Action Plan Related to IERU Audit Report

Expected Condition Based on IERU Audit Report

1. Timely process to allow early resolution to be attempted at the earliest opportunity

	Management Respon	se	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines and Responsibility
1.1 Management should continue to engage all staff in the imperative of not creating a new backlog and drive the need for a processing efficiency culture. This may be accomplished through such activities as setting targets, communicating results, considering individual and team incentives to motivate the desired behaviour, etc.	Agree Since February 09, employees are reminded regularly of the need to expedite the process to complete files and targets were communicated for file completion established by the Business model. Monthly status of cases is distributed at branch and team meetings. IERU is more stable as the Director position is now staffed on a permanent basis since June 09. The Director has met with each employee in IERU to discuss individual roles and responsibilities and remind them of expected targets.	Assistant Commissioner and Directors will continue to communicate targets and goals to CRC Branch staff and consider ways for staff to innovate/create/give feedback in order to improve timelines, such as open dialog, team meetings, discussions/consultations, to create staff engagement and buy-in.	Status of cases distributed monthly. Communication to staff done biweekly. CRC Assistant Commissioner (AC) and Directors are accountable.
	The Interim Information Commissioner held an all staff meeting on July 9/09 and presented a new report on targets and closed complaints. The imperative of not creating a new backlog was reiterated.	Directors and Chiefs will monitor weekly the achievement of targets and goals for each investigator. Productivity and performance against targets will be addressed immediately.	Ongoing process Directors and chiefs accountable.
	During Branch Retreat in February 09, two employees were presented with instant awards for high productivity. As well, awards were presented to some employees, as a group and individually, during the Public Service Week in June 09.	Proposed nominations for awards will be assessed through the OIC Awards and Recognition Program by the Senior Management Team (SMT).	Ongoing process Directors or AC

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1.2 Management should establish clear targets for average processing time that, based on data gathered from the IERU pilot to date, are achievable. Management should ensure that these targets are well communicated, ensure there is an opportunity for open dialog about the targets, and ultimately, that there is buy-in from staff in achieving the targets.	Business rules have been established for each CRC investigative group (monthly targets for complaints to be completed based on the Workload Management Model). Through monitoring, we see significant improvements in all the intake steps except from the time the complaints are received to the registration of complaints. This average time was reduced from 22 days, at the time of the audit to 19 days. Nevertheless, 60% of complaints are registered within 5 days (75% within 10 days). The majority of the cases that take more than 10 days to validate and register are complaints submitted with insufficient information or with jurisdiction issues and thus still have a significant negative impact on the averages. In excluding the number of cases that take more than 60 days to validate and register, the validation average drops to 7 days. The former Information Commissioner, Robert Marleau advised the ETHI Committee in March 09 that administrative complaints would be completed in 90 days. The Interim Commissioner emphasized this need during the staff meeting on July 9/09.	CRC Directors, Chiefs and the Intake Manager will monitor targets on a regular basis. Clear targets will be adjusted and established for each activity that, based on data gathered from the pilot, are achievable.	Ongoing weekly monitoring of targets, open files and intake timeframes - CRC AC and Directors are accountable.
	The targets have been and continue to be communicated to staff (See # 1.1. – regular communication to staff). Directors/Chiefs continue to look at the most effective and expeditious manner to resolve/close complaints (e.g. grouping of same type of complaint against the same institution).	Directors and Chiefs will monitor weekly the achievements of targets and goals for each investigator and will continue to look at the most effective and expeditious manner to resolve/close complaints (e.g. grouping of same type of complaint against same institution). Productivity and performance against targets will be addressed immediately.	Ongoing process Director and Chiefs accountable.

