

GAO

Report to the Secretary of Health and
Human Services

August 1986

SOCIAL SECURITY

Improved Telephone Accessibility Would Better Serve the Public



036534



United States
General Accounting Office
Washington, D.C. 20548

Human Resources Division

B-223771

August 29, 1986

The Honorable Otis R. Bowen, M.D.
The Secretary of Health and Human Services

Dear Mr. Secretary:

This report discusses how accessible the Social Security Administration (SSA) is when the public tries to reach it by telephone. Our findings are based on over 4,000 telephone calls we made to SSA facilities to measure the incidence of busy signals and how long calls were placed on hold.

The report contains four recommendations to you. As you know, 31 U.S.C. 720 requires the head of a federal agency to submit a written statement on actions taken on our recommendations to the Senate Committee on Governmental Affairs and the House Committee on Government Operations not later than 60 days after the date of the report and to the House and Senate Committees on Appropriations with the agency's first request for appropriations made more than 60 days after the date of the report.

We are sending copies of this report to the above-named committees; other appropriate congressional committees, the Director, Office of Management and Budget, your Inspector General, and the Commissioner of Social Security.

Sincerely yours,

Edward A. Hensmore

for

Richard L. Fogel
Assistant Comptroller General

Executive Summary

Purpose

Each year, the public places millions of telephone calls to the Social Security Administration (SSA). If a caller encounters a busy signal, no answer, or a long wait on hold, the result can be frustration, dissatisfaction with SSA, and increased visits to local offices. What does happen when the public calls SSA by telephone? Are the SSA telephone facilities meeting busy signal and average wait time standards? Does SSA management collect information on the telephone service provided?

This report, one of a series on SSA's service to the public, discusses the results of a GAO nationwide test of SSA telephone access and provides information on the agency's standards and telephone reporting activities

Background

SSA maintains 34 teleservice centers to answer telephone calls in major metropolitan areas or entire states. These centers, serving about half the nation's population, answered over 22 million calls during fiscal year 1985. In less populated states and smaller metropolitan and rural areas, other types of central answering units and local offices provide telephone service.

For the 34 teleservice centers, SSA has set telephone service standards. Service is considered unacceptable if busy signal rates exceed 15 percent or incoming calls are on hold an average of 2 minutes or longer. For other facilities, SSA has no such standards.

To test SSA's accessibility by telephone, GAO made 4,044 random calls in May 1985 to all types of SSA telephone answering facilities and recorded the outcome of each call. Calls answered directly or within 2 minutes of being put on hold were placed in an "easy access" category, calls on hold longer than 2 minutes, disconnected, terminated after 10 rings, or getting busy signals were assigned to a "difficult access" category. For all telephone answering facilities tested, GAO also measured compliance with SSA's teleservice center standards.

GAO's review was not designed to determine the reasons for any differences in performance among the facilities tested.

Results in Brief

During the test period, SSA representatives answered about three of every four calls from the public directly or within 2 minutes of being put on hold, by GAO estimates.

But telephone access to SSA varied considerably among telephone answering facilities, and a number of them were providing unacceptable service by SSA standards. Success in reaching SSA also fluctuated according to the hour, day, or week and the area called

