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Case Study Evaluation of Organisational Performance Measurement Implementation in a Non-acute Health Charity

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Abstract: There is community and stakeholder expectation that health charities should be well governed and held accountable. Non-acute health charities are both not-for-profit organisations and health service providers. Organisational Performance Measurement (OPM) is recognised as being a key instrument to enable success and even survival in the modern business world, yet it is under-utilised by non-acute health charities. NCPI Framework was developed to encourage OPM uptake by the sector. A case study evaluation using convergent parallel mixed methods research design evaluated the effectiveness of an NCPI Framework informed twelve-month implementation plan to introduce OPM in a non-acute health charity. Measures were put in place to manage risks of consistency, replicability and bias in using a case study method. Pre and post quantitative (74% and 64% response rates) and qualitative research (24% response rate) were utilised as part of the case study evaluation. The qualitative and quantitative findings complimented each other, and the qualitative data provided further insights into participant perspectives. The quantitative data results allow for the study's hypothesis to be accepted and the null hypothesis to be confidently rejected. The implementation of the twelve-month OPM implementation plan informed by the NCPI Framework positively impacted the introduction of OPM to the case study organisation. Further, the study results conclusively demonstrate a significant improvement in the utility and usability of OPM in the case study organisation. This is the first evaluation of its kind for this sector. The non-acute health charities sector under-utilises or under-reports OPM and prior to this study an evidence-informed method for OPM implementation has not existed for the sector. The NCPI Framework is the first OPM implementation tool for the sector and was found to have positively impacted the introduction of OPM to the case study organisation and was found to be useful in terms of both utility (amount of user satisfaction) and usability (ease of the system's functionality). The Framework could now be used by Boards and executive leaders in the sector to enhance their organisation's governance standards, accountability and performance.

Keywords: Charity, Not-for-Profit, Health, Performance, Organisation Performance

1. Introduction

Organisations exist so that people can coordinate their actions and create more social, health, and economic value to stakeholders than working on their own [1, 2]. In health care, there is community and stakeholder expectation that health charities should be well governed and held accountable similar to government and for-profit providers [3-7] and interest in not-for-profit health provider organisational effectiveness and excellence [7-9].

Non-acute health charities are both not-for-profit organisations and health service providers. They form part of

the broad non-government health industry which is recognised by the World Health Organisation's Civil Society Initiative [10]. They provide a range of non-hospital health services with a primary clinical purpose of maintenance care which often requires care over an indefinite period following initial assessment or treatment as opposed to complex stabilisation [11-13]. Despite their broad service scope, non-acute health charities have common governance and service similarities and form a homogenous sector [12]. Beyond health service delivery, they require astute management of diverse stakeholder groups and multiple revenue streams such as service-fees, membership, government grants, service contracts, membership, social venture operations and fundraising [14-16]. Such organisations are well-known in the United Kingdom, United States of America, Canada, Australia and New Zealand and many other developed and developing countries [17-19]. Their relevance is emerging as they increase their healthcare workload alongside government and for-profit providers of workload [7, 17].

For success, if not survival, an organisation must reach sustainable competitive advantage whereby it attains and maintains the factors that contribute to outperforming competitors over long-periods [20-22]. There is evidence for the contribution to performance of various methods, tools and factors such as leadership and human resource management [23-26]. However, research suggests that the level of performance that leads to sustainable competitive advantage requires an interweaving of complex, multidimensional, long-term and deeply embedded cultural and systemic factors [1, 7, 27]. Such ways of working are created by an understanding and appreciation of Organisational Learning Theory (OLT) which promotes experience, culture and learning environments [27-29].

Organisational Performance Measurement (OPM) is one such approach. OPM is extensively used in for-profit and government industry and in healthcare generally [24, 30, 31] and is aligned to OLT [27, 28, 29]. It is recognised as being a key instrument to enable success, competitive advantage, and even survival, in the modern business world [32]. OPM provides a foundation for governance by creating strategic clarity and coherence through evaluation, control, budgeting, motivating, promoting, celebrating, learning and improving [23]. By using formal processes of accounting and tracking the level of an organisation's achievement [24], OPM supports organisations attain and maintain the factors that contribute to higher performance and service excellence over long periods [23, 32]. It is distinguished from program evaluations in that it provides data that can be used to assess an organisation's overall capability to fulfil and sustain organisational purpose, whereas a program evaluation, or the sum of multiple program evaluations, offer a singular dimension point in time assessment [23, 33].

Despite its value, OPM uptake within not-for-profit industry has been slower by comparison to for-profit and government industry [34]. Similarly, the non-acute health charities sector under-utilises or under-reports OPM and an evidence-informed method for OPM implementation does

not exist for the sector [12]. The lack of OPM reporting, and a sector tailored OPM implementation methodology, brings into question the capability of non-acute health charities to accurately fulfill and sustain their purpose and meet stakeholder expectations [12, 35].

