

ICL
Pathway

Audit of Customer Service

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Abstract: This report documents the outcome of an internal audit of Customer Service conducted during April 3rd and 4th - 2000.

Status: APPROVED

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0 Document control

0.1 Document history

Version	Date	Reason
0.1	10/04/00	First internal draft for comments
1.0	17/04/00	Raised to Issue status following presentation to CS Management Team by B. Parker 14/04/00.

0.2 Approval authorities

Name	Position	Signature	Date
M. Bennett	Director Quality & Risk		

0.3 Associated documents

	Reference	Vers	Date	Title	Source
[1]	AUD/3/4/13	1.0	02/02/00	Audit Terms of Reference	PWAY

0.4 Table of content

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1 Introduction

The purpose of this audit was to review the activities and operation of ICL Pathway Customer Service, with particular regard to their key management processes. The plan was agreed to include all aspects of the following activities and their key interfaces with other operations:

- Incident Management & Problem Management
- Business Incident Management
- Change Management - Release Management
- Change Management - Reference Data
- Operational Test

Within each of those processes to take a closer look at key management aspects that are present :

- Escalation
- Reporting
- Root Cause Analysis (where appropriate)
- Service Improvement

2 Scope & Conduct

Formal Terms of Reference, reference AUD/3/4/18, were provided at a pre-assessment planning meeting, together with a Customer Service Organisation Chart and copies of the following related procedures:

CS/MAN/002 - version 3.0 - Support Services OM

CS/MAN/003 - version 3.0 - Operational Services OM

CS/MAN/005 - version 3.0 - Infrastructure Services OM

CS/MAN/006 - version 3.0 - General Information OM

PA/POL/002 - version 1.2 - Quality Management System

Note: The procedures seen often repeat sections of text and flowcharts. For example, CS/MAN/002 Appendix A.3 - Support & Release Management Process is the same as CS/MAN/003 Appendix A but this is a later version. It will become a difficult, unnecessary and labour intensive task to try to keep all these documents aligned, particularly as they have different owners.

The requirements expressed in PA/POL/002 Version 1.2 Dated: 28/02/00, which conforms to the requirements of BS EN ISO9001:1994, were used as a basis for the work.

The audit was carried out by Brian Parker, Group HQ Q&BE - Programme Manager - Process Management who also produced this flowchart to aid his understanding of the end-to-end process. A modified version, correcting any misconceptions, would form a sound basis for an electronic QMS in line with corporate strategy. This is shown at Annex B.

The audit consisted of interviews with:

- Paul Curley, Service Mgr responsible for Incident and Problem Management;
- Richard Brunskill, responsible for Business Incident Management;
- John Wright, Service Manager - Change Management, for Release Management;
- Dave Wilcox, Reference Data Management;
- Pat Lywood & Denise Morris - Operational Test Management.

All staff seen were most co-operative and they have my thanks for their support and hospitality.

The relevant procedures were tested during the implementation of the plan and the results are included in the management summary.

3 Management Summary

There is a rota for the role of Duty Manager whose responsibilities include the appointment of a Problem Manager where the situation warrants one. The Duty Manager function was not included in the scope of this assessment but has a significant impact on the management of a problem as described later.

3.1 Incident & Problem Management

The role assessed was that of Service Manager whose task is to ensure that high priority incidents and problems are resolved within the required time and within SLA, whose key resources are the virtual team of Problem managers. This is a relatively new role and the majority of effort is currently dedicated to 'A' & 'B' priority calls.

An **Incident** was defined as "An occurrence during normal operations that has been reported to the ICL Helpdesk".

A **Problem** was defined as "A significant problem or trend" where significant can mean an incident of 'A' priority; money related; adverse effect on service

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levels; business continuity; penalty clause may be invoked. (Measured as throughput, ICL to counter/client.)

There is a continuous monitoring of volume and progress via the PinICL and Problem Management databases.

A key measure is achievement of Action Date and any slippage is progressed on a one-to-one basis. These one-to-one interviews are not recorded so trends and individual performance cannot be assessed.

There is a formal weekly review at which trends and hot spots are discussed. These are minuted and actions progressed.

The appointed Problem Managers also have a variety of day jobs and associated skills and tend to operate to the style most familiar to them, achieving the desired outcome in a variety of ways.

There is an opportunity to identify who has the most effective working practices and adopt them as common practice.

The Service Manager is developing a common check list to include, reporting, resolution and escalation routes. An early draft was seen during this assessment.

Trend analysis.

There is a pack of standard reports, produced monthly by MIS, that show the analysis of closed calls by outlet, long outage etc as part of the contractual agreement with POCL.

There is no evidence of preventative action resulting from the information provided in the standard reports.

E.g. Belfast outlet shows a call rate that is above the threshold and the reason is still being sort.

The stated intent to design reports specific to problem management, that will include a 'traffic light' system of exception reporting allowing available time to be focused where most needed, should be pursued with urgency.

