

ICL  
Pathway

*Audit of Customer Service Support  
Processes*

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Abstract: This document presents the results of a planned audit into the processes used to capture, manage and resolve Horizon incidents, problem, complaints and alerts.

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*0 Document control**0.1 Document history*

Version	Date	Reason
0.1	24/10/01	First internal draft for comments
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*0.2 Approval authorities*

Name	Position	Signature	Date
S. Muchow	Managing Director		
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*0.3 Associated documents*

	Reference	Vers	Date	Title	Source
	GHQ/LPD/PATH/ 1508		15/08/01	ICL Assessment Report	ICL Gp

*0.4 Abbreviations*

Acronym	Meaning
RCA	Root Cause Analysis
HSH	Horizon System Helpdesk
NBSC	National Business Support Centre
BSI	British Standards Institute
PON	Post Office Network
UKSS	United Kingdom Support Services
CS	ICL Pathway Customer Service

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## *1    Introduction*

The capture of Incidents, their potential progress as Problems, handling of Customer Complaints, raising of Divisional and/or Corporate Alerts and the subsequent disposition of the original event are vital Customer Service activities. Failure in part or in whole to manage these activities can result in reduced levels of customer satisfaction and wasted effort through handling repeated events and not dealing with the root causes of the original event.

## *2    Scope & Conduct*

The scope of the audit was defined in formal Terms of Reference, issued by Pathway IA in October 2001 and presented at Annex A to this report.

The audit was included in the 2001 Internal Audit plan and agreed during Q1. However, this area of Customer Service had been subject to assessment by BSI in February, ICL Group in August and was to be re-visited by BSI in November. Under the circumstances it was decided to limit the audit to a review of current activity and how the observations and non-conformance raised during the ICL Group assessment was being handled.

The audit was conducted during May and June 2001 by Jan Holmes, Quality and Audit Manager, ICL Pathway. The help and co-operation of all members of staff interviewed is appreciated.

### 3    *Management Summary*

#### 3.1   *Overall Opinion*

The overall opinion formed is that the management of Incidents, Problems, Complaints and Alerts by Customer Service has reached a level of maturity where consistency is now the norm, levels of customer satisfaction are good, but there is a risk that complacency could begin to creep into the work. It is pleasing to report that the audit did not find any evidence of this and initiatives and appointments are in place to provide improvements to the processes to the benefit of Pathway and the customer.

There are a number of relatively minor issues that, while not impairing the current management of incidents and problems could, if accepted and addressed, improve the performance of this part of CS. They are :

1. Provide a definition and guidance for when an incident should be escalated to become a problem (Para 4.1.1).
2. Introduce formal Root Cause Analysis into Problem and Complaints management as a matter of course. This is already being addressed within CS. (Para 4.1.2 and 4.2.3).
3. Increase the scope of the Problem Manager's review remit to include Complaints (Para 4.1.3).
4. Consider benchmarking the complaints received about the Horizon System Helpdesk against similar operations either run by ICL for other customers or externally (Para 4.2.2).
5. Upgrade the current freestanding Complaints database to be more than just a recording mechanism for complaints received (Para 4.2.3).
6. Ensure that complaints handling in CS meets the criteria announced in the revised Customer Satisfaction Corporate Policy and the need to record all complaints on a central database (Para 4.2.4).
7. Undertake a major review of the considerable wealth of documented policy, process, procedure and other items that exists for these areas of CS's work (Para 4.4).

#### 3.2   *ICL Group ISO Assessment*

One of the recommendations in the August ISO Assessment report was that a detailed review of the related (Incident, Problem, Complaints & Alerts) processes was undertaken to seek efficiencies in their operation and handling of report data. That work was to have formed a major part of this audit. However, a Problem Manager has

been newly appointed and has a key objective of undertaking a full review of the Problem Management process, making recommendations for improvements and implementing the changes to the benefit of both Pathway and PON.

A copy of the review report was obtained and the results indicate that it was thorough, had uncovered all of the issues identified in the ICL Assessment report and others besides, and had a comprehensive approach to dealing with them. This included the development of a dedicated Problem Management database that would remove completely the manual interventions and data handling that was the cause of the Observation.

