

# Managerial Strategies Applied to the Health System: Surgery Services -Balanced Scorecard

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## Abstract

**Introduction:** The balanced scorecard is a business management tool used to evaluate the condition and progress of a company from a global perspective. The dashboard provides a series of numerical and visual indicators (monitoring, financial, inventory, and other company sectors) that offer a global, impartial, and real-time perspective that facilitates managerial decision-making. This methodology can be implemented in healthcare to improve planning and management processes.

**Methods:** Retrospective, descriptive study. Various online sources were used to locate literature on the topic, including Medline, Google Scholar, Uptodate, SciELO, and Cochrane.

**Objective:** To establish the relationship between managerial strategies and their application in healthcare, particularly in surgery.

**Conclusion:** Healthcare institutions must be prepared for changes arising from continuous technological innovation. Therefore, it is crucial to efficiently use information generated during procedures by adopting new organizational tactics such as the balanced scorecard.

**Keywords:** Scorecard; Surgery; Management strategies

## Introduction

The balanced scorecard is a management methodology that translates strategy into coherent objectives connected through indicators and linked to action plans, aligning the organization's members with the institutional strategy. The name "Balanced Scorecard" reflects equilibrium between short- and long-term objectives, financial and non-financial measures, predictive and historical indicators, and internal and external perspectives. Developed at Harvard University by Robert Kaplan and David

Norton and published in Harvard Business Review in February 1992, this management tool provides information about a company's current state and goals through four interconnected perspectives:

- Financial: Measures performance and profitability. Companies can increase value by boosting sales or reducing process costs to enhance productivity.
- Customer: Focuses on customer satisfaction and retention, gathering metrics such as loyalty and satisfaction levels.

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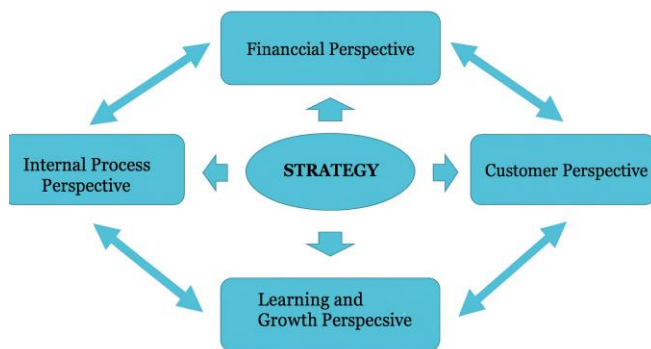
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- **Internal Processes:** Includes daily operations, management processes, customer relations, innovation, and social activities.
- **Learning and Growth:** Evaluates the organization's ability to innovate and learn, analyzing intangible assets such as human capital, informational capital, and organizational capital.

Applying this strategy in healthcare can be challenging but, with clear focus and team participation, it can significantly improve care quality and operational efficiency. Implementing a balanced scorecard (BSC) in healthcare helps improve service management and performance. Hospitals, as service organizations, deliver care instantly through clinical, functional, and logistical processes. Their main purpose is to meet user needs and provide optimal service.



**Figure 1:** *Balanced Scorecard.*

To implement a BSC, it is essential to define the vision and mission of the healthcare center and ensure all members understand them. This alignment integrates the BSC objectives with the institution's overall strategy. The four classic perspectives—financial, customer, internal processes, and learning/growth—can be adapted in healthcare to focus on care quality, patient satisfaction, operational efficiency, and staff development. Each perspective requires clear, measurable objectives and performance indicators (KPIs), such as patient waiting time for customer satisfaction. Regular data collection through surveys, clinical records, and financial reports supports decision-making. Continuous staff training and communication strengthen a culture of improvement [1-12].

### Application in Surgical Services

In surgery services, management indicators are essential tools for healthcare administration. Their goal is not profit but high-quality service delivery. However, indicator use varies because patient care processes must prioritize patient outcomes.

Key surgical indicators include:

- Surgical cancellations
- Reoperations
- Unplanned hospital admissions

- Discharge delays

Quality assessment faces challenges because mortality, morbidity, and waiting times often fall outside ideal evaluation parameters. Thus, surgery evaluation indicators typically include mortality, disability, dissatisfaction, and disease rates. Effective hospital administration requires knowing the patient volume that surgical services can handle within a set timeframe. Common quality indicators include the number of procedures performed, operating room utilization for emergency and elective surgeries, and patient satisfaction. Surgical services encompass both clinical and educational roles. Because operating rooms are costly, efficient use depends on punctual schedules, flexibility, low cancellation rates, and high utilization.

### Academic and Leadership Applications

In the academic aspect, surgical services also train future professionals. The balanced scorecard can structure this area as follows:

- **Vision and Strategy:** Strengthen teaching, research, and training skills within the surgical department.
- **Financial Perspective:** Promote continuous staff training and secure funding for educational innovation.
- **Internal Processes:** Establish shared schedules, academic and surgical protocols, and improve teaching organization.
- **Customer Perspective (faculty/residents/students):** Conduct semiannual feedback, offer continuous professional development, and design annual curricula with tutoring.
- **Learning and Growth:** Enhance teaching and surgical skills, host simulator workshops, provide supervised training, offer writing mentorships, and increase publications by residents and faculty.

Implementing the BSC in healthcare, particularly in surgical departments, represents a paradigm shift—from reactive to strategic, proactive, and results-oriented management. In high-pressure surgical environments combining clinical complexity, workload, and educational responsibility, the BSC turns the surgical vision into quantifiable objectives across four core areas: learning, processes, community, and resources.

This allows:

- Identifying imbalances between clinical care and resident education to guide strategy.
- Evaluating academic impact, operational efficiency, and stakeholder perception in real time.
- Fostering a culture of continuous improvement based on data, teamwork, and innovation, optimizing surgical resource use.
- Thus, the balanced scorecard becomes more than a control tool - it becomes a leadership and transformation mechanism that enhances surgical quality, professional development, and the hospital's social impact.

## Conclusion

Healthcare institutions must be prepared for continuous technological change. Efficient information management through integrated quality systems facilitates better decision-making and ensures competitiveness in the healthcare sector.

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