Acknowledging the gap in OPM methodology tailored for non-acute health charities, the Non-acute Health Charity Performance Implementation Framework (NCPI Framework) was developed by Colbran, Ramsden, Stagnitti, Toumbourou & Pepin [19] to encourage OPM uptake by the sector. It was designed using organisational learning [27, 36] and action implementation theories [36]. This theoretical framework was complemented by evidence that tailoring OPM implementation approaches to respond to the unique nuances of industry and sector types enhances the likelihood of OPM success [37]. The NCPI Framework recommends five implementation factors and incorporates 30 operating elements - 1) OPM Implementation Plan (9 elements); 2) Commitment (5 elements); 3) Organisation Understanding and Learning (8 elements); 4) Alignment, Integration and Resourcing (5 elements); and 5) Measures and Indicators (3 elements).

Across 2017 and 2018, an Australian non-acute health charity undertook a 12-month implementation process program to introduce OPM. The NCPI Framework was used to inform a tailored OPM implementation plan for the organisation. The aim of this study was to evaluate the effectiveness of an NCPI Framework informed twelve-month implementation plan to introduce OPM in a non-acute health charity. This study is the first to assess OPM implementation in a non-acute health charity. The hypothesis was that NCPI Framework implementation would positively impact on the introduction of OPM in a non-acute health charity case study organisation. The objectives to achieve the aim were to:

1) assess the level to which the twelve-month implementation plan impacted on the case study organisations acceptance of OPM;
2) identify participant perspectives on the level of utility and usability of the OPM implementation mechanisms utilised within the implementation plan informed by the NCPI Framework;
3) identify participant perspectives on the key implementation factors for successful OPM implementation;
4) identify if an interrelationship existed between the NCPI Framework's implementation elements and participant's perspectives of the key factors that contributed to successful implementation of the OPM process;
5) identify areas of strength and improvement which could enhance the NCPI Framework's effectiveness.

2. Method

This study formed part of a broader body of work investigating OPM in non-acute health charities which utilised a pragmatist research design. Pragmatism is a

perspective that looks for "what works" [38] through a diverse range of information gathering which can then be applied towards solving practical problems [38]. This aligns with the dynamic nature of organisations and the need to consider their multidimensional reality. Pragmatism is well suited to drawing out knowledge on OPM and for that knowledge to be applied to a practical solution because it is founded on belief that knowledge is always in a process that can be revised, improved and applied towards solving practical problems [39].

Informed by the pragmatist paradigm, a case study evaluation and convergent parallel mixed methods research design [40-41] were utilised for this study. Despite concerns relating to consistency, replicability and risk of bias [42], a case study evaluation was chosen because of its ability to offer real world and contextual insight [43]. The hypothesis was that NCPI Framework implementation would positively impact on the introduction of OPM in a non-acute health charity case study organisation. This paper assesses the results of both quantitative and qualitative research as part of the case study evaluation.

2.1. Participating Organisation Selection Criteria

To enable replication of this study in future and to overcome the risk of bias or influence of individuals within the organisation, the authors developed a set of selection criteria to guide selection of a case study organisation. These criteria were that the organisation a) met the author's described definition of a non-acute health charity, b) did not have an OPM program currently operational, c) had not attempted OPM implementation within the previous three years, d) demonstrated a readiness for undertaking OPM, and e) had more than twenty staff.

The participating case study organisation is a non-acute health charity, within the geographical territory of New South Wales (Australia) that supports remote and rural health outcomes. The case study organisation had potential for over sixty participants in the study, did not have a current OPM program, had not attempted OPM implementation at any stage, however had identified improving performance and impact as organisational goals of its strategic plan. A sample of the organisation's twelve month OPM implementation activities responding to the NCPI Framework's recommendations are listed in Table 1. The Chair of Directors provided consent for the study which was conducted in-line with the organisation's Research, Data and Privacy policy protocols overseen by the General Manager. Ethics approval was obtained from Deakin University, Australia (approval number HEAG-H 145 89_2017).

Table 1. Sample activities of the case study organisation's implementation using the NCPI Framework.