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1.3 In reviewing the above results, Management should consider whether there are some aspects of the process (such as multiple hand-offs, confusion on roles, etc.) that can be quickly improved as well as develop strategies to address the steps of the process that take the longest - specifically, the length of time to obtain required documents from departments.	An internal checklist, mapping each intake activity, was developed to track milestone dates of the intake processes. This workaround was set-up until the case management system; the Integrated Investigation Application (IIA) is upgraded to capture milestones. One of the points raised in the audit was that it was taking 90 days to receive records from institutions. In this fiscal year, 2009-10, the OIC is taking a more active approach, following up with institutions, on a regular basis. Preliminary results so far show that the time is improving – 25 days vs. 90 to receive records from institutions. This means that, from the date a complaint is registered and assigned to an investigator, it now takes 35 days (one month) compared to 127 days (over 4 months) at the time of the audit. As well, the number of hand-offs has been reduced by half.	IERU Director and Intake Manager will evaluate the timelines for each intake activity to establish reasonable timeframes for all processes outlined in the intake checklist. The priorities are to modify the checklist to reflect the changes to the triage of complaints process and to regularly monitor the timeframes to obtain records from institutions.	To modify checklist by end Oct. 09 - IERU Director accountable Daily monitoring of timeframes to obtain records from institutions - Chiefs and Directors accountable
	The Director has met with IERU employees to discuss and clarify roles and responsibilities.	In consultation with the other CRC Directors, the IERU Director and Manager of Intake are developing job descriptions for Intake staff; separating the intake streams for administrative and refusals complaints is being considered.	
	The Director has been proactive and escalates as needed with institutions to obtain requested documents. It now takes an average of 25 days to obtain records from institutions and prepare the file compared to 90 day (see 1 st paragraph above).	The Practice Direction will be implemented in October 09 institutions and complainants will be advised of the new changes.	Will be posted on OIC Website by end Sept. 09 - IERU Director accountable for implementation, Communications accountable for website posting.

	Management Respor	ise	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines and Responsibility
	A Practice Direction with deadlines (10 days) and escalation procedures for obtaining documents from institutions was developed. OIC employees were consulted. The Director has held discussions with those institutions where it was difficult to obtain the records in a timely manner.	Interim Commissioner and AC will comment and discuss practice note during the Right to Know week.	By end Sept. 09
1.4 Given that complaints processing efficiency is a priority, Management should re-consider the assignment of reporting responsibilities to the Client	Agree	The IERU Director is working towards putting into place adequate back-up for all processing activities.	By end Oct. 09 Director, IERU accountable
Liaison officer given that this duty limits his ability to perform his other intake duties.	IERU Director and IT Director started working on a joint action plan to establish OIC investigations reporting with attention to data integrity.	The new CS-01 will provide assistance/backup to the CLO for adhoc reporting. Director of IT to complete staffing process.	By end Sept. 09 Director IT accountable
	Staffing process started in August 09 by IT Division to fill a CS-01 position to redesign and automate the production of recurring statistical reports. The CS-01 will also provide assistance/backup to the CLO for ad-hoc reporting.	S p s s s s s s s s s s s s s s s s s s	See #3.2 re: IT Action Plan
	A new Correspondence Unit was created in August 09 and is responsible for receiving all correspondence and general inquiries. The results of both initiatives will help the Client Liaison officer (CLO) to focus on more complex inquiries, providing reporting analysis to the IERU Director and his other intake duties.	Weekly bilateral monitoring (until fully implemented) by the Interim Information Commissioner in regards to the Correspondence Unit and by Director IERU in regards to CLO responsibilities. Adjustment to be made depending on results of monitoring.	Creation of Correspondence Unit - August 09 Ongoing Interim Information Commissioner and Director, IERU, accountable
1.5 Management should monitor results to ensure continuous improvement.	Agree		
to ensure continuous improvement.	Chief of ER is currently monitoring, on a daily basis and will continue to look at the most effective and expeditious manner to resolve/close complaints (e.g. grouping of same type of complaint against same institution). The Chief will report	Director IT Division and Director IERU are currently reviewing the reporting methodologies to incorporate monitoring tools.	See #3.2 for timelines on monitoring tools

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		weekly to Director IERU any cases to be brought to the attention of the Special Cases Review Committee meeting every 2 weeks. Monthly report of performance targets/closed files and change in inventory of complaints.		
		An intake records in the case management system, IIA was developed to add the priority of complaints and capture timelines for some intake activities (ex: BF date of 10 days to obtain records from institution). This solution was put in place as a workaround until the IT solution can be found to upgrade IIA. Intake monitor and follow-up daily and escalate to IERU Director any difficulties in getting documents from institutions.	Ongoing monitoring will be done by Chief, ER, and Intake Manager and reported to IERU Director.	Ongoing Chief, ER, and Manager, Intake, accountable

