



Army Nurse Corps Balanced Scorecard Alignment Briefing

Approved by LTG Schoomaker

February 9, 2009





Briefing Outline

1. Background
2. Assessment and Process Overview
3. SWOT
4. Strategic Linkage
5. Similarities
6. ANC Balanced Scorecard
7. The Way Ahead

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As of 3 February 2009





Background

- Quality and safety of our nation's healthcare impacted by nursing shortage.
- There is an increased complexity of care.
- Lack of national nurse staffing models.
- A shortage of Army Nurses could jeopardize military beneficiaries' health care and threatens the viability of current and future AMEDD missions.
- Low retention rates among junior Army nurses exacerbate the problem.
- Gaps in nursing standards of care, standards of practice and scope of practice are created.
- Future predictions indicate a continued struggle to hire enough civilian nurses to offset the shortage of active duty nurses to maintain the stability of the organization, continuity of services, institutional memory, and appropriate standards of care.



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Assessment and Process Overview

- SWOT Analysis & Identification of Army Nurse Strategic Themes
- Developed new mission, vision, and Strategic Themes nested in AMEDD Strategy
- Leader Development: Building Our Bench
- Warrior Care: Back to Basics
- Evidence Based Management: Optimize Performance
- Human Capital: Portfolio of Expertise
- Draft Strategy Map published – Oct 08
- ANC Campaign Planning Conference - 27-30 Oct 08
- Draft Scorecard – Feb 09
- Alignment brief to TSG – 9 Feb 09



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Assessment Process - SWOT



	Strengths	Weaknesses
Internal	<ul style="list-style-type: none"> • Recruiting strategies • Strong relationships with national nursing leaders • Civilian loan repayment program • Deployment experience • Civilian longevity • Research cells 	<ul style="list-style-type: none"> • Non-competitive pay, incentives, and upward mobility opportunities for DA civilian nurses • Inability to react quickly to identified learning needs • Inadequate metrics to forecast/track retention • Leadership assignments prior to achieving competency / experience • Current active duty nurse force structure • Gaps in critical AOCs and company grades • Current AR ANC force structure inadequate to meet future senior force requirements
	Opportunities	Threats
External	<ul style="list-style-type: none"> • Clinical NCO training • Standardization in technology • Incentive Specialty Pay expansion • Developing educational partnerships • Determine optimal package of DA civilian retention tools • Work with specialty leaders from the Navy and Air Force to examine/develop core competencies 	<ul style="list-style-type: none"> • Leadership changes that do not carry on a unified vision • Losing clinical focus to non-clinical priorities • Turbulent environment • Compassion fatigue • Increase in length (FORSCOM) or frequency of deployments

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Strategic Vision

Army Medicine Vision:

**America's Premier Medical Team Saving Lives and Fostering
Healthy and Resilient People
Army Medicine...Army Strong!**

ANC Vision:

**A professional corps that consistently achieves
performance excellence, fosters innovation, builds
knowledge and capabilities, and ensures
organizational credibility and sustainability.**



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Strategic Mission

Army Medicine Mission:

- Promote, Sustain and Enhance Soldier Health
- Train, Develop and Equip a Medical Force that Supports Full Spectrum Operations
- Deliver Leading Edge Health Services to Our Warriors and Military Family to Optimize Outcomes

ANC Mission:

- ***“All actions and tasks must lead and work toward promoting the wellness of Warriors and their families, supporting the delivery of Warrior and family healthcare, and all those entrusted to our care and ultimately, positioning the Army Nurse Corps as a force multiplier for the future of military medicine.”***



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Army Medicine Strategy Map

April 2008

Mission

- Promote, Sustain and Enhance Soldier Health
- Train, Develop and Equip a Medical Force that Supports Full Spectrum Operations
- Deliver Leading Edge Health Services to Our Warriors and Military Family to Optimize Outcomes

Vision America's Premier Medical Team Saving Lives and Fostering Healthy and Resilient People
Army Medicine...Army Strong!