Implementation Factor	Sample Activities undertaken by the case study organisation
Implementation Plan	1) Design and articulation of 12-month Implementation Plan which was approved by the working party, communicated to staff and then updated with regular progress reports to staff 2) Articulation of roles and responsibilities within the Implementation Plan 3) A test-bed trial for the development of organisational targets was conducted in the six-months prior to the Implementation Plan's deployment
Commitment	1) Board and Executive group endorsed instigation of organisational performance program and the Implementation Plan 2) Establishment of a Performance Program working party made of up representatives from each operational unit 3) Inclusion of costed Implementation Plan within annual operating plan and budget 4) Appointment of a dedicated Performance Program coordinator role to drive delivery of the Implementation Plan
Organisation Understanding and Learning	1) Workshops with individual teams to support design of cascading staff target plans 2) Implementation Plan progress updates were provided by CEO to Board meetings and staff meetings throughout the 12-month period 3) Development of an internal technology application to enable dashboard reporting of progress against targets 4) Embedding of Implementation Plan evaluation to compliment the deployment program 5) Inclusion of Performance Program briefing materials in new staff on-boarding processes and materials
Alignment, Integration and Resourcing	1) Organisational targets cascaded to annual Unit targets and individual staff member targets. 2) Implementation Plan progress reports and target reports included as standing agenda items for the Executive and Management Groups 3) Investment in a technology application to enable reporting of progress against targets
Measures and Indicators	1) Six measures were developed as the overarching domains for the development of organisational targets. These measures were adapted from those recommended by Colbran, Ramsden, Stagnitti and Adams (2017) for non-acute health charities - Purpose and Impact; Quality of Service; Stakeholder Relations and Engagement, Finance, Infrastructure and Systems; Governance and Management; People, Culture and Leadership. 2) Twelve-month organisational targets and indicators developed to respond to each of the six measurement domains. These targets were then approved by the Board, and Executive Group. 3) Twelve-month Unit targets developed for each operational Unit developed to respond to the organisational targets. Cascading targets were then also set for each individual staff member.

2.2. Quantitative Evaluation Design

Two identical anonymous electronic pre and post 5-point Likert scale surveys were administered to test the hypothesis. Usefulness was defined by utility - the level of participant satisfaction, and usability - the ease of functionality as perceived by participants [44]. Purposive sampling was used and all Board members and staff were invited to participate in the study. A total of 48 pre-surveys and 47 post-surveys were completed.

The pre-surveys (June 2017) were completed before implementation of the NCPI Framework informed implementation plan commenced in July 2017. The post-surveys (July 2018) were completed following the completion of the 12-month implementation plan. The case study's senior managers and the study team discussed coercion risks. Mitigating steps were workshopped and agreed upon and included all internal correspondence relating to the organisational performance measurement program came from the CEO and all research study related invitations and interactions were led by the second author as independent research lead. Anonymity and confidentiality were also guaranteed as quantitative and open-ended questions in both surveys were anonymous.

The survey instrument informed by the Gervais Program Evaluation Model [45] was developed specifically for the study. The Gervais Program Evaluation Model uses five distinct dimensions to enable evaluation of program effectiveness in the health field by analytical consideration of the complex interaction of the elements required for the establishment, and embedding, of infrastructure and systems to support program design and implementation [45]. The survey tool's purpose was to assess participant perception of OPM within the organisation's context, assess progress in the establishment of fundamental infrastructure and systems necessary to enable organisational performance measurement and determine participant satisfaction with OPM. The tool included three parts. Part A, titled "About You" included five demographic questions. Part B titled "Organisational performance at the case study organisation" included fifty-four questions divided into two sections to assess the two components of usefulness: utility and usability. Firstly, six introductory questions were developed by the authors to assess participant understanding, engagement and satisfaction of OPM (i.e. utility). This was followed by forty-eight questions to assess functional program elements (i.e. usability) using the five dimensions of the Gervais Program Evaluation Model. All questions offered the same 5 point Likert scales (1=unsure, 5=excellent). Finally, Part C titled "Wrap-Up" included five open-ended questions for feedback. The method and analysis of Part C is included in this paper as a component of the qualitative evaluation.

The process of recruitment followed the approved ethics methodology and was consistent for both survey rounds. An introduction to the study and invitation to participate in each survey round was emailed from the CEO to all potential participants with a direct weblink to the electronic survey. The weblink site included a welcome note from the second author who is independent from the organisation and the led the survey research. A plain language statement which confirmed respondent anonymity was also included and accepting the consent form was necessary to proceed with the survey. Participants were asked to complete the survey within two weeks. Submission of the completed survey indicated consent. A reminder email was sent after two weeks for both survey rounds in which participants were informed of an additional two-week window and revised closure date. The study did not require participation from anyone under 18-years of age, and there was no payment, reimbursement of expenses or incentives for participants.

For data analysis the valid percentage was used to exclude missing data. Descriptive statistics analysis of the mean, mode and standard deviation were applied to all Likert scales questions. Standard deviation was used to measure the level of variation between the averages for each question in the pre-and-post survey data. Where multiple modes existed, the smallest value was used and is represented in the results using (*). Comparisons of mean and mode were also considered for each participant group. To determine the level of change for the overall results of each question, data was categorised into three groups – 'improved' if they had improved one or more points on the Likert scale, remained the same ('stable'), or 'declined' if they had declined one or more points on the Likert scale between the pre-and-post implementation surveys. The Wilcoxon Signed Rank Test was utilised to assess whether or not there was statistical significance between the pre and post survey responses for the overall participants group responses. The p value was determined as .05. Significant difference would suggest that implementation of the NCPI Framework had an impact on the introduction of organisational performance measurement in the case study organisation.