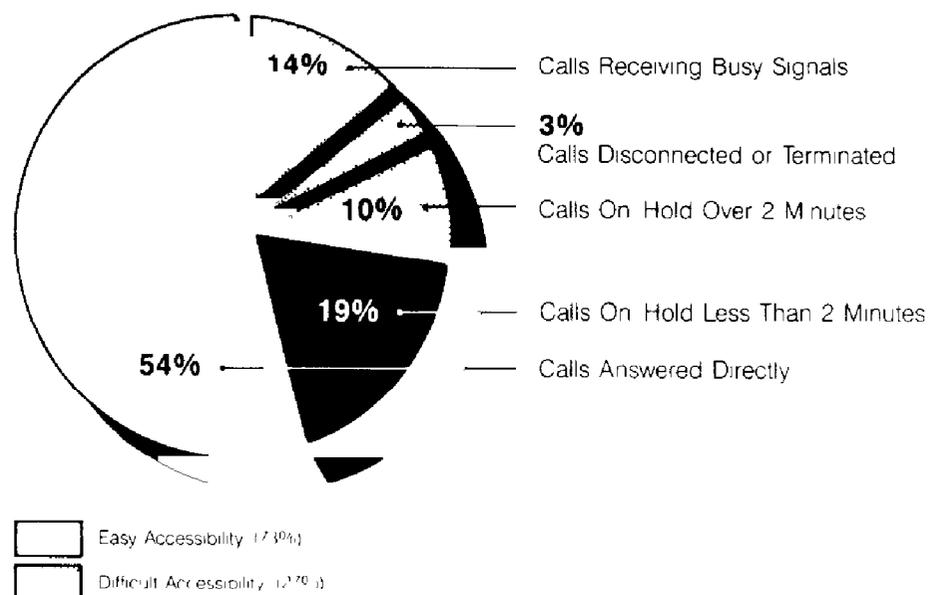
SSA has been unaware of the level of its telephone service to the public, however, because its telephone answering facilities report misleading and limited data. Moreover, only teleservice centers must meet SSA service standards. Without standards and data for all its facilities to measure compliance, SSA cannot adequately monitor its telephone accessibility.

Principal Findings

Three-Fourths of Calls Termed “Easy Access” In Nationwide Test

GAO’s test results showed that 54 percent of telephone calls to SSA were answered directly, 29 percent were put on hold before being answered, 14 percent got busy signals, and about 3 percent went unanswered or got disconnected. Looked at another way, 73 percent of the test calls were classified as easy access and 27 percent as difficult access.

Figure 1: Overall Access to SSA by Telephone



For the 34 teleservice centers, the percentage of calls answered directly varied from 2 to 95, and calls on hold less than 2 minutes varied from 2 to 78 percent. Four centers had busy signal rates over the SSA 15-percent standard, and 10 centers exceeded SSA's 2-minute average wait standard for calls on hold. Some of SSA's other telephone answering facilities also failed to comply with teleservice center standards. For example, local offices as a group exceeded the 15-percent busy signal standard, and miniteleservice centers (small central answering units) as a group exceeded the average-wait standard for calls on hold.

A person's chance of reaching SSA was better if the call was made after 11:00 A.M., later in the week, or in the middle of the month, GAO's test calls showed. These results agree with SSA historical data. In periods of peak volume, when the public's calls to SSA are not randomly distributed as were GAO's, access could be more difficult than the overall averages reflected in this report.

The percentage of calls answered directly or within 2 minutes of being put on hold was highest in the Seattle Region and lowest in the New York Region, as table 1 shows.

Table 1: Calls to SSA Answered Directly or Serviced Within 2 Minutes, by Region

Region	Percent of calls placed
Seattle	83
Philadelphia	80
Dallas	80
Kansas City	78
Denver	76
Atlanta	75
San Francisco	75
Chicago	70
Boston	57
New York	49

GAO did not attempt to determine the specific causes for noncompliance and variations in access to individual SSA telephone answering facilities. Where telephone access is less than acceptable, SSA needs to determine the causes, for example, whether increases in staff, training, equipment and/or telephone lines are needed to improve service to the public.

SSA Monitoring of
Telephone Service Limited

SSA collects only limited data on its 34 teleservice centers' accessibility to the public, and some of the data is misleading and inconsistent. Centers record and report the percentage of time or how many times all lines are busy rather than actual busy signals. Also, to compute average wait time, centers use all calls received rather than only calls placed on hold.

SSA has little information on its telephone performance and no service standards for its other central telephone answering units and local offices serving half of the nation's population.

Recommendations

GAO recommends that SSA.

- Establish telephone service standards for all facilities handling calls from the public.
- Clarify the standard for average wait time to require that only calls on hold be used in computing the average.
- Periodically measure the accessibility of SSA telephone answering facilities against established standards.
- Take steps to bring into compliance those facilities not meeting established standards.

Agency Comments

SSA generally agreed with GAO's recommendations.