Strategic Themes

Maximize Value in Health Services	Provide Global Operational Forces	Build the Team	Balance Innovation with Standardization	Optimize Communication and Knowledge Management
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SUSTAIN PREPARE RESET TRANSFORM

ENDS Patient/Customer/Stakeholder

CS 1.0 Improved Healthy and Protected Families, Beneficiaries and Army Civilians	CS 2.0 Optimized Care and Transition of Wounded, Ill, and Injured Warriors	CS 3.0 Improved Healthy and Protected Warriors	CS 4.0 Responsive Battlefield Medical Force	CS 5.0 Improved Patient and Customer Satisfaction	CS 6.0 Inspire Trust in Army Medicine
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WAYS Internal Process

In Support of

The Army Family Covenant¹

IP 10.0 Optimize Medical Readiness	IP 11.0 Improve Information Systems	IP 12.0 Implement Best Practices	IP 7.0 Maximize Physical and Psychological Health Promotion and Prevention	IP 8.0 Improve Quality, Outcome-Focused Care and Services	IP 9.0 Improve Access and Continuity of Care	IP 13.0 Build Relationships and Enhance Partnerships	IP 14.0 Improve Internal and External Communication	IP 15.0 Leverage Research, Development and Acquisition	IP 16.0 Synchronize Army Medicine to Support Army Stationing & BRAC
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MEANS Learning and Growth

LG 17.0 Improve Recruiting and Retention of AMEDD Personnel	LG 18.0 Improve Training and Development	LG 19.0 Promote and Foster a Culture of Innovation	LG 20.0 Improve Knowledge Management
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MEANS Resource

R 21.0 Optimize Resources and Value	R 22.0 Optimize Lifecycle Management of Facilities and Infrastructure	R 23.0 Maximize Human Capital
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Feedback Adjusts Resourcing Decisions