2. Complaints prioritized, assigned and investigated on a priority basis

	Management Respon	ise	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines and Responsibility
2.1 Management should consider simplifying the number of prioritization considerations taken into account. In doing so, Management should consider the relative importance of client urgency versus other non-client factors and weight these accordingly.	Agree The prioritization of complaints has been simplified. The former Information Commissioner, Robert Marleau has committed to completing administrative complaints within 90 days. This process has been implemented.		
Management should also re-consider factors that are duplicated (e.g. nature of complaint category duplicates in part how files are assigned to ER vs. CRC; age of complaints duplicated in internal documentation).	 New business rules for triage of complaints were developed: 90 days to complete administrative complaints; CRC Teams will perform early resolution where possible on refusals complaints; and Priority complaints with criteria developed (see Practice Direction on triage). 	The Practice Direction on triage of complaints will be posted on OIC Website informing institutions and complainants of changes.	Will be posted on OIC Web by end Sept. 09 IERU Director accountable for implementation, Communications accountable for web posting.
Management should take into account the future expectation that all administrative complaints be resolved within 90 days and whether this expectation eliminates the need to further prioritize these complaints.	A Practice Direction for triage of complaints was developed and the staff consulted.	Practice Direction will be implemented The Practice Direction includes a notice of review in consultation with institutions and complainants in 12 months.	Oct. 09 Oct. 2010 CRC AC and IERU Director accountable

September 21, 2009

	Management Res	sponse	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines and Responsibility
2.2 Management should ensure that external and internal prioritization criteria are consistent and that implementation of the criteria in the investigations system is consistent.	Agree Criteria have been developed for priority complaints.	See #2.1 re: Practice Direction on triage of complaints.	
		The IERU Director and IT Director are working on a joint action plan to establish OIC investigations reporting with attention to data integrity and to sure that implementation of the prioritization criteria are consistent in the new reporting system. The IERU Director will inform staff once the reporting system is in place	Implementation of the Action Plan – December 09 IERU Director and IT Director are accountable

Management Response		se	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines
2.3 Management should provide more information to departments about priority complaints, and implement escalation procedures in order to obtain documents faster.	Agree Refer to (#2.1) on Practice Direction on Triage of complaints. Another Practice Direction for obtaining documents in a timely manner and escalation procedures was developed. CRC Directors and Chiefs are holding more meetings with departmental officials to discuss outstanding issues and to provide information on our processes.	See # 2.1 Discussions/consultations with institutions and complainants will be done on a case-by-case basis.	Both Practice Directions will be posted on the OIC Website by end Sept. 09
2.4 Management should clearly differentiate the full high priority "fast-track" process from the general process and ensure that this is documented and communicated to all staff involved.	Agree The OIC developed a Practice Direction on obtaining documents from institutions differentiating the fast-track and general process. No distinction is needed for administrative complaints since	See #1.3, 2.1 and 2.3 re: Practice Directions. The business rule will be	Will be posted on OIC Website by end Sept. 09 Oct. 09
	they are now to be completed within 90 days. There will be exceptional circumstances. A business rule has been established where an ER complaint is considered to be urgent and requires fast-tracking (faster than the 90-day turnaround time for completion). This occurs infrequently. The Chief immediately assigns the complaint to an ER investigator as a priority.	communicated to all staff.	IERU Director/Chief accountable
	However, the refusal complaints are distinguished (early resolution or priority complaints). A business rule has been established for the triage of CRC complaints. The Chief, IERU, will flag possible early resolution or priority complaints for CRC Director determination. This flagging will not delay the Intake processing – to be done in tandem.	The business rule will be communicated to all staff.	Oct. 09 Director/Chief, IERU, and CRC Director accountable

	Management Response		
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines
3.1 Management should ensure clear targets for file closures are communicated regularly along with actual results to identify whether progress is being made on this front.	Agree See. #1.1 re: regular communication to staff. The Chief of ER currently monitors daily the progress of administrative complaint investigations. Regular Team meetings to advance administrative complaint investigations are now held.		Ongoing process See #1.1

	Management Respon	se	
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines
3.2 Management should establish a comprehensive set of business rules related to the key statistics that need to be reported on an ongoing basis that should be documented, consistently applied, understood by management, and clearly disclosed on any resulting reports for clarity.	IERU Director and IT Director started working on a joint action plan to establish OIC Investigations Reporting. The plan will identify reporting methodologies, clarify business rules and enhance accountability by facilitating the monitoring of targets. Business rules for process are being developed. For example, closures of complaints will be linked to a specific team (CRC, ER or SCMT) rather than to an individual investigator. This will help determine if team objectives are being achieved and focus management's attention on needs (ex: resources, process or technology).	Consultations with other OIC Branches on the approach for reporting statistics will be performed.	Prior to October ICMG meeting (Information Commissioner Management Committee) Nov. 09 to obtain ICGM approval on plan and approach. Implementation of action plan Dec. 09 assuming ICMG approval of plan and approach
		Consultation necessary with other OIC Branches to respond to reporting needs such as: Annual Report, DPR, RPP, PAA and Report cards.	Oct. 09 Director, IERU accountable
	Some business rules have been developed and already implemented: Monthly reports on targets and closed complaints.		Monthly reports on closed complaints started June 09

4. Reporting capacity and capability that informs management about the risk of a new backlog developing and provides reliable information for decision-making including establishing service / performance standards.