The Service Management process is not described in any of the procedures seen.

3.2 Business Incident Management (CS/MAN/005)

The Management Support Unit are tasked with the resolution of Business Incident.

A Business Incident was defined as any sot transaction failure due to a mismatch between information held in different parts of the Pathway system and cause financial irregularities.

The process followed by the MPU is broadly described in CS/MAN/005.

The trigger for the start of this process is the daily report from the EPOSS & APS systems, delivered electronically to Pathway Customer Service via a secure system. The Pathway SSC extracts these reports and Email to the MSU. This dependency is not included in CS/MAN/005 - 4.3 EPOSS & APS reconciliation or CS/MAN/002 - 4.0 System Support Centre procedure.

Detailed procedures for Business Incident Management were not available but are planned for completion by mid-April.

Note: Printing an extract from CS/MAN/005 resulted in the paragraphs being renumbered.

Examples were seen of reconciliation errors caused by reference data errors, where the data available at the outlet does not match the POCL master reference system. Since POCL provide the reference data in the first place, and having examined the rigorous pre-release test criteria for updates to reference data that includes confirmation by POCL, it was difficult to see how this could happen.

The root cause analysis should include a supplier assessment of the POCL reference data validation process.

ICL also appears to be responsible for identifying the cause of a large number of incidents with no control over the cause.

POCL provide corrections direct to the end user. How the POCL, ICL Reference Systems and the Outlets all stay in sync was not determined.

The success of this task is dependent on the skill and tenacity of the team. The records of training provided and skill levels achieved were not available as required by ICL's Performance Plus process.

3.3 Change Management - Release Management

Deirdre Conniss was unfortunately not available on the day and John Wright kindly deputised.

The software aspect of Release Management process is included in CS/MAN/003 - 5.1. Change requests are considered weekly by the Release Management forum, a formal review group. These sessions are minuted and actions emerging are progressed. Decisions to proceed with a software change result in an authorisation for Development to design a fix. Where there is a greater urgency that cannot be held until the next weekly review then there is an escalation route to fast track the problem

Reasons for not proceeding are also identified and agreed with POCL

Fixes received from Development result in an Authorisation to Test which is then routed to the OTT.

Reference Data release is included in CS/MAM/003 - 5.2 and CS/PRO/081

Control of release is via the RDMC workstation. The type of data change required determines priority. Change requests in the pipeline are identified as ready for release by the change of status. When final validation is confirmed by POCL, status is changed to '8' which authorises others to distribute.

Overall, this is a well known and secure process although not all operatives are familiar with the supporting documentation.

3.4 Change Management - Reference Data (CS/MAN/003 - 5.2)

Reference Data was said to include system changes such as new screen buttons as well as data related to products and prices.

The bulk of data is received electronically from the Ref. Data Mgt Centre - Bootle (RDMC) but can also be by Email or telephone.

This operation is supported by detailed procedures such as Cs/PRD/030 V1 and CS/PRD/058 V3 - Lead times.

The process for evaluating achievement of POCL targets is under development.

The emphasis is on getting data released to the outlets when it is required rather than to the published measures of turn-round times.

A number of reports of achievement were seen. An RDORF report for February 2000 shows an average detected error rate of 29% of data received from POCL

All errors are returned to POCL for correction. The corrected data then follows the same validation route. There is no indication of what percentage of the reworked data fails these second or subsequent checks. It is not possible at this stage to determine if all product codes being released are included in POCL's own systems used for reconciliation purposes. (see **Business Incident Management**).

Although the Reference Data Failure/rejection process is well understood by the Reference Data team, it is not included in any flowcharts or documentation seen.

There are a number of instances where the expected turn-round times have not been met (approx 2%). A preliminary analysis of the cause of late deliveries forms part of the standard report.

The final confirmation that the new data can be released is by Email from POCL. These confirmations should be kept for a defined period in case there should be a dispute.

3.5 Operational Test Team

Operational Test receives an "Authorisation to Test" from Release Management database which is monitored daily by the OTT Manager.

Work packages, and their urgency, are identified and allocated to a daily work schedule. The history file is used to recreate the original problem on the test rig.

A Test Script is produced based on the original problem and the nature of the solution. This script is later filed so that the exact test sequence can be repeated if necessary.

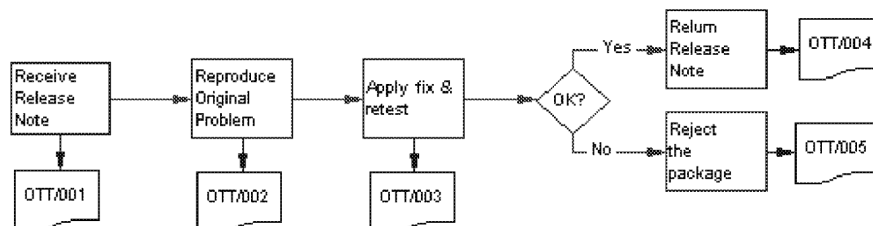
OSD are then authorised to apply the fix to the test rig and all tests are carried out again to confirm that the fix has been successful and that there are no other adverse effects.