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Abbreviations

ATB	All Trunks Busy
GAO	General Accounting Office
SSA	Social Security Administration
TSC	Teleservice Center
TSR	Teleservice Representative

Introduction

The Social Security Administration (SSA) annually receives millions of telephone calls about the various programs it administers. Along with mail and walk-in visits to SSA local offices, telephones are a traditional form of service delivery the agency has offered to the public. Telephone service, which is generally toll-free, is available to the public 8 hours a day, 5 days a week.

Calls Handled by a Variety of Facilities

Organizationally, SSA provides telephone service through central answering units (i.e., teleservice centers, miniteleservice centers, and statewide units) and local (district or branch) offices, as table 1.1 shows.

Table 1.1: SSA Facilities Providing Telephone Service to the Public

Facility type	No.	Area served	Service provided for
Central answering units:			
Teleservice centers	34	Major metropolitan area or entire state	Telephone calls only
Miniteleservice centers	20	Area within state	Telephone calls only
Statewide units	12	Entire state	Telephone calls only
Local offices:			
District or branch offices	627	Local office geographical area	Telephone calls and walk-in traffic

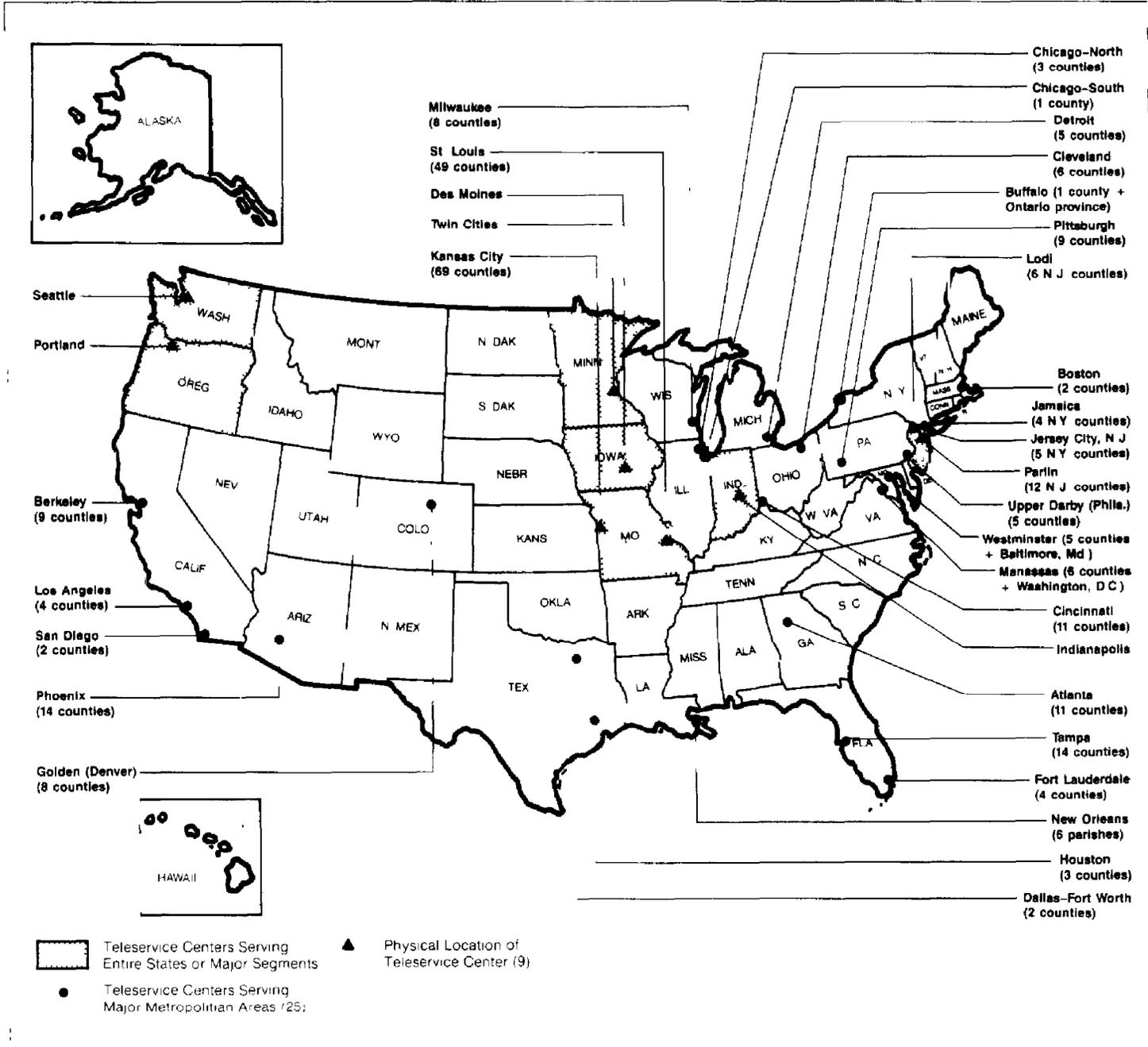
Nationwide, the 34 teleservice centers—SSA’s primary telephone service facilities—serve major metropolitan areas or entire states. Teleservice centers were designed to relieve SSA’s district and branch offices of the burden of answering general or routine telephone inquiries and to free field personnel to handle walk-in traffic and adjudicate claims. Unlike SSA local offices, teleservice centers have a single mission—to provide telephone service. The number of employees at the centers averages 35, ranging from 16 to 122. In fiscal year 1985, teleservice centers answered over 22-million calls at a total operating cost of \$54.7 million, for an average cost of \$2.49 per call.

