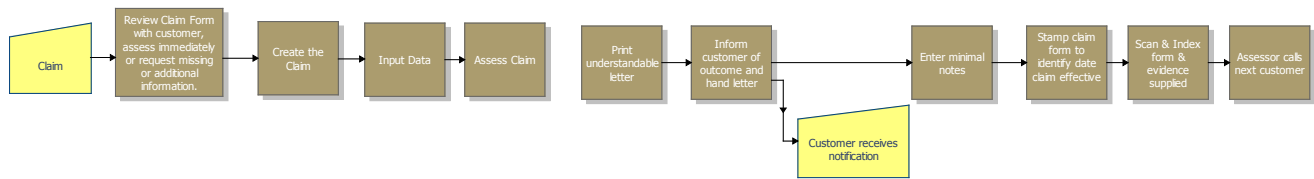




- A 'To Be' design workshop challenged staff to improve the current process by finding ways to reduce non-value adding activities (the different types of waste created within the processes). Evaluating the current effectiveness of the housing benefits value stream (the end to end process of meeting customer requirements).



- Piloting of the new processes which involved preparing work areas using 5S and visual management tools and techniques (assessing the quality of the physical environment which the benefit assessors work).
- Roll out of the new processes across the remaining benefits teams following a review of the pilots.

## FROM POSSIBILITY

Customers can submit their claims in several ways;

- Via the post
- Via the customer service centre in person
- Via a third party partner such as housing letting agencies

The customer service area where customers can visit the council and discuss their claims with a trained housing benefits officer. It was the staff view that customers seen personally by a trained assessor received a better service. They felt the customers and assessors benefiting from the face-to-face interaction giving opportunity for immediate clarification of any areas of ambiguity that might otherwise put a hold on the claim being assessed. Due to high volumes they had moved to a two tier system where new claims are checked by Tier One staff who have only received training in determining the completeness of the form. To this end all assessments were made by assessors at their desks and remotely from the customer service area and customers themselves.

## Outputs from the diagnostic workshops

The main outputs of the diagnosis and design workshops were new processes developed using key Lean principles such as Just-in-time, Standardised Work and 5S Visual Management to improve flow, reduce handoffs and waiting time.

The diagnostic identified many issues including;

- Large amounts of the benefit claim forms are submitted without containing all the information required to adequately assess the claim
- Additional correspondence with customer due to incorrect or incomplete request for additional information
- Customers contacted several times to request further information creating additional delays in receiving a decision
- Despite being a 'paperless' office many scanned images having to be printed to enable assessor to read data required to assess due to poor quality of scanned images
- Productivity system that allocates points for certain tasks outside of assessing the claim (i.e. writing an internal memo). This encourages assessors to generate additional documents to score more points and meet their targets.
- Managers time is spent distributing and redistributing work to officers
- Data is only available retrospectively making it difficult to understand issues that have impacted upon productivity and prevent reoccurrences in the future

## TO ACTUALITY...

### Getting it right first time

One of the key issues was the lack of data initially received on or with the claim form. An easy solution to address this in the customer service area was for trained officers (tier two) to take receipt of the claims. This allows for the forms to be scrutinised by the person making the assessment and still with the customer available to answer any additional questions there and then. This was then taken a step further with assessors being able to not just take receipt of the claim form and supporting evidence but to also assess the claim immediately if all information had been provided.

This removes the need to place such reliance on the quality of the scanned images as the assessment is made using originals provided by the customer. Scans are merely a record for audit purposes.

Another crucial element was to review the activities undertaken alongside the assessment viewed as non-value adding such as generating input sheets and duplicating data already held within the system.

These changes were captured in simple standard work instructions to ensure all assessors had a common understanding of how the process had changed.

All these changes were designed to ensure unnecessary customer contact is reduced by getting it right first time and to reduce the overall throughput time to deliver decisions to customers as swiftly as possible.

The pilot is still running but **benefits are already evident;**

**Customer satisfaction** - anecdotal data suggests customers who have received immediate decisions relating to their new or ongoing claims are firstly surprised and the appreciative of having an outcome there and then.

**Staff morale** - officers have expressed a sense of satisfaction when undertaking assessments with the customer there and then and enjoy doing the process end to end.

**Right first time** - reduction has been seen in the number of documents being pended showing that more claims are assessed at first point of contact with customers.

Managers have found it easier to manage work using team work trays and given them greater visibility of work outstanding. Throughout the day managers can visibly see the work reducing and use this data dynamically on the teams information centre (visual communications board in work area) to feedback progress to staff in a timely manner. This allows the team to adjust proactively to problems impacting productivity.

The teams are in the process of assessing the success of the pilots and planning for the roll-out across all other assessment teams. Watch this space to catch-up with the team following roll-out and final analysis of savings.



## FURTHER INFORMATION

If you would like to discuss this article, or would like any further information, please contact us at [seriousfun@ad-esse.com](mailto:seriousfun@ad-esse.com).

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