while improving the quality of outputs (i.e. services).

According to Brue (2002:52) there are two main concepts governing metrics. The first is knowledge – metrics should provide knowledge about processes and help to develop better metrics. The second concept is alignment – metrics must align with strategic goals and targets of performance.

The key of metrics or performance indicators is to ask the right questions and to challenge answers. For every service you need to determine the expectations of customers, particular the ‘critical-to-quality‘ (CTQ) factors. What aspects of the service are key to customers. For each aspect it is important to determine expectations. (number, price, access, quality standards, etc.) Once you determine the essential expectations, figure out ways to measure how well the service is currently meeting those expectations.
Metrics should provide data that enables management to solve performance problems in departmental processes. To establish appropriate, accurate metrics it is important to tap the experience of public officials closest to the processes. It may be necessary to hold meetings to discuss attempts at establishing metrics and to encourage everyone to find fault with them. **Brainstorming** and **Cause-and-Effect diagrams** are tools to utilize in this process. Cause-and-Effect diagrams can be used to identify the relationship between a problem and possible causes of the problem. The structure resembles a simplified fish bone: the primary branch (spine) represents the effect and is typically labeled on the right side of the diagram. Each major bone branching out from the spine corresponds to a major cause or class of causes.

Once the **baseline** was established and management understands the current state of processes, the next step is **benchmarking**. According to Brue (2002:57) benchmarking is a method for comparing a process, using standards or best practices as a basis. External benchmarks are advisable to compare the department with similar, comparable departments nationally and internationally.

If the benchmark study is completed, the next step is to perform a **gap analysis** to quantify the gaps between where you are now and where you want to be. The gap analysis enables management to set goals for improving processes and to develop strategies for improvement.

**Basic steps** in setting metrics (Brue 2002:60):

- Start with customers (what expectations are important to them, critical to quality?)
- Establish key, consistent metrics/performance indicators
- Determine baselines (what is the current state of our processes?)
- Benchmark processes (who’s doing the same or similar things better than you?)
- Set goals (easier goals can give you quick success; more ambitious goals can help sustain performance improvement processes)

**KEY QUESTIONS**

- How do we render services? (policies, programmes, processes, systems, projects)
- How well do we deliver these services and how do we know it? (internal measurement)
- How well do the customers think we render services? (external measurements, service standards, participation in measurements – quality assurance; perception of what government does)
- How well do our benchmark partners

**WHAT INFLUENCE SERVICE DELIVERY**

- Systems
- Policies
- Leadership
- Finance
5. PROFILING PROCESS: KEY STEPS

Smit and Cronjé (2001:148-149) identify the following steps in the development of an organisation profile. By following these steps, management should be able to identify those factors that give the organisation an advantage, those that meet the basic requirements and those that make it vulnerable.

Step 1: Identifying strategic internal factors

In step 1, managers identify and explore key aspects of the organisation’s basic capabilities, limitations and characteristics. These strategic factors will differ from department to department as far as functionality and environmental context is concerned. To assist managers in deciding which factors are strategic, the following approaches have been developed (Smit & Cronjé 2001:149):

a) The evaluation of functional segments: The functional approach concentrates on in-depth studies of the functional areas of an organisation. This could include financial, production, human resources, research and development, external relations, etc.

b) The evaluation of the mission and objectives: A department’s reason for existence is found in its mission statement. Components of the mission statement refer to the department’s services, customers, technology or ways in which it serves the community, and its basic philosophy (Batho Pele) on management, public officials and society in general.

c) The analysis of historical trends: In the search for strengths and weaknesses inside a department, senior management can learn a great deal by asking questions about the department’s past performance: What did the department do particularly well in the past?

d) The value-chain: Another method of identifying key success factors in the internal environment is the so-called ‘value-chain’ method. The whole process through which a service or product goes until it reaches the customer is divided into value-added stages. Each stage is scrutinised and analysed to improve performance, quality, and so on.

Step 2: Evaluate strategic internal factors

The next step, once the identification of internal strategic factors have been identified, is to clarify the potential strengths and weaknesses of the department. A factor is considered a strength if it is a competency or competitive advantage of a department. Four basic perspectives on the evaluation of strategic internal factors can assist managers in this task:

• A comparison with the department’s performance in the past (trends, gap analysis): comparing current results with previous results (i.e. service delivery
programmes and projects) of the department. A significant challenge associated with this approach is that managers might develop tunnel vision: “This has worked well in the past, so why change?”