2.3. Qualitative Evaluation Design

The qualitative evaluation utilised two instruments across July and August 2018 to collect qualitative data from staff following completion of the case study organisation's 12-month implementation period. These first was an anonymous semi-structured interviews and the second involved analysis of the set of open-ended questions included in a quantitative survey from the earlier pre and post quantitative evaluation survey tool. Using triangulation, the authors identified similarities and differences between the two sources of information to develop a comprehensive understanding. Triangulation is a qualitative research strategy which tests the validity of information coming from different sources [46]. Inductive reasoning was used interpret the data against the Framework following steps outlined by Serry and Liamputtong [46]. This inductive analysis enabled the authors to identify, analyse and document themes emerging from the survey and interview data in order to increase understanding and interpret patterns within the data.

The use of two independent qualitative data collection tools is consistent with the aim of the qualitative phenomenology approach of utilising multiple sources to enable accurate description of the lived experience [47]. The use of semi-structured interviews is more traditional in descriptive phenomenology as they encourage more natural discussion between the participant and the researcher and can draw out deeper insight and perspectives [48-50], however open-ended survey questions can also be of value especially in this age where the use electronic mediums is more commonplace [51-52]. As outlined by Serry and Liamputtong [46] and Creswell et al. [38] and described in

the following sections, a rigorous and consistent data analysis approach was important for sound integration of the two data sets.

To mitigate risks associated with researcher preparedness and skills [53] for the semi-structured interviews, the research group developed an interview guide that considered the most appropriate and targeted questions and follow-up techniques. The interview guide included a plain language statement providing background to the study and its purpose and then four main questions relating to factors that contributed to successful implementation of the NCPI Framework within the case study organisation. These questions were:

(i).   What were your perceptions of organisational performance measurement (OPM)?

(ii). What were the important factors for successfully implementing OPM?

(iii). Were there any challenges/gaps that impacted on implementation?

(iv). If you observed any changes in the organisations as a result of implementation of 18 OPM, what were they?

These lines of inquiry focussed on the introduction of the program, the approach taken, their observations about the ease of implementation and the strengths and challenges associated with the process, the level of communication and information provided, their views about the key success factors, their observations of any impacts or outcomes as a result of implementing the organisational performance process program and suggestions as to next steps. A total of 15 staff members (24% of the organisation's 62 staff) accepted the invitation. The interviews lasted between 30–45 minutes and were audio-taped using a digital App. Techniques such as follow-up questions, clarification and probing (Serry and Liamputtong, 2013) were used to elicit detailed perceptions. The digital files were transcribed verbatim by a professional transcription service and de-identified. Participants were invited to review their transcript for accuracy and content. Three participants took up the offer.

Only three of the five open-ended questions included in the post implementation quantitative survey were considered in this paper because they aligned to interview questions and therefore added further depth to the analysis of the OPM implementation process. These were:

i).   Are the any comments you would like to make about OPM at [case study organisation]?

ii). Do you have any comments about the impact and value of the NCPI Framework and its effectiveness in supporting OPM at [case study organisation]?

iii). Do you have any advice for [case study organisation] as it sets about determining how best to measure the organisation's overall performance?

Interview transcripts and open-ended question responses from the anonymous post implementation electronic survey were analysed using a five-step inductive thematic and open coding approach following steps outlined by Serry and Liamputtong [46] and Elo & Kyngas [54]. This process included a checking mechanism whereby the first author independently coded four interviews and four qualitative post surveys. The coding was discussed and developed in an iterative manner with the second author until agreement was reached.

This thematic analysis enabled the authors to identify, analyse and document themes emerging from the data in order to make sense of participants narratives and written comments. The analysis generated 163 categories or units of text which were organised into themes. These themes were then assessed to confirm they were an accurate interpretation and had been assigned clear names and definitions to report patterns within the data [48] that in turn increase understanding and generate knowledge about the phenomenon [54].

3. Results

Data was secured through both the quantitative and qualitative evaluations. The data was analysed firstly independently and then interpreted together in response to the study aims [40]. The quantitative data results allow for the study's hypothesis to be accepted and the null hypothesis to be confidently rejected. It indicates that the implementation of the twelve-month OPM implementation plan informed by the NCPI Framework positively impacted on the introduction of OPM to the case study organisation. It is likely the implementation activities brought about the changes rather than chance. Further, quantitative data demonstrated the NCPI Framework's usefulness as measured by utility and usability. The qualitative and quantitative findings complement each other. The qualitative data provided further insights into participant perspectives.

The study's methodology was successful in achieving the five objectives set to support achievement of the study aim. Firstly, as noted above the level to which the twelve-month implementation plan impacted on the case study organisations acceptance of OPM was assessed. Secondly, participant perspectives on the level of utility and usability of the OPM implementation mechanisms utilised within the implementation plan informed by the NCPI Framework were identified, and participant perspectives on the key implementation factors for successful OPM implementation were also identified. Fourthly, an interrelationship existed between the NCPI Framework's implementation elements and participant's perspectives of the key factors that contributed to successful implementation of the OPM process was identified, and finally areas of strength and improvement which could enhance the NCPI Framework's effectiveness were identified.

