

**Discussion**

**MEMORANDUM**

June 23, 2021

**TO:** Government Operations and Fiscal Policy Committee  
Health and Human Services Committee

**FROM:** Dr. Costis Toregas, Council IT Adviser  
Linda McMillan, Senior Legislative Analyst  
Carolyn Chen, Legislative Analyst

**SUBJECT:** Coordination of Call Centers and Governance

**PURPOSE:** The Executive branch will provide a briefing on strategies to coordinate the various call centers that serve the public and describe emerging governance structures to ensure coordination and efficient operation

The following are expected to attend:

Fariba Kassiri, Deputy Chief Administrative Officer  
Ken Hartman, Director, Strategic Partnerships  
Diane Vu, Director, Office of Community Partnerships  
Dr. Raymond Crowel, Director, Department of Health and Human Services (DHHS)  
Dourakine Rosarion, Special Assistant to the Director, DHHS  
Barry Hudson, Director, Public Information Office  
Brian Roberts, MC311  
Gail Roper, Director, Department of Technology and Enterprise Business Solutions (TEBS)  
Shayna Taqi, Change Management, TEBS  
Corey Orlosky, Office of Management and Budget (OMB)

**BACKGROUND**

Over the course of the pandemic, residents have contacted the County Government in record numbers – some in need of urgent assistance for complex issues. In addition to MC311, several other call centers or phone lines have been in place, including the food access call center, the public health helpline, and assistance with preregistration for COVID vaccines. Some of these numbers have been staffed by County employees who have now returned to their regular jobs as the County Government and MCPS

reopen. CASA staffs an assistance number as a part of Por Nuestra Salud y Bienestar. And there are other numbers, such as the DHHS 24-hour Crisis Center and 911 and non-emergency police number that also provide important points of access for residents. Lastly, the County has started a ChatBot system and has increased the FAQs on the website.

There is a need to create a new long-term vision for how the County listens and responds to requests from its residents. This should include identifying all the current platforms and contact points (pain points). As a beginning point for responding to this need, it is expected that the Office of Legislative Oversight (OLO) may undertake two well-defined projects to understand both the way that residents articulate their needs for information and services, as well as the multiplicity of programs the County currently supports to respond to such requests.

However, the impacts from the COVID pandemic are not over and the County, and in particular DHHS, continue to need the capacity to address people's immediate needs for food, housing, health services (COVID and non-COVID) and mental health supports.

*How does the County continue to address these immediate urgent, critical, and often complex needs? How does the County continue to respond to non-urgent requests?*

***Questions the Committees may want to pose:***

**POLICY**

*What is the Executive's 2022 vision of call centers – centralized, decentralized, hybrid? And is there an overarching strategy of how we reach and hear our residents?*

*Will we continue to have a single point of connect, leading to multiple and well-resourced points to respond? Or will our residents have to remember multiple numbers, web sites and places to apply for help and information?*

*How does post-COVID demand look? Are we expecting demand for information and assistance to go back to pre-COVID levels? And what is the impact of this forecast on personnel requirements for FY22 and beyond?*

**MANAGEMENT**

*What are the emerging plans for the governance of responding to resident information and service requests?*

*How will the work being done to explore alternatives to 911 for people in a behavioral health crisis be integrated into this planning? How will the planning take into account recommendations in the Crisis Now model for a central intake call center? The 211 number is in use by the State of Maryland for people seeking human services and 988 will be implemented soon as the national suicide hotline number. How will the County integrate these outside-the-County catchment centers as a part of the comprehensive response to residents?*

*What is the timing/urgency of County volunteers leaving COVID-related assignments and returning to their normal jobs? And how will their departure impact personnel requirements for MC311 and other centers that may be impacted?*

## **OPERATIONS**

*Is the County committed to using a single technology platform to track incoming calls and the departmental response? And how will this platform evolve over time with Cloud Computing options, Chatbots that are already exhibiting benefit to our residents?*

*Is the Executive considering the current Call Center hours of operation? In a centralized option, a 24x7 operation would be essential, with “hot transfers” enabling those with the knowledge inside departments to take over and deliver services effectively.*

*What are early reactions to the development of translation units to help our varied resident base?*

## **FOLLOW-UP ON PROGRESS**

The Executive branch is suggesting the development of a governance structure to manage resident calls for information and service across the Enterprise. Council Staff recommend that the Committees agree to have a representative (non-voting) on the suggested Steering Committee so that changes and challenges will be quickly communicated to the Committees. In addition, a 6-month review cycle is recommended for status report and discussion for the next 2 years until the system is stable and productive.

### **Attachment:**

1. Executive Branch presentation

©1-7

# Lessons Learned: Coordinated approach yielded better service to residents

The Executive Branch coordinated efforts among departments to quickly address customer service needs during the COVID-19 pandemic:

**Process Improvements:** simplified the resident experience on top social services needs and shortened response times

**Implemented Self Service channels:** implemented MC311 website chatbot and telephone self service, HHS vaccination telephone virtual agent

**Designed for Humans:** volunteer civic designers listened to actual users of our services and mapped the journey from their perspective...then implemented changes to reduce pain points such as making information easier to find to reduce call volume and frustration.