- A comparison with similar department (national and international)
- A comparison with key performance indicators or success factors in Government
- Benchmarking: is about the search for the best practices among similar departments. It can focus on financial performance, customer satisfaction, technological performance, employees, and so forth.

Step 3: Develop an input for the strategic planning process

The result of the second step could be applied to determine those internal factors that:

- Provide a department with an edge to improve service delivery (strategies should be built around these factors)
- Are important capabilities for the department to have but are typical of every similar department
- Are currently weaknesses in the department (managers should avoid strategies that depend on these key vulnerabilities)(Smit & Cronjé 2001:152).

The result obtained in this final step in the internal analysis process serve as inputs into the strategic planning process.

**Fig. 3 Example of an organisational profile**

<table>
<thead>
<tr>
<th>Key internal factor</th>
<th>Potential strengths and weaknesses (Scorecards)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear and realistic mission statements</td>
<td>*</td>
</tr>
<tr>
<td>Organisational record – achieving service delivery objectives</td>
<td>*</td>
</tr>
<tr>
<td>Organisational structure</td>
<td>*</td>
</tr>
<tr>
<td>Communication systems</td>
<td>*</td>
</tr>
<tr>
<td>Leadership</td>
<td>*</td>
</tr>
<tr>
<td>Effectiveness and utilisation of control systems</td>
<td>*</td>
</tr>
<tr>
<td>Organisational culture</td>
<td>*</td>
</tr>
<tr>
<td>Decision-making and –support (ICT)</td>
<td>*</td>
</tr>
<tr>
<td>Senior management’s vision and capabilities</td>
<td>*</td>
</tr>
<tr>
<td>Reaction / adaptation to external changes</td>
<td>*</td>
</tr>
</tbody>
</table>

As an understanding is gained of an institution’s processes it is necessary to document the measures of performance which are in place for each step in the process. These performance indicators serve as standards against which comparisons with benchmarking factors can be made. According to Cooke (1997:65) metrics should be prepared for each process. These can encompass performance indicators such as cost, time, quantity, quality or people involvement.

5. METHODOLOGY FOR ESTABLISING THE ‘DNA’ OF PUBLIC INSTITUTIONS
There are various routes that could be pursued for this process:

- Apply a CPI model (i.e Maturity Model),
- Utilise the existing comprehensive Performance Management System (i.e Balance Scorecard, Six Sigma, Excellence Foundation, 3E’s, etc.) to assess capability i.e. through work measurement and Performance Indicators within Key Performance Areas
- With the organigram as basis, unpack existing processes in all functional and support structures through process-mapping and identify deficiencies in these processes.

The Balanced Scorecard

Balancing Measures. Robert S. Kaplan and David P. Norton have developed a set of measures that they refer to as "a balanced scorecard." These measures give top managers a fast but comprehensive view of the organization's performance and include both process and results measures. Kaplan and Norton compare the balanced scorecard to the dials and indicators in an airplane cockpit. For the complex task of flying an airplane, pilots need detailed information about fuel, air speed, altitude, bearing, and other indicators that summarize the current and predicted environment. Reliance on one instrument can be fatal. Similarly, the complexity of managing an organization requires that managers be able to view performance in several areas simultaneously. A balanced scorecard or a balanced set of measures provides that valuable information.

Four Perspectives. Kaplan and Norton recommend that managers gather information from four important perspectives:

- The customer's perspective. Managers must know if their organization is satisfying customer needs. They must determine the answer to the question, How do customers see us?
- The internal business perspective. Managers need to focus on those critical internal operations that enable them to satisfy customer needs. They must answer the question, What must we excel at?
- The innovation and learning perspective. An organization's ability to innovate, improve, and learn ties directly to its value as an organization. Managers must answer the question, Can we continue to improve and create value for our services?
- The financial perspective. In the private sector, these measures have typically focused on profit and market share. For the public sector, financial measures could include the results oriented measures required by the Government Performance and Results Act of 1993 (GPRA). Managers must answer the question, How do we look to Congress, the President, and other stakeholders?

The Balanced Scorecard is a conceptual framework for translating an organization's vision and mission into a set of performance indicators set around four perspectives:

- Financial,
- Customer,
- Internal Business Processes, and
- Learning and Growth.
Thus, the scorecard provides an enterprise view of an organization's overall performance by integrating financial measures with other key performance indicators.