This is a dynamic, living document

For more information go to: <https://ke2.army.mil/bsc>

ANC Strategy Map

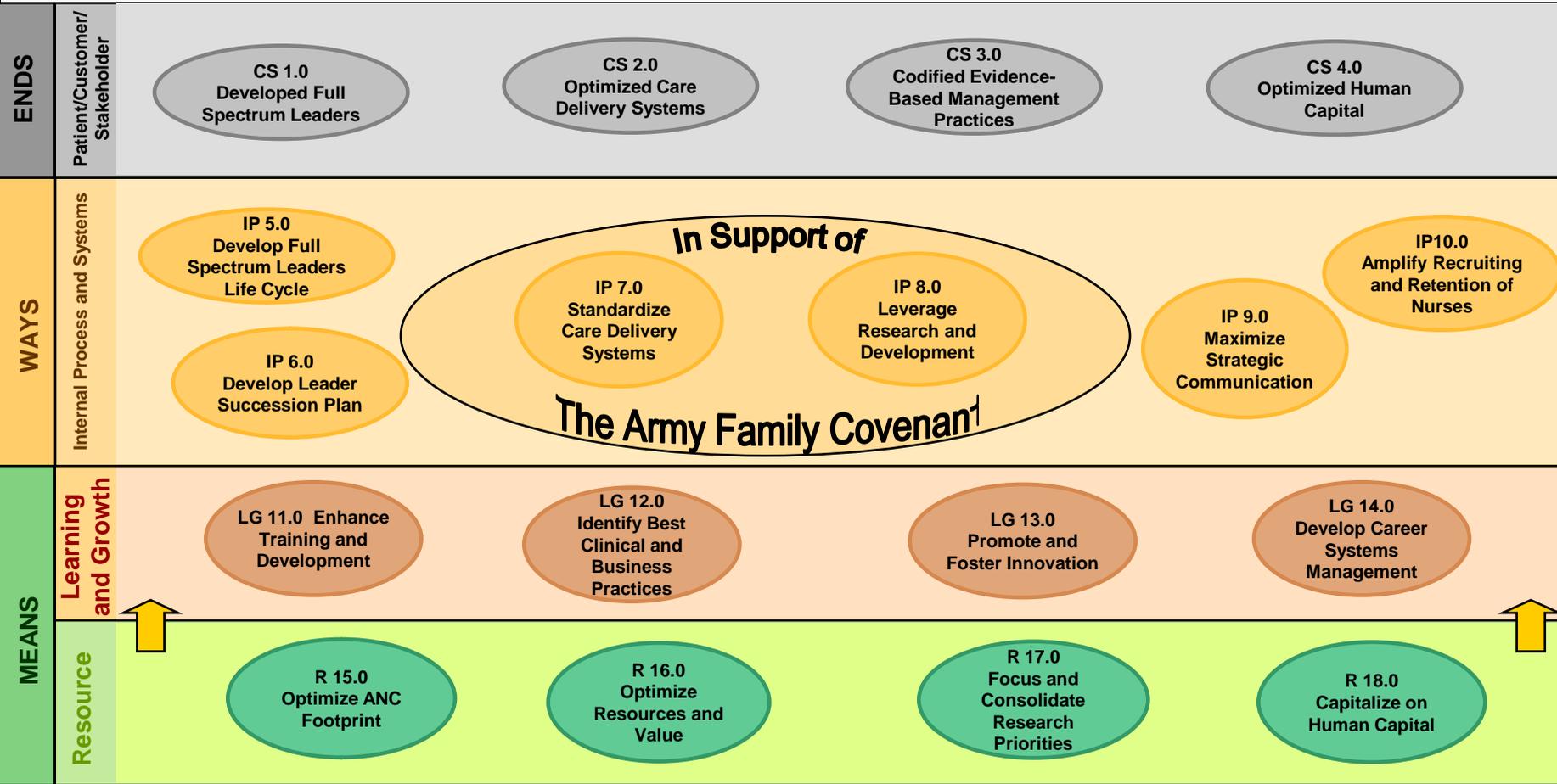
February 2009

Mission All actions and tasks must lead and work toward promoting the wellness of Warriors and their families, supporting the delivery of Warrior and family healthcare, and all those entrusted to our care and ultimately, positioning the Army Nurse Corps as a force multiplier for the future of military medicine.

Vision A professional corps that consistently achieves performance excellence, fosters innovation, builds knowledge and capabilities, and ensures organizational credibility and sustainability.

Strategic Themes	"Building Our Bench"	"Back to Basics"	"Optimize Performance"	"Portfolio Of Expertise"
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SUSTAIN PREPARE RESET TRANSFORM



Feedback Adjusts Resourcing Decisions

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MEDCOM - ANC

- Similarities:
 - ANC BSC cascades from MEDCOM BSC
 - Strategic objectives aligned to support AMEDD mission & vision