SSA has 32 other central answering units, generally smaller, that also are dedicated to providing one service—answering telephone inquiries from the public. Twelve are commonly referred to as statewide answering units; as their name suggests, their service areas are statewide. They generally serve the less populous states. The service areas of the 20 miniteleservice centers are less than statewide and can be as small as one district. Like local offices, statewide units and miniteleservice centers are under the jurisdiction of an SSA district manager. But

teleservice centers constitute a distinct organizational entity apart from a district office. The location of and geographic areas served by SSA's three types of central telephone answering units are shown in figures 1.1 through 1.3.

Chapter 1
Introduction

Figure 1.1: Location of SSA Teleservice Centers and Geographic Areas Served



Chapter 1
Introduction

Figure 1.2: Location of SSA Minitelerservice Centers and Geographic Areas Served

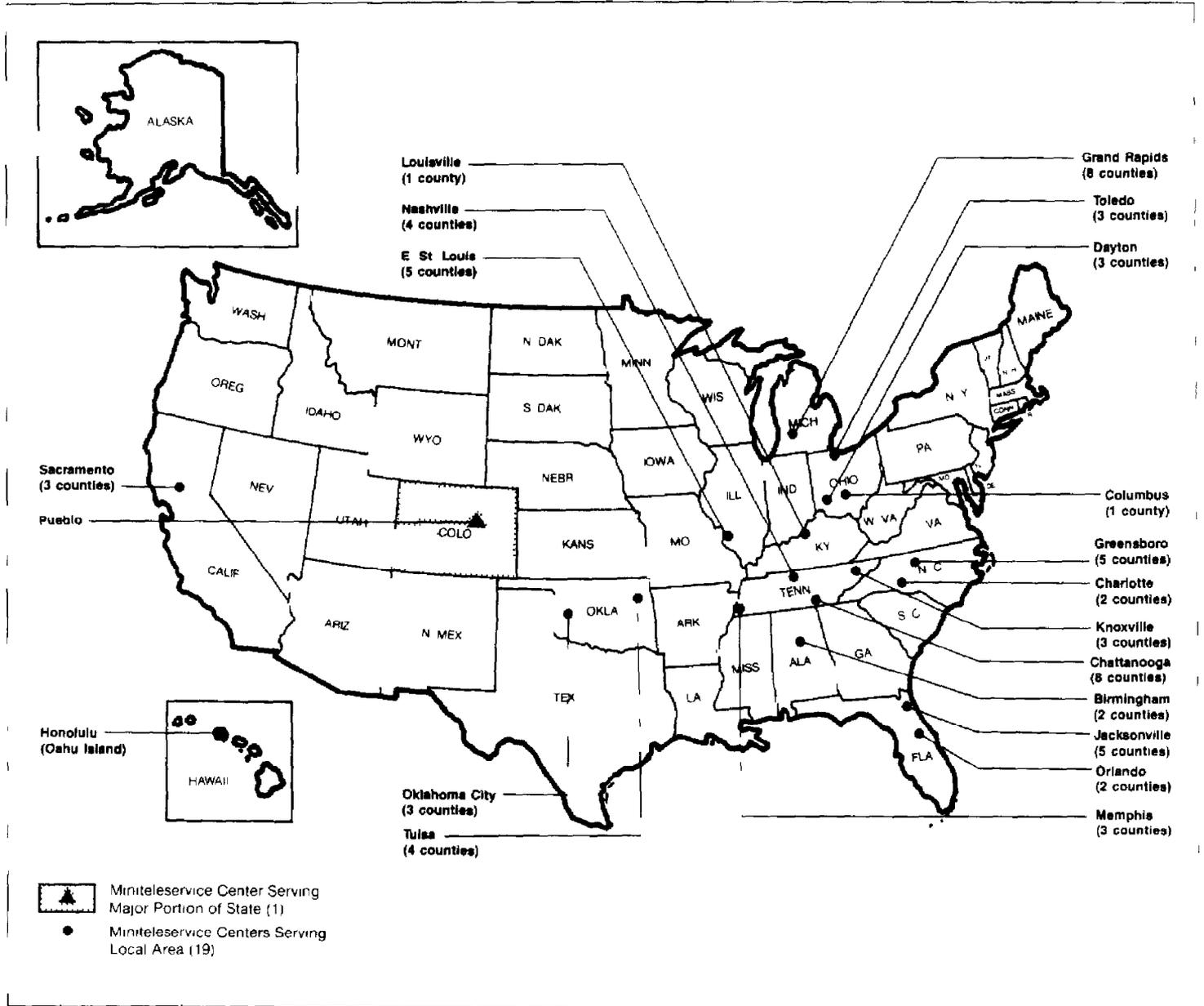


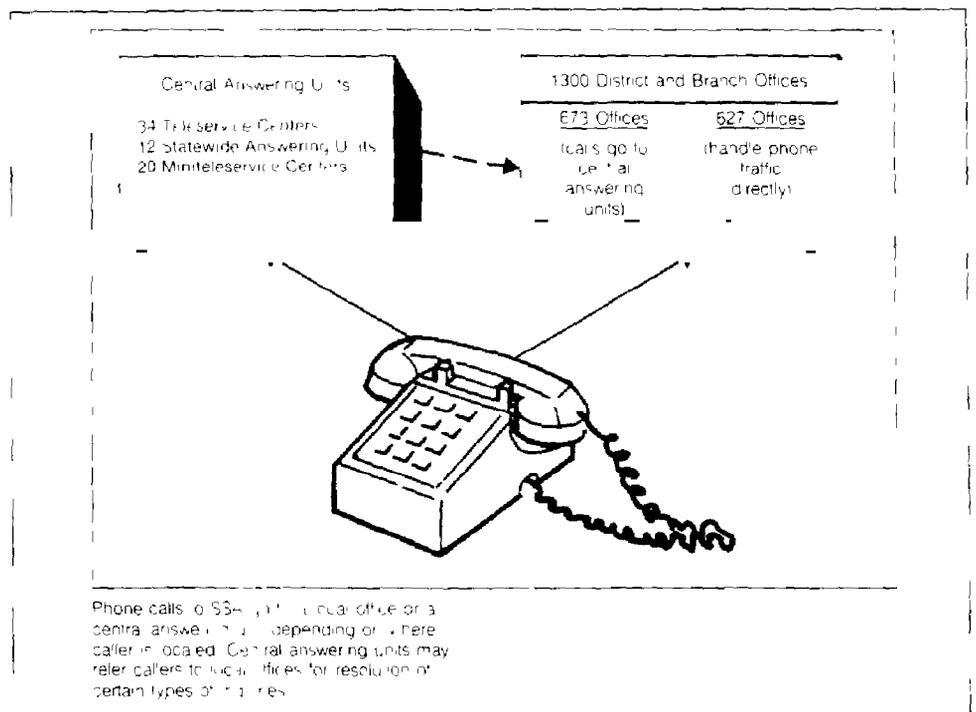
Figure 1.3: Location of SSA Statewide Units and Geographic Areas Served



Finally, district and branch offices (local offices) outside the service area of a teleservice center, miniteleservice center, or statewide unit provide their own telephone service along with handling walk-in traffic. Of SSA's more than 1,300 local offices, 627 have this dual role. Depending on where callers are located, calls go to either a local office or a central answering unit. Central units may refer callers to the local office.

for resolution of inquiries. How telephone calls are handled by various SSA units is shown in figure 1.4.