The Learning & Growth perspective is a measure of potential future performance - it directs attention to the basis of all future success - the organization's people and infrastructure. Adequate investment in these areas is critical to all long term success.

The Internal perspective focuses attention on the performance of the key internal processes which drive the business. Obviously, the nature of the processes are dependent on the nature of the organisation - the scorecard is not a 'fully-cooked' solution, it must be tempered and tailored to meet the specific circumstances of each organisation.

In order to translate effective internal processes into organisational success, customers/clients must be happy with the service they receive. The Customer perspective considers the business through the eyes of the customers, measuring and reflecting upon customer satisfaction.

Finally, the Financial perspective measures the results that the organisation delivers its stakeholders. Together, these four perspectives provide a balanced view of the present and future performance of the business.

The aim of this measurement process is to direct, and help manage, change in support of longer-term strategy - and to manage, rather than simply measure, performance. The concept was introduced by Professor Robert Kaplan and Dr. David Norton in 1992, and has since been adopted by a wide range of organisations around the globe. It is well-represented in the business press, having been the subject of a best-selling book (see below) and numerable articles in prestigious journals. If used properly, the Balanced Scorecard becomes a catalyst for change. The performance measurement is not an end in itself - nor should the measurement be reified; it simply serves to illustrate, to diagnose, to aid analysis. 'Accuracy' is therefore not essential - but confidence in the measures as true indicators is.

The Scorecard must become integrated into the strategic planning of the organisation - as a tool for identifying pressure points, conflicting interests, objective setting, prioritisation, planning and budgeting. It offers managers a balanced view of their organisation upon which they can make strong decisions and upon which they can base real change.

PROFILING: DATA COLLECTION

Cooke (1997:95) maintains that the key to success in performance improvement is to collect the right information. This should be collected both quantifiably and qualitatively. A detailed, holistic approach should be followed to ensure that important dimensions or variables are not omitted. Asking the right questions is crucial to getting to right answers.

Sources of information
There are fundamentally four major sources of information available to profile organisations. These are:

- Desktop research (Results of Performance Scorecards, reports, financial statements, intranet, directories, databases, publications, media reports, seminars and conferences),
- Contact with third parties (customers, suppliers, professional institutions, consultants, research firms),
- Direct exchange (focus group interviews with public officials, brainstorming sessions, telephone surveys, written questionnaires, video conferencing), and
- Site visits (observe processes, work study exercises, etc.).

Public officials will have opinions and perceptions on processes within which they are working. Often the quality of services that are provided has a direct effect on the quality of service that is provided to external customers (Cook, 1997:49). Employee attitude surveys, focus groups and in-depth interviews can provide useful feedback on how processes currently work and what could be done to improved them.

**Triangulation of data**

If there are discrepancies it is important that the project team verify the sources, reliability and validity of data. Successful data analysis should result in a comparison being able to be made between different sources of data.

**PROFILING TOOLS**

**Process-maps** allow departments to visualize the flow of steps or the sequencing of activities to render a particular service. In doing so, it can locate steps that do not add value to the process. Eliminating such steps is a relative easy way to reduce time, cost and other wastage of resources (Brue, 2002:47). Cook (1997:51) describes the mapping of processes as ‘layering’. On the surface, she argues, what appears to be a single process could be made up of a series of activities which become more complex as you ‘peel away the layers’ (the so-called ‘onion factor’) to discover secondary and tertiary processes which support the primary process.

Analysing and understanding the process in all its dimensions (or layers) is crucial to the success of performance improvement. Public managers need to understand the activities that make up the process and the interrelationship of the process with other parts of the institution.

Cooke (1997:53) suggests that charting the process on a step by step basis helps increase understanding of each of the activities.

**Fundamental questions in profiling**
To fully comprehend the multi-faceted nature of departmental processes, it is important that public managers ask the right questions. The following is an example of typical fundamental questions that should be asked to layer processes.

- How does the process work? (start and completion points)
- What is involved in the process? (all tasks, activities, and steps of the process)
- Who is involved in the process? (units, directorates, suppliers, stakeholders)
- What is the output of the process?
- How much does it cost (in terms of resources, people, time, etc.)
- What are the time scales involved? (when do things happen?)
- Who is the customer of this process? (receiver of the output)
- What are the customer’s requirements?
- Who is the process owner or champion? (unit or person responsible for ensuring the process meets customer requirements)
- What are the problems, challenges and issues with the existing process? (as perceived by all involved)

Currie (1977:59) simplify these questions to the ‘why?’-questions. He (Currie) proposed the following questions:

- What is achieved and why is it necessary
- How is it done and why that way?
- Where is it done and why there?
- When is it done and why then
- By whom is it done and why that person?

