

PERFORMANCE EVALUATION AND PUBLIC VALUE: AN EXPERIMENT APPLIED TO THE LOCAL HEALTH AUTHORITY

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Abstract

The research aims to present an experiment initiated in late 2023 by the Caserta Local Health Authority (ASL), focused on developing a system to assess the performance of hospital departments (Purbey et al., 2007; Elg et al., 2013). This system is designed to visually and intuitively communicate the efficiency levels (Georgopoulos & Tannenbaum, 1957) achieved by inpatient hospital departments. In particular, the strategic management of the ASL has selected some performance indicators considered indicative of the productivity and efficiency conditions of the inpatient departments, but significant for measuring the public value created for the community (Moore, 2007, 2014). This is in accordance with the legislation established by Decree Law 80 of 9 June 2021, which requires public administrations to plan the public value of performance in a dedicated section of the Integrated Plan of Activities and Organization (PIAO).

The need to adopt a method of cross-reading the performance indicators identified by the strategic management of the ASL as

indicative of the value created by the inpatient departments of the various hospital facilities, but, above all, the need to use dynamic dashboards capable of visually representing performance, thus providing useful information for making decisions quickly, gave rise to the adoption of the Barber Nomogram (Barber, 1977). The Barber Nomogram is a representative diagram of the positioning, over time, of a healthcare organization with respect to four indicators that play a critical role for hospital companies: the average length of stay, the bed utilization rate, the turnover rate, and the bed rotation index. This diagram is able to highlight an area of optimal and acceptable use of hospital facilities.

The experimental application of Barber's Nomogram was carried out in four general surgeries located in four of the seven hospitals belonging to the ASL. The results that emerged highlighted that the four general surgeries present very different performances from each other and that, in the years considered for the experiment (2020–2023), the managerial choices made influenced the performance of these surgeries.

The Barber Nomogram presented can be regarded as an integrated system for monitoring critical indicators of the public value created (Monfardini et al., 2012; Marcon, 2014; Esposito & Ricci, 2015), serving as a “compass” not only for top management but also for middle management. However, the model has limitations, as the selected indicators offer a discretionary perspective on performance, which, for the ASL's strategic leadership, are seen as indicators of the public value generated.

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