Figure 1.4: Flow of Telephone Traffic to SSA



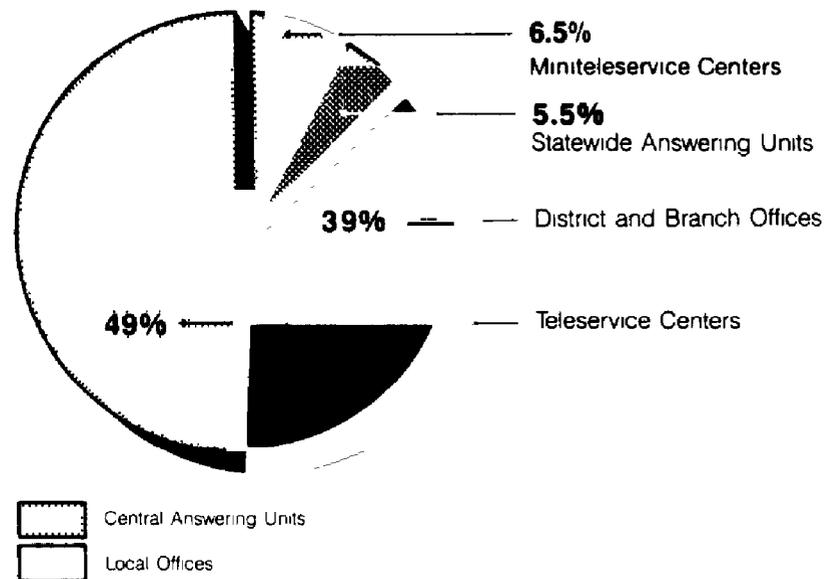
SSA receives telephone inquiries on a wide range of topics. For the most part, central answering units handle requests for information about SSA programs. For example, people may call SSA for information about applying for a social security number, eligibility requirements, or applying for benefits.

However, the public also contacts SSA by telephone for more complex reasons, such as to file an initial claim, report a lost check or change of address, advise SSA about an over- or underpayment, or change benefit status. These contacts usually require reference to SSA records, are somewhat longer, and sometimes require that the caller be directed to a field office. Between 5 and 10 percent of telephone calls to teleservice centers require referral to local offices for resolution, SSA estimates.

Except for teleservice centers, which answered 22 million calls in fiscal year 1985, SSA collects no data showing the total volume of telephone traffic nationwide. Teleservice center representatives average about

12 inquiries/calls per hour. Using data we developed, we estimated the percentage of the population provided telephone service by each type of facility. As shown in figure 1.5, about 61 percent of these calls are directed to a central answering unit; calls for the remainder go directly to local SSA offices

Figure 1.5: Population Served by Type of SSA Facility



Because many decisions regarding SSA telephone service were vested in each regional office, parts of the system appear to have evolved without an overall plan, resulting in the variety of facilities that handle calls. Also, while calls to SSA are toll-free for most callers, SSA estimates that about 18 percent of the nation's population is without toll-free or local call service. SSA's decision in 1982 to terminate the acceptance of collect calls has resulted in a portion of the public having to incur an expense when calling SSA. For this review, we did not assess the telephone system's growth patterns and configuration nor the issue of the absence of toll-free access for a segment of the public.

Responsibilities for Telephone Service Shared

Several key components of SSA's headquarters organization are involved with telephone service as part of their duties. Under the Deputy Commissioner, Management and Assessment, the Office of Management Planning and Analysis conducts studies as required, including studies and analyses of telephone service delivery options and service levels;

the Office of Materiel Resources is responsible for changes to SSA's teleservice configuration and procures telephone systems hardware. Among their responsibilities for operations in their jurisdictions, the 10 Regional Commissioners, under the Deputy Commissioner for Operations, administer telephone activities and development and implementation of telephone policy. The Deputy Commissioner for Operations also is responsible for final approval and implementation of telephone standards for field components providing service to the public.