A satisfactory answer to the query ‘why?’ leads in each case to consideration of alternatives which might also be acceptable.

**Profiling tools:**

- Brainstorming and Mind mapping
- Force-field analysis (driving and restraining forces for effective processes)
- Fishbone diagrams
- Process flow charts
- Time elapsed diagrams
- Process-mapping
- Information flow diagrams
- Supply chain

**How to use organisational profiling**

Joshua Freedman and Anabel Jensen, Ph.D.

The data, which is collected in a fully confidential manner from the employees under study, is analyzed against well over 100 different variables and scale subsets. This gives you a snapshot of the collective strengths and vulnerabilities of the group and/or any sub-groupings of the population in question. These findings are subsequently compared to various productivity and performance factors such as absenteeism, workers compensation claims, etc. Using the Essi Systems' database, comparisons are
drawn to other groups of employees, including employees in businesses similar to you own. Specific issues impacting the health and performance of the population are determined.

This first level of analysis creates a starting point for dialogue on the issues that an organisation would want to target. Essi will then focus on these core issues and complete a second level of analysis. At this stage, correlations can be made between the more significant opportunities or hot spots and the resulting health performance and productivity levels of the population.

From this Essi will develop and present a specific set of recommendations for actions to be taken by the organization. Depending upon the findings, these mechanisms, or action items, could be based in training programs, wellness-based interventions, or even policy changes. Four to twelve months later, we can post-test the entire population to measure the effect of the mechanisms put in place.

With an EQ perspective, the questions point to relationship skills, self-awareness, vision, values, and particularly trust and communication. There are also questions about technical skills, leadership, resources, and attitudes.

A human resource profile is basically a survey of employees in the organization to find out areas of strength and challenge, attitudes, values, and skills.

To use the profile, Six Seconds’ process follows eight steps:

1. **Customize the survey to the organization.** This is important because a key result will be comparing the organization’s stated values with what staff really thinks.

2. **Give everyone in the organization the survey.** It can be completely anonymous, except different departments and levels should be identified. For a school district, for example, you might require the school name, department, and a check-box for management.

3. **Tabulate the data.** Compare departments, management vs. non-management, and sites. Select the “Key Questions” where there is a lot of disagreement, very high scores, or very low scores. Graph the results and synthesize the anecdotal data.

4. **Perform interviews.** While not strictly part of the profiling process, Six Seconds finds that interviewing a cross-section of staff validates the data, builds relationships, and greatly assists in defining priorities (step 6).

5. **Present the data.** Share the overview information with all staff, and explain it. Then ask if the information is accurate. “Do you feel heard?” In the process, Six Seconds also asks, “Is this okay with you?” And “Would you be willing to do something about it?” It is important that the data be shared as a question and dialogue rather than a fact. It also should result in staff feeling empowered, heard, and ready to move forward.

6. **Define priorities.** With a focus group or in the all-staff meetings, identify the 2-4 priorities for action. Most likely, issues around communication and trust will be paramount.
7. **Take action.** Develop a strategy and an action plan. Use the data as a guide, and start with the 2-4 priorities. Remember that changing structures does not change an organization. The culture is changed by enhancing 1:1 relationships, and nurturing each person’s positive beliefs, skills, and attitude.

8. **Reassess.** Repeat the assessment. It may be valuable to do a mini-assessment 4-6 months after the initial, then the full assessment a year after the first.

Since most change pivots on trust and communication, do not attempt to lead change unless your core team is ready to model that! Without a trusting, committed, and communicative team, you will not be able to inspire those rabbits to follow you along the fox-infested path.

Whatever process you use, start out with plenty of patience and forgiveness. The only guarantee is that managing change will challenge you and your team.

*Comparing data from different groups shows alignment. In this example, there are several areas where staff and management agree. The places where there is difference leads the organization to ask why. Are there different beliefs? Is there poor communication? Is there a shared vision?*

*Areas with high standard deviation point to disagreement, and low SD mean agreement. It is empowering to discover that the staff generally agrees about many points.*

LCA is ©2002 Six Seconds, All Rights Reserved. If you want to use these questions or receive help creating your own customized assessment, contact Six Seconds and ask about LCA pricing.