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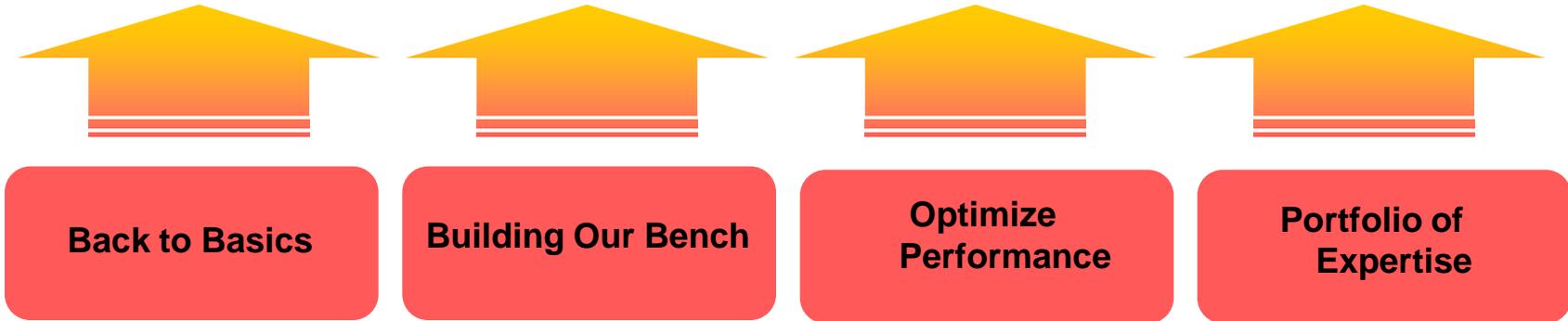
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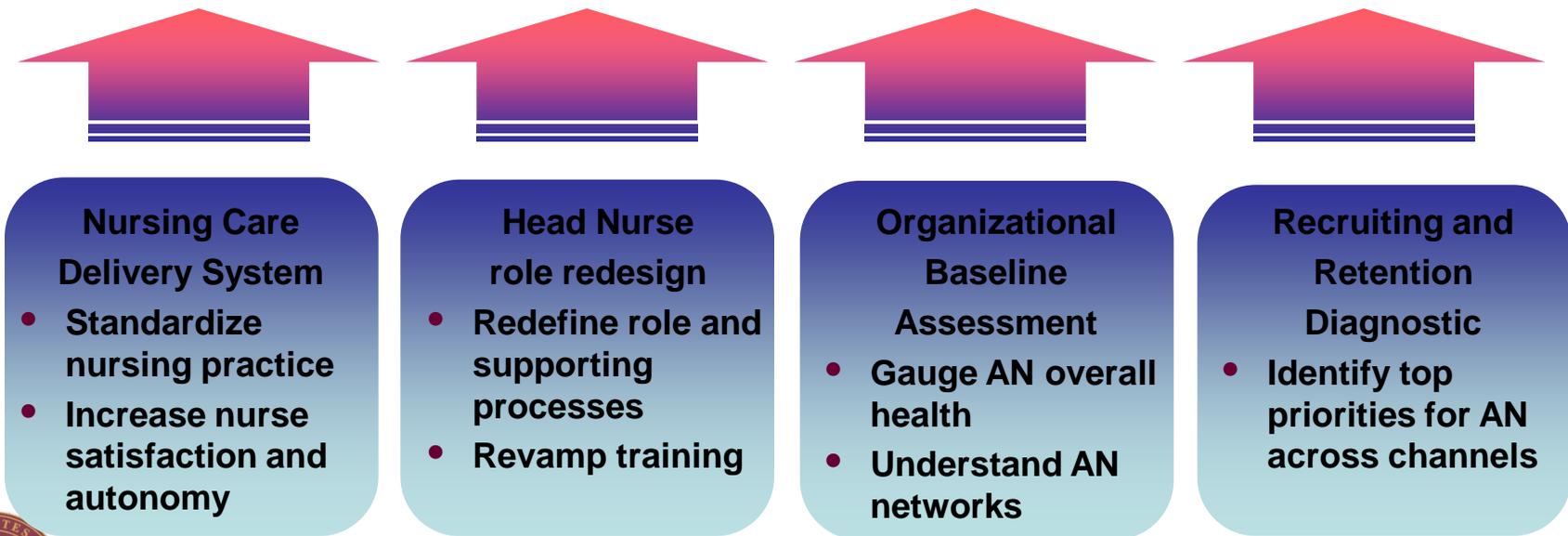
Army Medicine Strategic Themes