Expanded capacity to handle multilingual calls and calls with multiple and complex needs

Increased efficiency and effectiveness of translations through creation of a centralized COVID-19 Translations Unit

Current State in 311 after coordinated organizational response to address staffing, technology and process improvements

- Abandonment rates **down from 26% to 6%**
- Speed of answer (wait times) **down from 5:14 minutes to 1:07 minutes**

Use what we learned to continue coordination and implement a strategic (more effective) customer service framework as we move forward.

**01**

Establish the County's organizational customer service governance structure and subcommittees to coordinate call centers and resident touchpoints

**02**

Establish resident feedback channels to inform the sub committee action items and respond/revise policies as appropriate

**03**

Implement cohesive and innovative solutions, including upgrading technology and resident experience

**04**

Prepare proactively for surges in call volume

**05**

Implement an approving governing body that includes council liaisons and community representation

# Montgomery County Organizational Customer Service Improvements Governance Committee

## Mission

Provide residents with responsive and highly effective communication channels using human centered design principles to improve overall County customer service. Create strategic governance, technology, and interoperability within County departments and external partners.

## Objective

Customer service throughout the organization will be organized and coordinated to deliver the best service to our residents (during normal and surge times). The strategy will be scalable and flexible to adapt to emerging needs and disasters, and include lessons learned from the recent response.

The Committee will increase strategic coordination, cooperation, and process improvement using direct resident feedback. It will establish clear and cohesive practices for call/contact centers processes for Montgomery County.

Budget decisions, technology decisions, and administrative approvals are significant to meeting the overall strategic goals that are set forth to address these issues. The Steering Committee agenda will reflect vital decisions in a timely fashion, eliminating the need for ad hoc meetings or disjointed tactics.

## Proposed Format

**Four focused workgroups** each assigned a key improvement area, reporting up to an Executive Steering Committee. The first action item by each committee will be to determine desired outcomes, priorities, and success measures. Structure and members of the committees will evolve as needed to best service County residents. Committee action items will derive from direct resident feedback.

# Subcommittee Structure Focused on Coordinating and Improving Organizational Customer Service

## POLICY AND COMMUNITY OUTREACH

Focus on organizational customer service coordination, policy development, external community outreach

- *Co-Chairs: Barry Hudson, Raymond Crowel, Ken Hartman, and Diane Vu*
- *Policy Development Analyst: Danielle Melton*
- *Members: CEX, PIO, HHS, DOT, DEP, other depts as needed*

## DATA/REPORTING

Define customer service metrics and monitor issue/service resolution timeframe adherence

- *Co-Chairs: Steve Heissner and Dave Gottesman*
- *Members: OMB/CountyStat, PIO, HHS, TEBS*

## PROCESS AND PLANNING

Human centered design, KBA coordination and simplification; SLA timeframes in response to resident expectations and other business process improvements; Establish direct feedback channel for residents and develop process to action the feedback into subcommittee tasks

- *Chair: Michael Baskin and Brian Roberts*
- *Members: CEX/Innovation Team, PIO, OMB/CountyStat, HHS, TEBS, other depts as needed*

## TECHNOLOGY CONSULTING

Implement forward thinking cohesive and innovative organizational multi-channel technology solutions

- *Co-chairs: Gail Roper, Josephine Tao, and Joann Butler*
- *Change Management: Shayna Taqi*
- *Members: OMB, TEBS, PIO, HHS and other depts as needed*

## EMERGENCY COMMUNICATIONS (AS NEEDED)

Assembled as needed during emergencies to coordinate activities and communications

- *Chair, Earl Stoddard*
- *OEHMS and other departments as appropriate*

# Approving Board and CEX Oversight

- **Voting members**
  - Deputy Chief Administrative Officer
  - Directors – PIO, OMB, TEBS, HHS, DOT, Community Partnerships
- **Non-voting members**
  - Council and Community liaisons
  - Directors – RSCs, 911 Call Center, DEP, DPS, Procurement, OHR, Labor Relations
- **Governance Coordinator**
  - Adriana Hochberg, Assistant Chief Administrative Officer



# Timelines

- Early August - Kick off meeting
- Ongoing - Subcommittee meetings
- Quarterly (or as needed) - Approving board meetings

# HHS INTERIM SOLUTION

## Implementation

- HHS will coordinate the development and departmental integration of the call center. Working in coordination with TEBS and the technology and communications governance body to ensure alignment with county-wide technology modernization efforts.

## MC311 Alignment

- Resident inquiries will continue to be answered by MC311 as our central point of accessing county services. Complex Tier II service needs will be efficiently linked/connected to HHS to ensure rapid access to the wide array of departmental services and supports. HHS will be a part of the ongoing governance body.

## Technology Development

- The proposed changes will be made using existing MC311 technology. TEBS will play a key role in the evaluation and use of any new technologies.