**SELECTING THE TOOLS TO ASSESS PERFORMANCE**

A variety of tools, techniques and methodologies are used by the partner companies to measure their organizations' performance.

- **Benchmarking.** A majority of the partners employ benchmarking as a tool to support the measurement of their own performance, their competitors' performance, and the best-in-class performance. (For the purposes of this study, benchmarking is defined as "the process of continuously comparing and measuring an organization against business leaders anywhere in the world to gain information which will help the organization take action to improve its performance source," American Productivity and Quality Center). Results are used to identify customer expectations for products and services, their market position vis-a-vis their competition, areas for improvement, and performance measures. At least two partners benchmarked outside their respective companies and industries.

- **Balanced Scorecard.** Several of our best-in-class partners had in place or were in the process of implementing evaluation schemes that moved from strictly financial measures to a more balanced assessment methodology. The scorecard measures organizational performance across a number of perspectives: financial, customers, internal business processes, and learning and growth. This balanced scorecard approach can be defined as a
set of measures which employs a family of indicators for measuring performance across the organization that can be used to identify resources needed to achieve results desired.

- Customer service standards. One partner required customer service standards for all programs. It has a fully performance-oriented budget in which monies are appropriated for service standards, not line items. A partner noted that some standards are regulated while others are functional. This company has user service agreements with its big customers.

4. TOOLS FOR THE OA TOOL

Reasons for revision of organizational capacity and capabilities

There are many reasons why you might want to do this but you need to be sure how the review fits in with your institutional strategy. It is also particularly important to understand how a business change project fits in with your institutional culture and values. Methods such as PEST, SWOT and Force-Field Analysis are very useful in considering the context in which you are operating and the arising strengths, weaknesses, opportunities and threats.

A few suggested reasons for reviewing business processes are given below:

- Improve service delivery

This may be two separate reasons or two sides to the same coin. The education sector puts a lot of emphasis on quality and added value but institutions also need to view themselves as businesses looking for a competitive edge. The two approaches aren't necessarily incompatible. The 'edge' you are looking for might be a better rating in your next inspection or quality review.

- Fit between strategic objectives (constitutional mandate/ reason for existence) and internal processes

Any organisation that has been around for a number of years is likely to find it does things in ways that have grown incrementally over the years, often in response to a particular crisis or short-term demand, and rarely been challenged from the perspective of adding value. We hear a lot of rhetoric about moving forward and facing new challenges but this is unlikely to translate into real action whilst the institution is hampered by antiquated administrative procedures that have become inflexible, unresponsive to client demands and, very often, unnecessary.

- A prerequisite to policy implementation

This ought to go without saying but all too often institutions spend considerable amounts of money on new IT systems only to replicate their outmoded ways of doing things. They are effectively 'paving cow paths'. It is not always sensible to go for radical process change at the same time you are implementing a new system but if some form of basic process review isn't included in your project scope please think again.
• **A part of Performance Management and the service delivery improvement plan**

With most process reviews, a certain amount of anxiety and fear is unavoidably introduced for the staff involved in the process under review. If it is suggested a process should be reviewed then by inference there is a suggestion that it may not be as efficient or effective as it might be. Just mentioning the possibility that a process might be reviewed will imply criticism to some.

One way to avoid this is to foster a culture of continuous or regular reviews of organisational process. Once reviews are accepted as a routine process in their own right, reaction to an imminent review becomes 'Ah, it's time to review this one again' rather than 'Do they think I'm not pulling my weight?'

We have already discussed above how processes can change incrementally over time. In the majority of cases the focus of the process shifts incrementally from clients to staff as process workers introduce small changes to make their tasks easier. Undertaking periodic reviews helps to keep the focus firmly on the needs and requirements of the client or learner.

3. **CONTINUOUS PROCESS IMPROVEMENT**

Also known as organisational ‘renewal’, ‘re-engineering’, or ‘organisational transformation’, Continuous Process Improvement (CPI) is

3.1.1 *The ‘process’ in CPI*

Most institutions have a few core ‘business’ processes that relate to strategic objectives and are fundamental to the nature of the institutions. Hammer (In Moriarty & Thomson 1996) maintains that no organisation has more than eight core processes. Institutions that are intending to improve or re-engineer will be focussing on those top-level processes.