Army Nursing Strategic Themes



Initiatives



Nursing Care Delivery System

- Standardize nursing practice
- Increase nurse satisfaction and autonomy

Head Nurse role redesign

- Redefine role and supporting processes
- Revamp training

Organizational Baseline Assessment

- Gauge AN overall health
- Understand AN networks

Recruiting and Retention Diagnostic

- Identify top priorities for AN across channels

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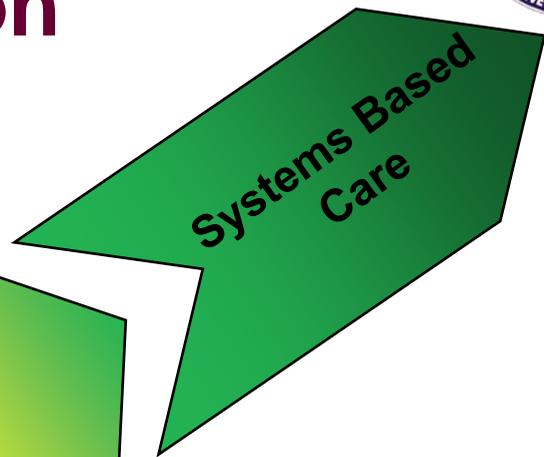
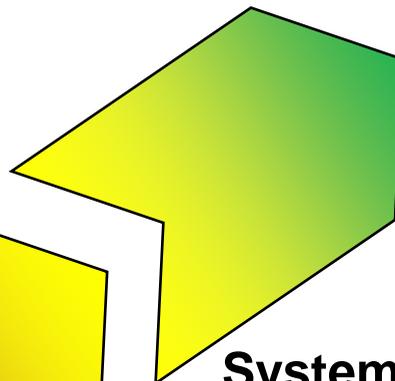
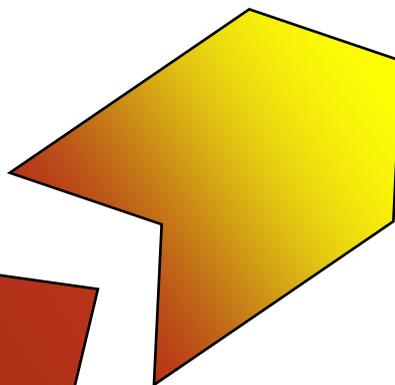




Transformation

Expert Based Practice

- Practice variance
- Evidence Based variance
- Fragmented, uncoordinated, and characterized by unnecessary duplication of services



Systems Based Patient-Driven Care

- Centered on teams & interdependence
- Well-defined processes
- Supported by information technology tools
- Evidence Based

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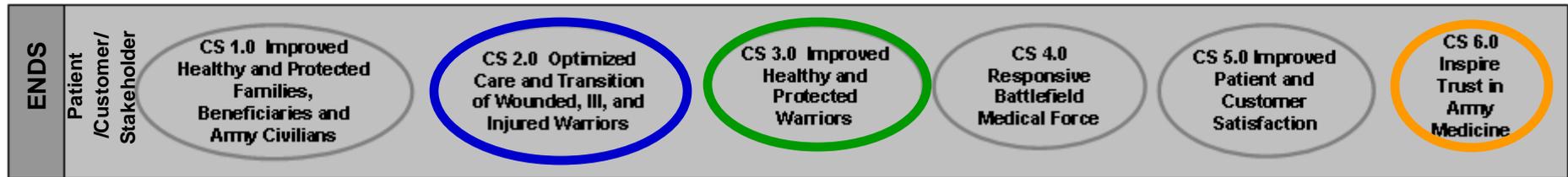