During August, ICL Group Quality conducted an ISO Assessment and identified a number of issues within Problem Management, raising 1 Observation and 1 Non-conformance. The final report can be found on the Assessment Database at Content Viewer /scripts/custom/assessors/index.asp using the Report reference GHQ/LPD/PATH/1508 as the search criteria. The opportunity was taken to consider each of these during the audit and both have now been closed on the formal assessment report as a result.

## 4 Detailed Observations

### 4.1 Incident & Problem Management

The underlying organisation for managing Incidents and Problems was explained as was the escalation route whereby an Incident, as reported to the Horizon System Helpdesk, becomes a problem following a decision by the Duty Manager. Both Incident Management (CS/PRD/074 V1.0 dated 13/11/00) and Problem Management (CS/PRD/021 v3.0 dated 13/11/00) processes are published on the Pathway BMS although the relative ages of the documents suggests that a review may be appropriate to take into account any operational changes made or identified shortcomings (See Section 4.4).

#### 4.1.1 Definitions and Criteria

It is not easy to identify what constitutes a 'problem' and when an 'incident' becomes a 'problem' within these process. CS/PRD/021 does not provide any clear definition nor are examples offered for guidance. The audit has identified that guidance on what constitutes a problem does exist although it is not easily associated with the Problem Management Process which is where initial guidance would be sought.

*Although relatively trivial the lack of guidance or definition can introduce uncertainty and the opportunity for 'problems' to be missed or unnecessarily escalated. It is*



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*recommended that CS/PRD/021 is updated to provide definition criteria and, if considered useful, examples.*

#### 4.1.2 Problem Root Cause Analysis

CS/PRD/021 also introduces the concept of Root Cause Analysis for problems although again, no guidance or examples are provided. No evidence of completed RCAs could be identified.

*It is recommended that RCA guidance is provided, either in CS/PRD/021 or in a stand alone procedure.*

#### 4.1.3 Problem Manager

CS have recently appointed a Problem Manager whose primary objective is to consider the current approach to problem management, including the problem database, and make recommendations for improvements. He is also responsible for the problem management service. His initial review work resulted in a report that identified a number of areas for improvement, including the development of a replacement Database more appropriate to problem management. He also identified that Pathway lacked a formal problem management method and root cause analysis was weak or non-existent. It is anticipated that most, if not all, of the observations raised in this report will eventually be addressed by the work being undertaken by this role.

His remit is currently limited to problem management and he does not anticipate incorporating complaints in the short term. The difference between problems and complaints is not significant and the methods of dealing with both are essentially the same; receive, analyse, investigate, resolve, report and review.

The audit has identified shortcomings with the current complaints database and given the similarities between the two considers that there is benefit by increasing the scope of the new Problem Database project to include Complaints. Given that the Problem Manager is currently preparing the User Requirements now would be an ideal time to bring Complaints into scope.

*It is recommended that the scope of the Problem Manager responsibilities is increased to consider complaints handling and the complaints database.*

## *4.2 Customer Complaints*

### *4.2.1 Sources of Complaints*

These are complaints raised against ICL Pathway or the Horizon system by PON, Post Masters or members of the public.

Complaints can be received from a number of sources, NBSC may email complaints, generally about the HSH, that they have received from Post Masters. The HSH may themselves generate a complaint where it is clear that a complaint is being made, UKSS engineer visit cards may also contain feedback that is deemed to form a complaint and finally complaints may arrive via letter to ICL or via icl.com.

Each complaint receives a standard acknowledgement letter within 24 hours of receipt although it is recognised that each complaint is potentially unique and investigation and resolution is case based.

The largest proportion of complaints are initiated by the NBSC and are usually complaints about the HSH, either quality of advice provided or attitude, and these have to be investigated and reported on within 5 working days. NBSC generate a response letter to the complainant based on the resolution information provided by Pathway.

Where HSH field a complaint call they attempt to deal with it as part of their 1<sup>st</sup> line support responsibilities. If they cannot do this they are referred to CS for action. HSH provided resolutions are reviewed by CS and a monthly report produced and placed on the CS Website.