Processes can be viewed in a variety of ways - one of the simplest is to see the components of each process as input, transformation and output. Inputs may be information, materials or activities. The fourth, and most important, element of the process is the client. The purpose of the process and its end result is to meet the needs of a client. When reviewing processes public institutions need to think about why they are doing them and what output society requires. This focus is necessary once it commence to examine the realities of processes in the institution.

**What is a Process?**

A Process may be defined as:

- 'a particular course of action intended to achieve a result' or more specifically as
- a set of logically related tasks performed to achieve a defined business outcome. [From - Understanding senior management's behavior in promoting the strategic role of IT in process reengineering: use of the theory of reasoned
In both of these definitions the key thing is that what is important is the end result. A process exists to achieve a purpose. It is also useful to think of roles and responsibilities in this way. A person's job is not to carry out a process it is to achieve a result. Emphasising this can make it easier for people to think about how they might achieve that result in different ways.

Michael Hammer, often called the father of business process re-engineering, defined a process as:

- a related group of tasks that together create a result of value to a customer.

This definition best fits the JISC infoNet client-centred approach.

Processes can be viewed in a variety of ways - one of the simplest is to see the components of each process as **input**, **transformation** and **output**.

Wu (2003:115) defines a process as a particular course of action intended to achieve a result’ or more specifically as a set of logically related tasks performed to achieve a defined outcome. Simon (1976) defines a process as a planned series of actions that advances a material or procedures from one stage of completion to the next. It includes the steps and decision involved in the way work is accomplished. In both of these definitions the key thing is that what is important is the end result. A process exists to achieve a purpose. It is also useful to think of roles and responsibilities in this way. A person's job is not to carry out a process it is to achieve a result. Moriarty and Thomson (1996) emphasize this point by indicating that a process is a related group of tasks that together create a result of value to a customer.

It is also worth stressing the need to remember when you are defining a process that it's not about what a particular department does. You need to follow the process from start to finish right through the organisation and, especially in education, that frequently means crossing departmental boundaries. The diagram below illustrates how the business process cuts right across the organisation structure. Analysing a process is a very different approach to carrying out a functional review within a single department. The latter approach is typical of a 'smokestack' or 'silo' mentality. It is sadly the case that many colleges and universities still view themselves not as enterprise systems but as a series of discrete departments and functions.

**Analysing the Process**

Having defined the boundaries of the process you are about to analyse, it is time to take a sanity check and ensure that your project has a sponsor whose sphere of control covers all of the areas encompassed by the process. If your sponsor doesn't have sufficient political influence over all of the 'internal clients' involved you need to find another sponsor or narrow the scope of the project. The alternative is that your project team will spend a lot of time coming up with a proposal that is doomed to failure. Leadership is vital in ensuring that changes to business processes can actually be implemented.
**Identifying process dysfunction**

Process dysfunction are analysed by a ‘System Failure Analysis.’

We have already started to see how a range of analytical tools can help identify dysfunction within our business processes. These issues are sometimes known as 'Process Anti-patterns'. A few of the commonest anti-patterns are listed below.

<table>
<thead>
<tr>
<th>Anti-pattern Description</th>
<th>Symptoms</th>
<th>Causes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two Heads are Better than One</td>
<td>Excessive checking.</td>
<td>Lack of trust. Arbitrary fragmentation of process.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Unnecessary controls.</td>
</tr>
</tbody>
</table>

4.1 **Problem solving tools**

Listed below are some other methods for problem identification:

Customer Surveys - These can be written or oral. If oral, make sure they are consistent. Otherwise your measurements will not be accurate.

Employee Suggestions.

Brainstorming - To be creative, try reverse brainstorming such as "How can we make this process fail?"

Pareto Decision Making - (Note: see the Evaluation Phase for measurement tools)

**Time Plots.** A Time Plot is simply a plot of some measurement over time. It provides a picture of how some factor change. This is useful because it allows you to determine that some data is time dependent. This is important because you may make some other form of analysis, without knowing that the data is time dependent and come to false conclusions.

**Process Control Charts.** A control chart is a time plot with control limits added to show the range of values that would be typical of the process. Control charts enable you to distinguish between variability which is inherent in the process and variability which is unpredictable. The control limits are calculated from statistical formula. Points on the charts that fall inside the control limits show the normal range of variation that you would expect to occur. Points that occur outside the control limits would be expected to be due to some unpredictable cause. It is important to distinguish between the two types of occurrence. The cause of points outside the control limits are relatively easy to track down and fix.
The cause of the points that occur inside the control limits can only be improved by making fundamental improvements in the process itself, for instance by making improvements in training, information systems, equipment or procedures.