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Cascading



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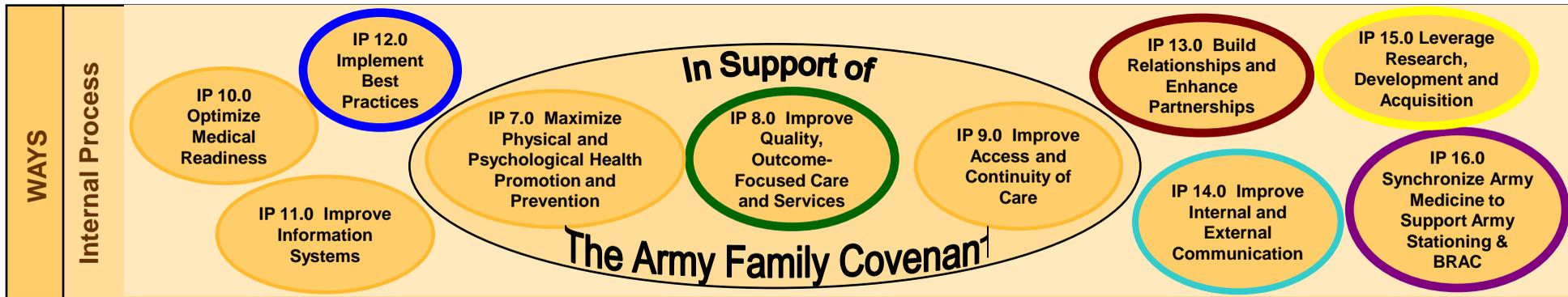


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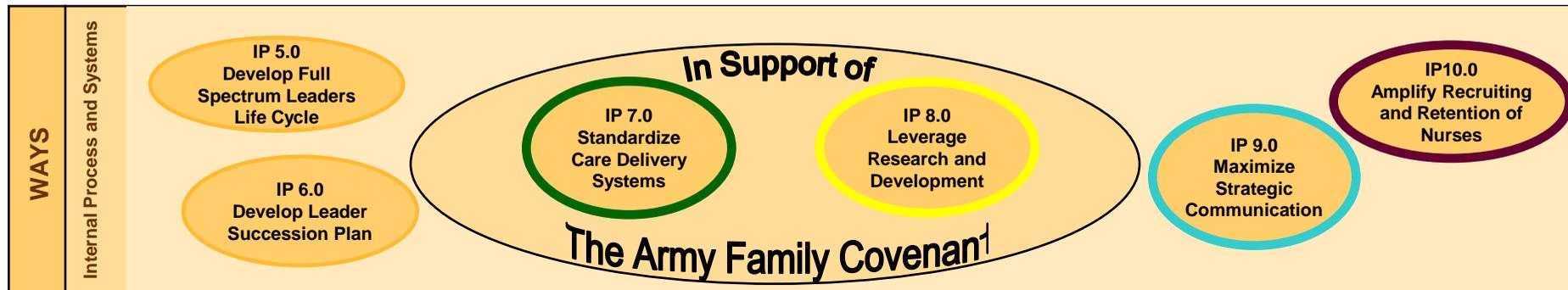
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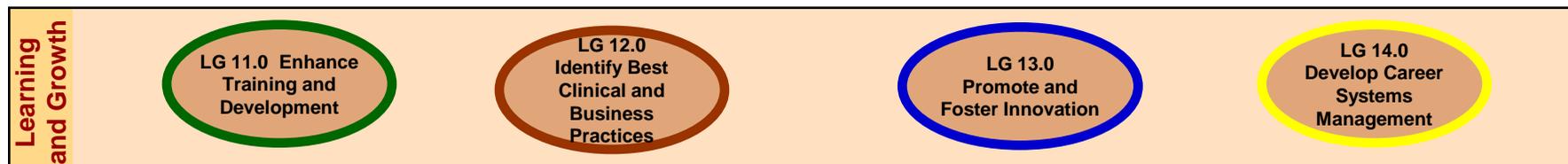
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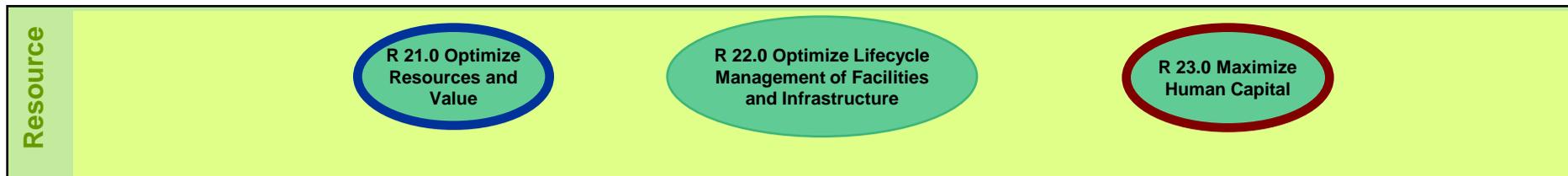
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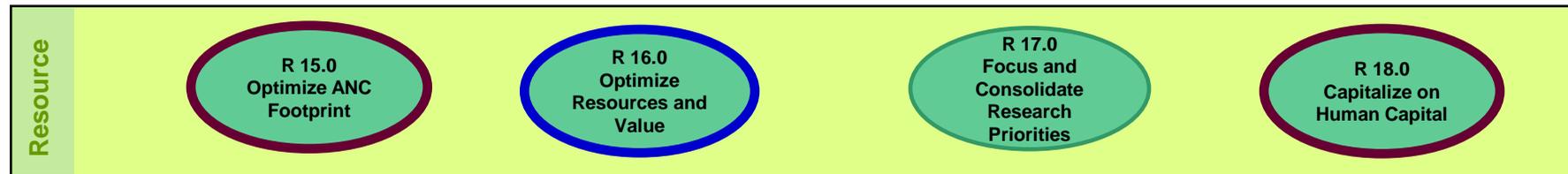
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Strategic Objective