3.1. Quantitative Evaluation Results

Respondent rates were 74% (48/65) and 64% (47/73) of the pre-and-post surveys respectively. Table 2 lists the summary of results for all survey participants and questions, including primary modal score, standard deviation, mean and Wilcoxon Signed Rank Test calculations. Data were grouped according to the six dimensions of the Gervais Program Evaluation Model and the Introductory Questions category.

There was little standard deviation in results with responses to only 2 of the 54 questions indicating a standard deviation greater than σ0.100. Results demonstrate positive significant change within the case study in terms of OPM awareness and understanding. There was an overall increase in means between pre and post data collection and a majority of results were statistically significant. More specifically, results of 50 out of the 54 questions (93%) asked in the pre and post surveys generated significant results, while 0% (0 of 54 questions) recorded a decline.

***Table 2.** Pre and Post Survey Results.*

Data based on a Likert Scale of 1 to 5 with 1 = unsure, 2 = poor, 3 = acceptable, 4 = good, 5 = excellent *Multiple modes exist. The smallest value is shown.							
Variable	**Pre Survey 1**			**Post Survey 2**			**p value**
	Mean	**(SD)**	**Mode**	**M**	**(SD)**	**Mode**	
Section 1: Introductory Questions							
1.1 The existence of organisational performance measurement.	1.8642	.73170	2.00	3.8846	.99305	4.00	.000
1.2 The level that you believe organisational performance measurement currently benefits the organisation	2.1154	.81618	2.00	3.5385	1.13950	4.00	.000
1.3 The degree to which you are encouraged to personally participate in organisational performance measurement	2.4231	.90213	2.00	4.0000	.97980	4.00	.000
1.4 Your satisfaction with organisational performance measurement	2.0385	.72004	2.00	3.6538	1.19808	4.00	.000
1.5 The degree to which you believe organisational performance measurement could benefit the organisation	3.7692	1.21021	4.00	4.3846	.75243	4.00	.043
1.6 Please rate your level of knowledge and understanding of organisational performance	2.6923	.88405	3.00	3.7308	.82741	4.00	.000
Section 2: Gervais Structural Dimension							
2.1 The quantity of resources available to support organisational performance measurement.	1.6154	.89786	1.00	3.0385	1.24838	3.00	.000
2.2 The quality of resources, including competence of personnel, to support organisational performance measurement.	1.9231	1.01678	1.00	3.2308	1.21021	4.00	.001
2.3 The adequacy of resources to provide personnel with information and training to support organisational performance measurement.	1.6923	.73589	1.00	3.0000	1.46969	3.00	.002
2.4 The degree of staff acceptability of resources available to support organisational performance measurement.	1.5385	.76057	1.00	2.8077	1.26552	3.00	.001
2.5 The degree of staff usage of resources available to support organisational performance measurement.	2.1923	.80096	1.00	2.5000	1.27279	3.00	.358
2.6 Clarity of roles and responsibilities of different personnel in relation to organisational performance measurement.	2.2692	1.07917	2.00	3.4231	1.06482	4.00	.002
2.7 The level of flexibility and adaptability of organisational performance in order to solve a problem or barrier.	2.1538	.88056	3.00	3.1538	1.34736	4.00	.005
2.8 The adequacy of information and communication channels to organisational performance measurement.	1.9231	.89098	2.00	3.4231	1.02657	4.00	.000
Section 3: Gervais Operational Dimension							
3.1 The degree of fairness of methods, activities and processes for organisational performance measurement.	1.8462	.92487	1.00	3.8462	1.15559	4.00	.000
3.2 The level of flexibility and quality of the methods, activities and processes of organisational performance measurement.	2.6923	1.37896	1.00	3.4231	1.30148	4.00	.097
3.3 The feasibility of organisational performance measurement.	1.8077	.98058	1.00	4.1154	.90893	4.00	.000
3.4 The level of conformity to existing norms and standards of organisational performance measurement.	1.9231	1.12865	1.00	2.8462	1.31734	4.00	.031
3.5 The organisational performance measurement program's usefulness to support delivery of services and programs.	1.4615	.64689	1.00	4.0000	1.01980	4.00	.000
3.6 The ease of organisational performance measurement. (i.e. the fluidity of its processes and mechanisms of regulation).	1.5385	.76057	1.00	3.1154	1.03255	3.00	.000
3.7 The adequate use of program resources for organisational performance measurement.	2.6923	1.37896	1.00	3.0385	1.21592	3.00	.396
3.8 The level to which personnel involved with organisational performance measurement are consistently available.	1.8077	.98058	1.00	3.3077	1.31967	3.00	.001
3.9 The level to which personnel are empowered to take a creative and constructive approach to organisational performance measurement.	1.9231	1.12865	1.00	3.8077	1.20064	4.00	.000
3.10 The productivity of the personnel involved with organisational performance measurement.	1.4615	.64689	1.00	3.3077	1.40767	4.00	.000
3.11 The level of perceived satisfaction of the personnel involved with organisational performance measurement.	1.5385	.76057	1.00	3.0000	1.29615	4.00	.001
Section 4: Gervais Strategic Dimension							
4.1 The level of stability and growth of organisational performance measurement.	1.8077	1.05903	1.00	3.5385	1.30325	4.00	.000
4.2 The level of organisational performance linkage between politics, policies and practices.	2.1154	.86380	1.00	3.4615	1.44861	3.00	.001