When all tests are successful the Release Note is returned to Release Management.

There were no work instructions for configuring the test rig, pre-testing or for rejecting a work package should the tests fail other than the overview in CS/MAN/002 - 5.0.

Operational Test are developing a set of short but succinct set of work instructions that describe how each operation is to be performed. It would be easier to demonstrate their completeness if a simple flowchart were used to structure the material. It would then be a simple task to present this electronically with hyperlinks to the appropriate work instructions.

e.g.



Delivered Quality - OTT are tasked with carrying out random samples of hardware as an ongoing check of delivered quality. This activity, and what happens with results, is not recorded in procedures seen

4 Detailed Observations

4.1 Current documentation

The QMS procedures seen were the top level documentation appropriate to the operations being audited and are part of a centrally controlled library (PVCS?). There is no indication on the hardcopies seen for how they would be updated with more recent issues and they therefore appear to be uncontrolled once printed. If there is a distribution control it was not evident, if there is not then all hardcopies should be clearly marked:

Any hardcopy of this document is NOT UNDER CHANGE CONTROL unless otherwise stated. (see Group/Q&BE/03 on Café Vik)

There are instances where the procedures describe the core flow of a process but not what happens when a decision or test fails.

4.2 Process improvement

The following opportunities for improvement were identified and discussed during this audit.

- Identify which Problem Managers have the most effective working practices and adopt them as common practice.
- Structure management reports to provide exception reporting, providing focus on the failing areas most in need of attention/improvement.
- Consider agreeing a supplier assessment of POCL to find out why, after all the rigorous pre-release testing, Reference Data team find 30% errors and reconciliation failures occur on validated data.

4.3 Training and skills records

No training or skills records could be shown in areas where the success of the operation is dependent on the skill and tenacity of the team. The records of training provided and skill levels achieved are a requirement of ICL's Performance Plus process, PA/POL/002 - section 3.18 and BS EN ISO9001 section 4.18.

4.4 Quality Management System

The sections of the QMS seen were loose hardcopy procedures that could not always be easily located when required. Staff were aware of the central library but seemed reluctant to use it.

There is an opportunity to structure the QMS around a top level flowchart with hyperlinks to the appropriate procedures, all being available on line. The source document could still be held centrally if required. Staff interviewed said they were more likely to use this type of system than a paper version.

The recommended style for such a system is held on Café Vik/Quality & Business Excellence/QMS at:

. <http://www.cafevik.icl.co.uk/Howto/pmm/pmm6.htm>

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5 Annex A Terms of Reference

ICL PATHWAY : Internal Audit : Terms of Reference

AUDIT TITLE : Audit of Customer Services management Processes

File Reference : AUD/3/4/18

Date : 14th March 2000

Aim

1999 saw a major audit into Customer Services and its readiness for the increased workload and responsibilities placed upon it by National Roll Out. A report (IA/REP/011) was issued in March 1999 and all Corrective Actions identified in the CAP (IA/CAP/004) closed down during Q1/2000.

The Internal Audit Plan for 2000 has identified a need to conduct an audit of the management processes in place in Customer Services paying particular regard to escalation, reporting, root cause analysis and service improvement. Pathway's own ISO Certification programme also requires that CS undergoes a more general audit of its processes. It was decided to combine the two audits into a single piece of work.

The quality requirements expressed in ISO9000 : 1994 will be used as a basis for the work.

Objectives

1. To review the activities and operation of ICL Pathway Customer Services with particular regard to their key management processes :
 - Change Management
 - Problem Management
 - Incident Management
 - Operational Test
2. Within each of those processes to take a closer look at key management aspects :
 - Escalation
 - Reporting
 - Root Cause Analysis
 - Service Improvement

Dates

The audit will commence in March with completion and draft report production and circulation targeted for mid to late April. A final report will be issued by Friday 21st April.

Audit Resources

The audit will be conducted by Jan Holmes, Pathway Audit Manager on behalf of the Internal Audit Committee, ICL Pathway.

Reporting

The report reference is IA/REP/025.

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At the conclusion of the audit a draft report will be produced and discussed with the auditees. A final report will be produced and distributed to the Director and Senior Managers of Customer Services, as well as the Managing and Deputy Managing Directors.

Further distribution will be at the discretion of the Customer Services Director.

Based on the report content a series of Corrective Actions will be agreed and documented in a Corrective Action Plan. This will be issued and the agreed actions monitored on a regular basis.

TOR Distribution

Mike Stares	:	Managing Director
Mike Coombs	:	Deputy Managing Director
Martyn Bennett	:	Director of Quality and Risk Management
Stephen Muchow	:	Customer Services Director
Alec Nicholson	:	ISO Co-ordinator (for further distribution within CS)

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6 Annex B Proposed Process Model

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