Leader Development (LD): A persistent, sustainable nurse leader succession plan created full-spectrum leaders; who were adaptive to any conditions-based mission, provided a persuasive voice at key echelons of influence in the AMEDD, and innovated doctrine to blueprint the future of the ANC.

Operational Objectives	Objective Statement	Operational Task	Coordinating Points	Status	Critical Task
LD 1.0: Full Spectrum Leaders	Provide appropriate nursing capability and capacity in support of The Army CoS and The Surgeon General's strategic objectives	Perform gap analysis between current capability and capacity and future requirements.	<ul style="list-style-type: none"> •FORSCOM •TRADOC •EBOD •Nurse Consultants •APPD 		<ul style="list-style-type: none"> •Define Full Spectrum leaders •Define and validate critical leader positions •Develop leader capacity and capability plan •Integrate a credible, viable, sustainable civilian workforce into the ANC leadership structure
LD 1.A: Leader Succession Plan	Develop and execute a leader succession plan that insures sustainable mission capabilities	Develop life cycle models with appropriate force modeling to insure current and future capabilities and force structure	<ul style="list-style-type: none"> •APPD •Nurse Consultants •USAREC •ROTC •EBOD 		<ul style="list-style-type: none"> •Life cycle model •Clinical tracks •Plans for all key leader positions
LD 1.B: Leader Training and Development	Align training requirements with "Train as you Fight" doctrine to insure future capability that supports AMEDD missions	Top to Bottom review and restructure of AN training programs	<ul style="list-style-type: none"> •RMC CN •Cadet CMD •DNS/AMEDD C&S •EBOD •USAREC 		<ul style="list-style-type: none"> •Assesses appropriate utilization of external agencies, i.e. RAND, TWI •Assess are AMEDD C&S AN courses to determine what competencies and capabilities each produce •Gap analysis between what we have and what we need.

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Strategic Objective

Evidence-Based Care (EB): Evidence-based methodology optimized business practices and cost-capabilities by blending analysis, measuring, and re-designing into daily performance.