Data based on a Likert Scale of 1 to 5 with 1 = unsure, 2 = poor, 3 = acceptable, 4 = good, 5 = excellent
***Multiple modes exist. The smallest value is shown.**

Variable	Pre Survey 1			Post Survey 2			p value
	Mean	(SD)	Mode	M	(SD)	Mode	
4.3 The affordability of organisational performance measurement.	1.4231	.70274	1.00	2.9615	1.53573	1.00*	.003
4.4 The quality of management of organisational performance measurement.	1.4231	.70274	1.00	3.8462	.83390	4.00	.000
4.5 The degree to which decisions are consistent with actions for organisational performance measurement.	1.8077	.98058	1.00	3.6154	1.09825	3.00	.000
4.6 The level of management's formal and apparent engagement with organisational performance measurement.	1.7308	.91903	1.00	3.7308	1.15092	4.00	.000
4.7 The level of effective resources management for organisational performance measurement.	1.3846	.85215	1.00	3.0769	1.29377	4.00	.000
4.8 The level of efficient resources management for organisational performance measurement.	1.9231	.93480	1.00	3.0385	1.31090	1.00	.003
4.9 The degree to which resources to embed organisational performance are established.	1.5385	.76057	1.00	3.1923	1.44275	3.00	.000
4.10 The level that resources, means and methods for organisational performance measurement are optimised to attain objectives.	1.6923	.88405	1.00	3.0000	1.41421	4.00	.001
4.11 The level of conformity to the organisation's values and program principles established for organisational performance measurement.	1.5000	.64807	1.00	4.0385	.99923	4.00	.000
4.12 The level of risk management for organisational performance measurement.	1.4615	.64689	1.00	2.8846	1.53172	1.00	.000
4.13 The level of change management processes utilised for organisational performance measurement.	1.6538	.84580	1.00	3.2692	1.31325	3.00	.000
4.14 The level of knowledge management processes utilised for organisational performance measurement.	1.3846	.63730	1.00	3.2308	1.33589	3.00	.000
Section 5: Gervais Systemic Dimension							
5.1 The level of ability to build up resources for organisational performance measurement.	1.6923	1.04954	1.00	3.3846	1.23538	4.00	.000
5.2 Availability of resources and services for organisational performance measurement.	1.7308	1.00231	1.00	3.3846	1.26734	4.00	.000
5.3 Accessibility of resources and services for organisational performance measurement.	1.3462	.62880	1.00	3.3077	1.28901	4.00	.000
5.4 The complementary nature of activities to support organisational performance measurement.	1.6154	.85215	1.00	3.1538	1.46130	4.00	.000
5.5 The level of partnership or engagement with other programs to support organisational performance measurement.	2.5769	1.50128	1.00	3.2692	1.37281	3.00	.076
5.6 The level of partnership or engagement with other organisations to support organisational performance measurement.	1.46130	.97744	1.00	3.0769	1.26248	4.00	.001
5.7 The level of satisfaction with partnership and exchanges that support organisational performance measurement.	1.9231	.93480	1.00	2.9615	1.24838	4.00	.000
5.8 The level to which each party undertakes their role and responsibilities in supporting for organisational performance measurement.	1.5385	.76057	1.00	3.3077	1.31967	4.00	.000
5.9 The level of clarity in relation to organisational performance measurement and how to engage with it.	1.6923	.88405	1.00	3.3846	1.02282	3.00	.000
5.10 The level of collaboration between sections to ensure coordination and transfer of information.	1.5000	.64807	3.00	3.3462	1.19808	4.00	.000
Section 6: Gervais Specific Dimension							
6.1 The degree to which objectives for organisational performance have been attained.	1.4615	.64689	1.00	3.3462	1.32491	4.00	.000
6.2 The quality and quantity of products or services generated from organisational performance measurement.	1.6538	.84580	1.00	2.9615	1.48272	1.00	.000
6.3 The degree of information generated, and use of that information to inform practice, as a result of organisational performance measurement.	1.3846	.63730	1.00	3.3846	1.41639	4.00	.000
6.4 The level of satisfaction expressed by personnel with implementation of organisational performance measurement.	1.6923	1.04954	1.00	3.3462	1.23101	4.00	.000
6.5 The level of perceived value and cost-effectiveness of organisational performance measurement.	1.7308	1.00231	1.00	3.2308	1.42289	3.00	.001

In terms of the NCPI Framework's usefulness there was overall improvement in respondent perception of program utility between pre and post survey responses. Modal score improvement was reported in five of the six utility aspects when comparing pre and post survey results - awareness, belief in current benefit, participation, satisfaction, understanding. The sixth – future potential benefit, remained steady as 'good'. Usability also demonstrated improvement with results increasing by one or more point on the Likert scales in each of the Gervais Program Evaluation Model's five dimensions – structural, operational, strategic, systemic and specific.