These charts can show the effect of process improvement efforts. There are two possible aims of a process improvement project. The aim can be to improve the process so that there is less variability, or it can be to reduce the absolute value, say the cycle time or cost.

**Brainstorming.** Brainstorming is a technique used to generate creative ideas for planning the improvement project or for solving a problem. Frequently a team may flounder and experience difficulty in finding solutions to a problem. It needs something to get its creative juices flowing so that it can come up with ideas.

The idea behind brainstorming is to generate as many creative ideas as possible. It is a free form approach where everyone can have their say. The way to handle a brainstorming session is:

1. Present the topic to the team as a question or a problem for solution.
2. Allow a few minutes for the team to think about the question and to jot down notes.
3. Go round the group and have each member call out their ideas. At this stage there should be absolutely no discussion, judgement or criticism of the ideas that are generated. People should be encouraged to call out all the ideas they can think of. They should freewheel and pick up on ideas that others have suggested. Don't stop seemingly silly ideas! The evaluation of ideas comes later.
4. Write all the ideas on a flip chart.
5. Keep going round the group until all the ideas have been exhausted.

**Consensus Building.** The next step is to sort through the ideas and to achieve consensus on which ideas to select.

Consensus means selecting a proposal that every member of the team finds reasonably acceptable, and no one opposes. It does not mean finding the proposal that is preferred by the majority, nor does it mean finding a proposal that everyone is totally satisfied with.

There are various methods of achieving a consensus. Informal ways exist in which the team members discuss the issues, listen carefully to each other's contribution and strive to understand the other person's point of view.

With the right spirit of cooperation and respect the group gradually arrives at a solution that everyone can live with. The team as a whole must stand behind their proposal. The one thing that you should not do is to argue until you have a majority vote!

There are more structured ways of reaching a consensus. Sometimes these are useful when the team has to break an impasse.

**Multi voting.** The idea of multi voting is to cut down the extensive list of ideas to a smaller number that can be discussed in more detail.

In multi voting you first combine the items that are very similar. You then let each member vote for the items that he or she would like to consider further. Allow each member a number of choices. Tally up the number of votes for each item and then eliminate the items with the fewest votes.

Do the process again until the list is reduced down to a workable size. At this stage you either try to reach a consensus through informal discussion of the short listed items or you take one final vote.
**Nominal Group Technique.** After ideas have been generated from brainstorming the team members discuss the ideas and ask questions. The person who suggested the idea should be the person who answers the question. The purpose of this is to clarify and understand the ideas. Ideas that are similar are then combined.

The next step is to reduce the number of ideas down to a workable number. The facilitator hands out cards, and asks each team member to assign a point value to each of the items based on their preference. The cards are collected and the point values are tallied. The item that come up with the highest value is the item selected.

The group reviews the results and if the team agrees that the selected item is the one that everyone can live with then the session is ended. If they don't agree they continue the discussion and focus on the few items that have the highest votes.

**Cause and Effect Diagram.** The Cause and Effect Diagram, sometimes called a Fishbone Diagram because of the way it looks, allows you to develop a map of the possible factors that may contribute to the problem.

The diagram is essentially a list of possible causes displayed pictorially. The main arrow points to the name of the problem. Each branch represents a category of potential causes. These categories could be equipment, suppliers, procedures, training, and the like. Sub categories are shown as sub branches off the main branches. The diagram leads to a greater understanding of the problem and shows the possible factors that may contribute to the problem. The list is generated by asking questions. For instance, in answer to a question 'what are the possible causes?', one could answer 'materials'. By asking 'what material factors could cause the problem?' one could answer 'dimensions, hardness' and so on. Brainstorming can be used to generate answers to the questions. These give you sub categories that are represented by sub branches on the diagram. The diagram provides a pictorial view of the possible causes. The questions and the discussion that is generated provide the team with a deeper understanding of the process and the possible causes of the problems. The main benefit is not so much in the diagram itself, but in the discussion that the construction of the diagram generates. When the team is in the process of generating the diagram they should consult with workers who are familiar with the process being studied. The Cause and Effect Diagram only provides the possible cause. The team needs to find data or to carry out experiments to find the actual causes.