Operational Objectives	Objective Statement	Operational Task	Coordinating Points	Status	Critical Task
EB 1.0: Research and Development	Develop a nursing science and technology foundation for AN strategic imperatives	Operationalize an AN research system that provides a strategic grid which integrates and synchronizes with AN agenda	<ul style="list-style-type: none"> •RMC CN •NRAB •EBOD •TSNRP 		<ul style="list-style-type: none"> •Define and codify the scope of nursing research •Create a culture and workforce for nursing research •Develop research agendas
EB 1.A: Professional nursing practice	Standardize nursing practice across Army Nursing	Synchronize AN practice, standards, scope of practice and performance with national standards, evidence-based management and best practices	<ul style="list-style-type: none"> •RMC CN •EBOD •NRAB •AMEDD Patient Safety 		<ul style="list-style-type: none"> •Implementation of a standardized nursing care delivery system across the AMEDD •Identify high risk nursing practices •Validate Scope of Practice
EB 1.B: Knowledge Management	Leverage decision support and knowledge management methodologies to provide a foundation for AN strategic imperatives	Align AN knowledge management with AMEDD corporate solutions	<ul style="list-style-type: none"> •RMC CN •EBOD •AMEDD STRATCOM 		<ul style="list-style-type: none"> •Capitalize on Infosphere Battlespace •Engage key audiences •Break down "Stove Pipes"



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Strategic Objective

Human Capital (HC): The ANC footprint is optimized through validation of priorities and the force structure is re-postured for conditions-based capability and capacity

Operational Objectives	Objective Statement	Operational Task	Coordinating Points	Status	Critical Task
HC 1.0: Recruiting	Optimize AN (AC/RC, Civilian, Enlisted) capabilities and capacity to support current and future AMEDD missions	Synchronize recruiting practices with current and future recruiting requirements	<ul style="list-style-type: none"> •Accessions •Recruiting •Cadet •EBOD •AMEDD HR 		<ul style="list-style-type: none"> •Validate recruitment programs •Accessions Incentives
HC 1.B: Retention	Improve Human Capital business processes to enhance professional nursing practices across the AN spectrum	Operationalize measurable retention strategies to sustain AN mission capabilities	<ul style="list-style-type: none"> •HRC •RMC CN •EBOD •AMEDD HR •AMEDD C&S 		<ul style="list-style-type: none"> •ANC Residency Program •Maintain ISP •Exit Surveys

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Strategic Objective

Warrior Care (WC): Optimized nursing care delivery systems wrapped nursing capability around AMEDD strategic goals and missions; Warrior/patient/family-centered care models embraced evidence-based practice to achieve best patient outcomes.

Operational Objectives	Objective Statement	Operational Task	Coordinating Points	Status	Critical Task
WC 1.0: Nsg Care Delivery Systems •Ambulatory Care •Case Management •Discharge Nursing •PPM •Flight Nursing •Disaster Management •Infection Control •Wellness •CQM •Rehabilitative Nursing •Telehealth	Provide operational ballast for The Surgeon General's strategic imperatives	Execute a evidence-based/best practice nursing care delivery system	•EBOD •NRAB •CSBPO •Nurse Consultants •TSNRP		Incorporate the Following: <ul style="list-style-type: none"> • Documentation processes • Patient Advocacy concept • Ethical framework • Workload capture/patient acuity system • Scope of Practice delineation

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The BSC Way Ahead

End of Year Briefing to Chief, Army Nurse Corps- SEP 09

FY 10 ANC Campaign Plan -AUG 09

State of the Army Nurse Corps-JULY 09

AN EBOD Re-Validation of Priorities -JUNE 09

AN EBOD Bi-Annual Report- MAY 09

Congressional Testimony:

Campaign Plan -APR 09

MAR 09 – Execute Metric Reporting

FEB 09 – Brief OTSG on ANC Balance Scorecard

JAN-FEB 09 –Pilot Professional Practice Model

JAN 09–Campaign Plan STRATCOM

JAN 09 – Validate and Execute ANC Campaign Plan

30 OCT 08 – ANC Campaign Plan Conference