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4.1 Management should assign the responsibility for reporting in a manner that does not impact the critical path of processing complaints.	Agree See #1.4 re: CLO responsibilities The redesign and automation of reports will help the CLO to focus on his role to provide statistical analysis to OIC Management to help in decision making for corporate analysis and monitoring and forecasting.	The new CS-01 will provide assistance/backup to the CLO for adhoc reporting. The IERU Director is working towards putting into place adequate back-up for all processing activities.	September 09 once staffing is complete - IERU and IT Directors accountable
4.2 Management should identify the set of data, reporting criteria (e.g. including or excluding discontinued and cancelled), and the report format that is key to determining if objectives are being achieved and if the Office is on track to achieve future objectives.	See # 4.1 Since June 08, we no longer report on "cancelled" complaints since they have not been registered as formal complaints (this was a transition year). Those query statistics will be addressed under "enquiries". Discontinued complaints will continue to be counted as closed complaints due to the level of effort especially when the investigation has begun.	See # 4.1 The IERU Director and IT Director are working on a joint action plan to establish OIC investigations reporting with attention to data integrity. For example, closures of complaints will be linked to a specific team (CRC, ER or SCMT) rather than to an individual investigator. This will help determine if team objectives are being achieved and adjusted, if necessary.	Decision made re: cancelled and discontinued complaints June 08 See #3.2 re: IT action plan -

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4.3 Management should be aware of the data integrity issues noted above and	Agree	See #3.2 re: IT action plan	
address the issues where possible.	IERU is in the process of changing the closure of the complaints process to be better able to monitor data integrity. For example, closures of complaints will be linked to a specific team rather than to an individual investigator.	We are reviewing our current data practices and procedures related to data entries, access rights of our case management system (IIA) to identify vulnerabilities and protect the integrity of the data and establish protocol.	
	A business rule was established and communicated for investigators to report closed complaints in IIA. Investigators will be reminded monthly.		Started in Aug. 09

5. Improved ability to handle corporate information needs related to complaints

5.1 Management should ensure that resources assigned to the task of	Agree	
identifying incoming complaints of	Chief of ER reviews all incoming complaints daily to identify	Ongoing
strategic importance have the requisite competencies and guidance to perform	corporate information and communications needs, trends and systemic issues. In the Chief's absence, the IERU	Chief and Director, IERU accountable
the task.	Director reviews the incoming complaints,	
		Ongoing
	List of new complaints (de-identified) sent to OIC Management	Director, IERU
	group monthly. Interim Commissioner reviews all incoming complaints.	Accountable

	Management Response		
Recommendations	Actions Taken By OIC (Controls in Place)	Actions To Be Taken by OIC (Proposed Controls)	Timelines
5.2 Management should ensure that the review of incoming enquiries and complaints is done in such a way that the activity does not extend the overall processing time of complaints.	Agree All general enquiries now with the Correspondence Unit. Complex enquiries are handled by the Client Liaison Officer.	All processes will be monitored to ensure that they function efficiently and adjustments will be made as required.	Ongoing process
	Process and timeframes to monitor all enquiries has been implemented. (10 working days to respond to difficult enquiries).	Timeframes for responding to enquiries to be included in statistical reports. Will have to establish a workaround.	See #3.2 re: IT action plan
	See #1.3 – hands-off reduced See #2.1 – simplified triage See #5.1 - incoming complaints reviewed daily	Dependent on the IT Strategy.	

6. Information that would support OIC in informing both complainants and institutions to increase efficiency in handling complaints and prevent future backlog

6.1 Given that the longest stage of the complaints process is getting documents	Agree	Discussions/consultations with institutions and complainants are done	Posted on OIC Website by end
from departments, it is recommended that this be considered as the first priority.	See #2.3 re: Practice Direction on obtaining documents.	on a case-by-case basis, as required.	Sept. 09 and implemented in Oct. 09
Based on interviews with CRC	The Director IERU has been proactive with non-compliant institutions to arrange to obtain requested documents. Negotiated workarounds and escalated procedures used where needed.	The Branch Director will develop a refined list of required documents depending on type of complaints.	November 09 CRC Directors accountable
Investigators, opportunities exist to help	needed.	Staff will be consulted for suggestions	Regularly
departments respond to OIC requests		at the new investigators' meetings and	CRC Directors
better and faster.		other team and CRC Branch meetings.	accountable