One important data variation related to Board member data. Despite reporting overall positivity and a high understanding

of organisational performance measurement, the Board reported the lowest level of positive change at 59% (32 of 54 questions) compared to staff (50 of 54 questions, 98%) between pre-and-post implementation surveys. The Board also reported the highest level of unchanged modal scores from 'unsure' between pre and post surveys (8 of 25 questions, 32%) as compared to by staff (92%) both of which recorded change in questions that recorded 'unsure' in the pre-implementation survey. The Board perceived least change in structural dimension (3 of 8 questions, 38%), specific dimension (2 of 5 questions, 40%) and systemic 326 dimension (5 of 10 questions, 50%). In the other three dimensions, the Board recorded over 70% improved change. In all dimensions, except for one, staff recorded over 80% positive change.

3.2. Qualitative Evaluation Results

Prior to commencement some feedback cited preparedness and skills across the organisation to support OPM as being important. For example:

"Do not assume that every unit, manager, team and individual has the capability to set their own targets. Most need strong leadership and strong guidance to land on the right thing."
(Male, respondent 26, pre survey)

However, the qualitative data validated the quantitative results of the case study organisation's OPM implementation process as participants demonstrated strong awareness of the organisational performance process and were complementary of the usability (functionality / ease of operation) of the NCPI Framework OPM implementation approach and reported a high level of utility (satisfaction) within the implementation process.

Importantly, staff were also able to identify key factors that enabled the OPM implementation process and also shed light on areas of strength and improvement which could improve the NCPI Framework. Further, analysis of the participant data also demonstrated an interrelationship between the NCPI Framework's implementation elements, the participant's perspectives of the key factors that contributed to successful implementation of the OPM process in the case study organisation and the Organisational Learning Theory (OLT) ways of working which create an environment that promotes experience, positive culture, learning and psychological safety. The six themes were clarity, adaptability, alignment, transparent communication, capability and accountability.

Examples of participant feedback include:

"I think that it's really necessary in any organisation to really be able to understand what you're doing as an individual and how that aligns with the you know the overall plan of the organisation."
(Female, respondent 03, lines 11–13)

"Yeah, I feel like that's all really exciting and that helps us focus, focus our resources, focus our money, focus our energies ... you become very invested"
(Female, respondent 14, lines 236–8)

"I now have line of sight across the organisation"
(Male, respondent 13, lines 291–2)

"There have been times to ask questions or put your hand up and say look I can't or I don't understand this or how does that tie in... Also, I don't think it's actually been rushed and it was conveyed slowly and it was implemented really well."
(Female, respondent 05, lines 47–50)

"Tying the organisational goals with the team and individual goals has bought a synergy to the organisation that may have been missing in the past."
(Female, respondent 19, post survey)

"It was mentioned repeatedly and we've been kept up to date with how things are going... that's more important for me than kind of keeping to a plan or keeping to a deadline."
(Male, respondent 01, lines 193–6)

"It's good to finally have something staff performance can be measured against. It's great for accountability."
(Female, respondent 14, post 3 survey)

However not all participants found the approach or alignment trouble-free. For example:

"I felt quite confused by the processes involved throughout some of the process involved. There appeared to be a lack of clarity of the requirements in developing team and individual goals which I found frustrating."
(Female, respondent 46, post survey)

4. Discussion

The study achieved its aim of evaluating the effectiveness of an NCPI Framework informed twelve-month implementation plan to introduce OPM in a non-acute health charity. As outlined in the limitations section, the author's caution enthusiasm as there are limitations to the study design which require consideration, however as the first study to engage a non-acute health charity in OPM implementation evaluation these results have value. The study's hypothesis has been accepted and the null hypothesis to be confidently rejected. The results conclusively demonstrate that the use of a detailed twelve-month OPM implementation plan informed by the NCPI Framework led to significant improvement in the utility and usability of OPM in the case study organisation and positively impacted on the introduction of OPM to that organisation.

Non-acute health charities either under-utilise or under report OPM [12] and there are concerns regarding not-for-profit industry accountability and governance standards [34, 55-56]. This study is significant because it has demonstrated that with the use of an implementation plan informed by the NCPI Framework OPM is feasible for the sector and that the NCPI Framework provides a mechanism for OPM implementation planning. The sector tailored nature of NCPI Framework supports literature that recommends the need for tailored and flexible OPM implementation approaches to suit the nuances of specific industry types, sectors and organisations [18, 37, 57]. This tailored approach may meet

the needs of the sectors leaders [57] and support those calling for more systematic understanding of, and response to, the dynamics of capability and capacity building in non-profit and voluntary sectors [58].

