

Rationing IT services - from problem management to customer management.

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A significant problem faced within IT service department concerns the rationing of resources and the prioritizing of customer needs. The following article proposes a model for how this might be done.

With the increasing reliability of computer hardware and, to a lesser extent software, more of the problems faced by arise from customer difficulties, issues with training and concerns with how the customer is using the IT system. An understanding of problems requires more and more an understanding of the customers. Perhaps our focus should move from problem management to customer management.

Rationing decisions should be made on the basis of a wide variety of information concerning the internal customer, their role in the organisation and the service. A rationing model should be based on three groupings of information.

Firstly, information should be gathered by the IT services about the internal customer. We should understand their role in the organisation, the tasks they undertake, the assets they use, the business or service processes they are involved with and the training they have. Internal customer information should also indicate if the customer uses a proxy, for example, senior executives may request IT services through their personal assistants. This information provides the detail for establishing what services the internal customer might require and how the customer is involved in the delivery of organisational services. Consequently, some overall judgement of the value to the organisation of prioritising the customer's service request may be made.

Secondly, a detailed service catalogue should be maintained. The service catalogue defines each IT service available to employees. It provides a description of the service, the service levels that may be expected, who the service is aimed at, what costs are associated with the service, and how and when it can be delivered. The service catalogue is, in essence, a portfolio of available services. It contains the service level agreements and may be used by customers to select which services they need to achieve their business purposes. It enables some standardisation of the service and provides a vehicle for setting customer expectations. The service catalogue will also identify who is responsible for the service and what escalation routes are available in the event of non-delivery.

The third element of the internal service rationing model links together the internal customer information and the service catalogue. In acute medical care, a profile of care defines how a patient with a particular condition should be treated. It defines what interventions and procedures are required, what complications might be expected and what level of nursing intervention is required. The profile of care is generally defined by the clinicians for a particular condition. It is then tailored to a particular patient. I would suggest that IT service profiles of care should be established that define service levels, actions to be taken, priority, escalation and expectations for a particular service delivered to a particular internal customer group. Internal service profiles of care may be pitched generically for the service and customer group or customised to specific

customers. Reference to the profile of care for a service will make it clear what the priority is for a particular customer to receive a service.

Thus the model for rationing internal services involves using information on the internal customer and the internal service to generate a profile of care. In acute hospitals, profiles of care are agreed by clinicians, through a process of developing a consensus. They are based on past cases and outcomes. They are also regularly reviewed in the light of new experience derived from recent cases. IT service profiles of care may then be developed through agreement between the internal customer or customer group and the internal service provider. The process of developing the consensus will generate debate as to the contribution of the internal service to business value. Whether the contribution is determined in bottom line financial terms or is defined more in terms of intangible benefits may depend on the internal customer group and the outcomes of the profile of care development process. It is important to note that such a process engages the internal customer in debate and may develop a greater understanding of the business benefits of an internal service. It also ensures that priorities are planned ahead of requests for services.

The development of a pool of internal customer information, a service catalogue and a series of profiles of care provides the basis for a rationing process which prioritises calls automatically according to the profile of care. Internal service profiles of care may start off being very simple and generic and may be developed as business understanding of the internal service increases. Profiles of care are not static documents, but dynamic documents which reflect current understanding of internal service value.

Internal service rationing process.

Once internal service profiles of care are established, a rationing process can be implemented, possibly supported by an information system which maximises the business benefit of the internal service to its customers and minimises intervention.

The request for a service, in this case IT helpdesk support, is subjected to triage, involving accessing the appropriate profile of care (See Figure).

A decision is made by the system as to the service request's priority and the action that should be taken. This may be overridden by a service manager. The internal customer is informed of the priority of the request and the service is delivered in due course. The service manager may then assess the outcome of the service and use this new information, in consultation with the customer to update the profile of care. Updating the profile of care may suggest a feedback of information to the service catalogue and the internal customer description, which may in turn need updating.

This process ensures that internal service rationing is done on the basis of agreed criteria, documented in the profile of care, that the process is dynamic and the service learns from the outcomes of previous call prioritisation and service delivery. Expectations are set during negotiation with the internal customer about the definition of the profile of care. The profile of care then helps in the management of service expectations and hence the management of service

quality. The rationing process should also be designed so that generally service request prioritisation is automated and the service manager can concentrate on the exceptions.

A focus on the customer or customer group rather than on the problem may provide other benefits beyond service rationing. We might be able to preempt problems by identifying needs for training and delivering training before systems are misused. Profiling the internal customer may enable us to predict availability needs for that customer or customer grouping. Since a lot of the problems faced by the helpdesk arise from user action - for example running large reporting programs at a peak transaction processing time, forgetting passwords, and raising application problems through lack of understanding - increased understanding of the customer and tracking customers interactions with the helpdesk may enable us to reduce the number of calls and proactively manage the internal customers IT experience.

In conclusion, I would suggest that the skills, techniques and systems of customer relationship management need to be applied to the IT helpdesk.