### *4.2.2 Measures and Reviews*

Procedure CS/PRO/116 v2.0 dated 31/01/01 identifies a number of measures that are used to demonstrate the effectiveness of the Complaints process and the main one of these, the weekly trend report is posted on the CS Intranet as a rolling 13 week report.

There is a hierarchy of review meetings between HSH and the NBSC, HSH and ICL Pathway and finally ICL Pathway and PON where complaints and their resolution are regular agenda items. Meetings are minute and actions taken and progress reviewed.

The August 2001 Report from NBSC indicated that the number of HSH complaints had reduced to 59 from July's figure. While this may be a good result in terms of the number of calls overall that the HSH receives but there does not appear to be any comparisons being made to similar organisation or to industry norms.



*It is recommended that external benchmarking is considered to test the effectiveness of the HSH, with particular regard to complaints raised about it, and for an improvement plan to be put in place if the comparison is unfavourable.*

#### **4.2.3 Complaints Database**

All complaints are logged onto a Complaints Database. There is no auto-prompting when complaints are overdue and it is not possible to search for complaint by anything other than FAD code or Outlet name.

There is little evidence of any Root Cause Analysis of complaint resolution being conducted and this may be due in part to the difficulty in analysing the Complaints database, for example to provide lists of particular complaints type, or Outlets that might be making more than the expected number of complaints.

*It is recommended that consideration be given to upgrading and improving the Complaints Database, either independently or as part of the broader Problem Database currently under development, to allow for overdue prompting and more effective search and analysis of complaints data.*

*It is recommend that effective Root Cause Analysis is undertaken where it is clear that trends of complaints, either by type or Outlet frequency (or other criteria) suggest that this is required.*

#### **4.2.4 Corporate Customer Satisfaction Policy**

During the audit Group Quality announced a revision to the Corporate Customer Satisfaction Policy. One of the changes was to introduce the mandatory registering of all customer complaints onto the Customer Satisfaction Support System (CSSS) via Café VIK.

The policy now states that “Every qualified customer complaint, verbal or written, must be logged on the Customer Satisfaction Support System (CSSS).”

*It is recommended that CS Complaints Management confirm whether the ‘complaints’ handled as such by Customer Service are deemed to be complaints as defined by the new Policy. If they are appropriate steps to enter them onto the CSSS should be taken.*

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### 4.3 Alerts

There are no Alerts currently in force either initiated by Pathway or initiated by others against Pathway. However, the audit has identified elsewhere that the criteria and rules around escalating a Problem to the state of being an Alert is by no means clear and should be reviewed for clarification.

### 4.4 Documentation, Process and Procedure

The audit identified that there is a significant amount of documentation that describes roles and responsibilities, process, procedure and organisational interfaces around the areas of Incident, Problem, Complaints and Alerts. Those identified were :

Reference	Title	Vers	Date	BMS?
CS/PRD/074	Incident Management Process	1.0	13/11/00	Yes
CS/PRD/021	Problem Management Process	3.0	13/11/00	Yes
CS/PRO/063	Problem Management Procedure	1.0	30/01/01	Yes
CS/PRD/081	Customer Complaints Process	1.0	05/09/00	Yes
CS/PRO/116	Customer Complaints Procedure	2.0	31/01/01	No
PA/PRO/013	ICL Pathway Complaints Process	1.0	10/01/01	Yes
CS/PRD/093	ICL Pathway Divisional Alert Procedure	0.1	15/02/01	No
CS/IFS/008	ICLP/POCL Interface for Problem Management	0.3	04/09/00	No
CS/IFS/009	ICLP/OSD Interface for Problem Management	0.3	04/09/00	No
CS/QMS/002	ICL Pathway CS Process Manual	1.0	16/08/01	Yes
CS/QMS/005	ICL Pathway CS Operations Manual	2.0	24/01/01	Yes
CS/PRD/032	Cross Domain Problem Prioritisation	0.6	Withdrawn	No
CS/FSP/005	HSH Incident Prioritisation	1.0	07/11/00	No

It was not possible to conduct an exhaustive review of all of these documents in the allotted time but some key points that have been identified are :

The criteria for raising a Corporate or LPD Alert are not defined nor is there a procedure that describes how to raise one. CS/PRD/093 refers to ICL Pathway in a Divisional sense and is out of date.