The Board's less positive post implementation responses compared to staff requires consideration. Potentially, the Board is more removed from operational issues such as program management and therefore did not experience the changes firsthand. However, this finding should not be underestimated. Firstly, this study has shown that OPM understanding and engagement can vary across individual participant groups. Individual participant group variations, and targeted engagement mechanisms, are familiar in organisational learning teachings [27]. Therefore, in line with the findings of Chavan [59], this study suggests greater consideration of the specific needs of each participant group within a NCPI Framework informed OPM implementation plan may enhance implementation success. Secondly, NFP charity Boards are responsible for all aspects of their organisation. This includes the design of strategy and sourcing and application of resources to ensure efficient and effective achievement of the organisation's mission [22, 25, 60]. Ensuring the Board's understanding and continued commitment to organisational development and learning initiatives such as OPM is paramount from both long-term strategic and shorter-term operational perspectives. Additional mechanisms specifically for Boards, such as training and communication relating to organisational performance measurement and progress reporting, could also be considered for inclusion within the NCPI Framework.

Other participant feedback that could strengthen the NCPI Framework's impact include: stronger reinforcement of the value of linkage of staff performance appraisal processes to the OPM implementation mechanisms in NCPI Framework Operating Element 4.5; ensuring manager commitment, understanding and delivery capability as leaders and line managers are ultimately responsible for turning organisational vision into concrete operations, building cultures that enable learning and change and supporting their subordinates to be successful [26, 61-62]; and attention to activities that support strong and clear communication regarding availability of resources for OPM implementation to maintain confidence in the implementation process.

4.1. Ideas for Future Research

It may be necessary to consider the NCPI Framework's inclusion within a broader and more comprehensive OPM implementation model. Tactical frameworks have been criticised as being linear checklists and not able to drive the whole-of-organisation experience, culture and learning processes necessary to develop systemic commitment, investment necessary, and renewal in knowledge and behaviour [1, 27, 63]. Such environments require multi-layered implementation models which bring to life the relationship between theoretical reasoning and action through 3 theoretical explanations, guiding principles, tactical frameworks and monitoring processes [1, 29, 63]. The six

themes for OPM implementation success identified in this study - clarity, adaptability, alignment, transparent communication, capability and accountability; could be used as guiding principles in such a model. To change and then maintain the transformational organisational and individual behaviours required to sustain program implementation guiding principles should also be considered [64] as they provide the competency, cultural and leadership building blocks to support practice, organisational and systems change necessary for OPM implementation [64, 65].

While developed to support OPM implementation for the non-acute health charity sector, the NCPI Framework, or a broader implementation model, may potentially have relevance and application for the non-profit industry more broadly. As OPM is still in its infancy within non-profit industry [31] the NCPI Framework could be tested within NFP sectors and organisations outside the non-acute health charity sector. In addition, the themes identified in this paper could also be considered for inclusion within operational frameworks that are developed to support the growth of organisational services and service quality.

4.2. Limitations

This study is limited by the evaluation of the NCPI Framework focusing on a single Australian organisation. While the findings are promising, the NCPI Framework should be tested in other non-acute health charity organisations. Replicability may be hampered by different legislative and governance requirements facing non-acute health charities globally. The reported improvements could have been influenced by participant familiarity with the survey tool post implementation and constructing the survey tool to capture matched data might have assisted in comparing results from existing and new respondents during the implementation period. Expanding future studies to include multiple organisations would enable comparative analysis of results and should be the ultimate aim of future studies. These would be complemented by longitudinal studies to assess whether the introduction of OPM into non-acute health charities impacts organisational performance.

5. Conclusion

Organisational performance measurement (OPM) is a recognised business tool however under-utilised or under reported in the non-acute health charity sector. The Non-acute Health Charity Performance Implementation Framework (NCPI Framework) is the first OPM implementation tool for the sector. The study achieved its aim in that the effectiveness of an NCPI Framework informed twelve-month implementation plan to introduce OPM in a non-acute health charity was evaluated. The OPM implementation plan, informed by the NCPI Framework, was found to have positively impacted the introduction of OPM to the case study organisation and was found to be useful in terms of both utility (amount of user satisfaction) and usability (ease of the system's functionality). It is first

evaluation of its kind for this sector.

Six themes for OPM implementation success were identified by participants in this study - clarity, adaptability, alignment, transparent communication, capability and accountability. These themes aligned with the operating elements of the NCPI Framework and could be used as guiding principles in a more comprehensive implemental model. The participants also identified aspects that could strengthen the NCPI Framework. These included targeted engagement mechanisms for individual participant groups, attention to Board engagement and understanding of OPM plus clear and consistent communication regarding availability of resources for OPM implementation.

The NCPI Framework, or a broader OPM implementation model that incorporates the Framework, may have relevance and application for the non-acute health charity sector or the non-profit industry more broadly.

Ethics Approval

Deakin University Research Ethics approval (HEAG-H 197_2014, approved 28 January 2015).

Deakin University Human Ethics approval (HEAG-H 89_2017, approved 25 July 2017).

Conflicts of Interest

The authors declare that they have no competing interests.

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