**Structure Tree.** A Structure Tree is similar to a Cause and Effect Diagram in that it provides a pictorial view of the possible causes. It actually provides more information than the Fishbone diagram because it includes information on the importance of each cause. To construct the Structure Tree the team begins by stating the problem. This is written down on a card. Next they list the possible cause of the problem under five categories; materials, machines, manpower, methods, and measurements. These categories cover almost all possible types of cause. The team then assigns percentages to each of these categories based on their judgement of the contribution each of the categories makes to the cause of the problem.

The next step is to locate the category which provides the highest contributing factor. The team then develops a list of possible causes that fall within the category and assigns the percentages to each of the possible causes. As in the Fishbone Diagram the analysis is done by asking 'why?'. In fact it is a good idea to ask 'why?' five times and to generate answers by brainstorming. The Fishbone Diagram and the Structure
Tree are similar. The Structure tree provides percentages and enables the team to focus on the more important causes. One should remember that this analysis provides the probable causes only. It may be necessary to make some kind of experiment or to check with experts to confirm the conclusions before taking action based on the conclusions.

**Pareto Chart.** A Pareto Chart is useful to determine the relative importance of various factors. The Pareto principle is a general rule that states that 80% of trouble comes from 20% of the problems.

This general rule applies to many things in life. We all know from experience that it is only a small portion of problems that cause the main trouble. A Pareto Chart is simply a bar chart which shows relative importance of different factors. It is useful because it allows the team to focus on the most important problems, or on the most important causes of a problem. The team should tackle the factors that cause most of the trouble.

**Six Questions.** There are six questions the team should ask during their analysis. These are:

- who?
- what?
- where?
- when?
- why?
- how?

**CONCLUSION**

It is clear that public managers are under constant pressure to improve the performance of their institutions. They are expected to satisfy a number of stakeholders and role-players, achieving increases in efficiency as well as the effective attainment of institutional goals. It should be taken into consideration, though, that the challenges confronting senior public managers do not by any means lie only with institutional and managerial issues. The challenges are indeed much more complex.

**REFERENCES**


Concurrent Engineering Research Centre, West Virginia University, Morgantown.
Kerssens-van Drongelen, I.C. and Bilderbeek, J. (1996), “R&D performance measurement in
Dutch large and medium sized companies”, PDMA Conference Proceedings: R&D Performance Measurement.


Japan, pp. 766-75.
University of Twente, Enschede.


References


Bibliography


REFERENCES


**Setting Service Standards** (Green Paper)

17. From the end of 1997 onwards, national departments and provincial administrations will be required to publish standards for the level and quality of services they provide. Service Standards must be relevant and meaningful to the individual user. This means that they must cover the aspects of service which matter most to users, as revealed by the consultation process, and set in terms which are relevant and easily understood. Standards must also be precise and measurable, so that users can judge for themselves whether or not they are receiving what was promised, eg by stipulating the length taken to authorise claims, issue identity documents, answer letters, the number of citizens who in future will have access to the services provided, what services will in future be provided, etc.

18. More concrete examples may include health departments stipulating the key standards a patient can expect in a hospital which may include: how long they can expect to wait at the outpatient clinic; the maximum waiting time for a non-urgent operation; the name of the person responsible for their case; the information they are entitled to receive about their treatment, etc.

19. Service Standards will be approved by the Minister or MEC of the relevant department, who is ultimately responsible for the services being provided. The Service Standards should be demanding but realistic. This means that they should reflect a level of service which is higher than that currently offered but which can be achieved with dedicated effort, and by adopting more efficient and customer-focused working practices. Service Standards must then be published and displayed at the point of delivery and communicated as widely as possible to all potential users so that they know what level of service they are entitled to expect, and can complain if they do not receive it.

20. Publishing standards is not enough, however. Performance against standards must be regularly measured and the results must be published at least once a year, and more frequently where appropriate. This is an important ingredient of national departments’ and provincial administrations’ accountability to their users. It is also essential in order to track improvements in services from year to year, and to inform decisions about the levels to which standards should be raised in future.

21. Results should be reviewed annually and, as Service Standards are achieved, so they should be raised incrementally. There can be no question of reducing a standard, once set, solely on the grounds that it has not been met. If standards are not met, the reasons must be explained publicly and a new target date set for when they will be achieved.

**REFERENCES**