Information that is important at one level is hidden at another. For example, there is little in the way of guidance as to what constitutes a Problem in the Problem Management Process or Procedure yet CS Operations Manual Para 4.1.5 is entitled Deciding Whether a Problem Exists.

CS/PRD/032, marked as Withdrawn in PVCS is referenced within ?

The 2 interface documents, both referenced in a number of other documents, are not Approved and date back to September 2000.

*The hierarchical approach to the documentation with manuals leading to processes leading to procedures results in duplication of information that has to be kept aligned as processes and procedures mature. The relative age of all of these documents suggests that their end-to-end integrity may not be intact. It is recommended that this entire 'family' of documents be reviewed and, where possible, the structure simplified.*

## 4.5 Review of ICL Assessment Observations

The August assessment by ICL Group identified 1 Observation and 1 Non-conformance against Problem Management.

### 4.5.1 Excessive Manual Intervention

This observation criticised the complexity of the process for sharing problem progress data with the customer. This is due to the use of PinICL for the problem database and the need to manually strip PinICL admin details and edit content before making it available to the customer on a completely separate database. This will be removed once the new PM Database is in place. The assignment of resource to this activity, confirmed during the audit, and the appointment of the Problem Manager, is sufficient evidence to allow this item to be closed.

### 4.5.2 Problems Not Reviewed for >1 Month

This non-conformance was against a documented requirement to review, and by implication update, open problems on a weekly basis. The audit found that the limitations of the Problem Database means that problems that are in a monitoring state cannot be marked as such and appear to be open and active, thus inviting a weekly update. This is nugatory work and will not be required once the replacement PM Database is installed and appropriate codes are available. A short-term response suggested by the Problem Manager would be to insert a message into this type of problem to have the effect of suspending the weekly review for that problem until a specified future date. The combination of the short-term suggestion and the long term PM Database replacement is sufficient to allow this item to be closed.

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**Annex A – Audit Terms of Reference**

<b>ICL PATHWAY</b>	:	Internal Audit	:	Terms of Reference
<b>AUDIT TITLE</b>	:	Audit of CS Customer Support Processes		
<b>File Reference</b>	:	AUD/3/4/33		
<b>Date</b>	:	<b>3<sup>rd</sup> October 2001</b>		

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**Aim**

In 1999 a major audit of Customer Service and its readiness for the increased workload and responsibilities placed upon it by National Roll Out was conducted. In 2000 a further audit was conducted into the management processes utilised by CS. The August 2001 assessment by ICL group, while praising CS customer satisfaction processes and measures, was critical in the area of problem management and the interface to complaints.

The Internal Audit Plan for 2001 has identified a need to conduct an audit of the customer support processes in place in Customer Service paying particular regard to process linkage, escalation to Divisional and Group alert processes, analysing and reporting, root cause analysis and service improvement.

Technical aspects of support, the SMC, SSC and 4<sup>th</sup> Line will not be included in this audit but will be covered in a separate review to be carried out during November.

The quality requirements expressed in ISO9000 : 2000 will be used as a basis for the work.

**Objectives**

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

**Dates**

The audit will commence w/c October 15<sup>th</sup> with completion and draft report production and circulation targeted for end October. A final report will be issued by Friday 2<sup>nd</sup> November.

**Audit Resources**

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

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**Reporting**

The report reference is IA/REP/037. The CAP reference (if one is required) is IA/CAP/037.

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 Service, as well as the Managing and Programme Directors.

Further distribution will be at the discretion of the Customer Service 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**

Stephen Muchow :	Managing Director
Peter Jeram :	Programme Director
Martin Riddell :	Customer Service Director
Alec Nicholson :	CS DQR (for further distribution within CS as appropriate)
Paul Westfield :	Infrastructure Services (Problem & Incident)
Dave Law :	Strategic Services (Complaints, Incident & Alerts)
Julie Welsh :	SS (Complaints)
Eric Hillier :	IS (Problem Management)
Peter Burden :	Operational & Support Services (Problem)