Apart from SSA, the General Services Administration has oversight responsibility for telephone service by all federal agencies. Major changes to and installations of telecommunications services and facilities need its approval. Also, it requires that agencies have a telecommunications management program and annually survey their telephone service and related equipment. In SSA, this function is assigned to the Division of Communication and Records Management within the Office of Materiel Resources.

Objectives, Scope, and Methodology

The objectives of our review were to (1) measure the extent to which SSA is accessible by telephone and (2) assess the adequacy of SSA's monitoring of its telephone service. Our review was not designed to determine the actual causes of any variations in accessibility nor why individual SSA facilities did not comply with established service-level standards.

Also, our review did not address a number of important management issues, such as the future role of the telephone in SSA's overall service delivery strategy and whether SSA's telephone system is properly configured to provide effective and efficient service. We plan to study these and related issues in a separate evaluation of SSA telephone service.

To measure accessibility, we made 4,044 test telephone calls in May 1985 to randomly selected SSA facilities at randomly selected times (see app. I for our sampling and estimation methodology). SSA officials concurred that the month selected represented a typical month of SSA telephone activity.

In placing our calls and recording the results, we used microcomputers and a special program designed to record and compile the results of our calls. The program automatically timed the number of seconds each call was placed on hold and terminated any call on hold for 6 minutes. For each call, we collected data on

- busy signals,
- calls terminated after 10 rings (about 1 minute) because no one answered,
- calls disconnected before being answered,
- calls answered without being placed on hold,
- calls placed on hold,
- calls disconnected while on hold, and
- wait time on hold

During the test, when we made contact with an SSA representative, we asked a question primarily to bring the call to a close (The 25 test questions used appear in app II) By design, the questions chosen were considered not difficult to answer because we did not want to be put on hold while the SSA employee researched the answer For example, one question asked was, "Are X-rays covered under Medicare?" Answer, "Yes." Another question was, "At what rate is income earned in 1985 taxed for Social Security purposes?" Answer, "7 05 percent "

Since the question was being asked, we decided to make a judgment on the courtesy and accuracy of the response provided. While we believe the data to be useful, we acknowledge that the relatively easy types of questions used would be more likely to elicit greater accuracy and courtesy than would more difficult and probing questions

Our sampling plan was designed to permit (1) a comparison between individual teleservice centers and statewide answering units and (2) an evaluation of local offices and miniteleservice centers as specific groups. Local offices and miniteleservice centers were sampled as groups rather than by individual facility because determining accessibility to individual facilities would have required a sample size of test telephone calls about four times larger than we used We selected the sample size to ensure a sampling error that would not exceed 5 percent at a 95-percent confidence level The sampling errors for selected data contained in our report are shown in appendix I.

To facilitate analysis and discussion of our test results, our test calls were categorized into two groups—one to describe and quantify "easy" access and the other, "difficult" access Both are expressed as a percentage of calls made Easy access represents calls answered directly or placed on hold for less than 2 minutes. Difficult access refers to calls that were either busy, disconnected, terminated after 10 rings or about 1 minute because no one answered, or placed on hold for more than 2 minutes

In analyzing the test results, we also applied SSA's "acceptable" service-level standards for teleservice centers (included as app. III) to measure compliance for all other central answering facilities and local offices tested. These SSA standards require that telephone lines be busy no more than 15 percent of the time and that average time on hold not exceed 2 minutes. In developing the teleservice center standards, SSA considered the service-level standards used by other federal and commercial organizations. But SSA's final decision on what represents acceptable telephone service is based primarily on the agency's judgment.

To assess the adequacy of SSA's monitoring of its telephone service, we examined the standards it has established for its telephone service, and the information available to management on how well or to what extent its facilities are meeting standards. To do this, we talked with responsible officials at SSA's headquarters in Baltimore and at the Atlanta, New York, and Philadelphia regional offices. Also, we analyzed and compared telephone performance data for selected teleservice centers, reviewed SSA documents and reports about telephone service, and made on-site visits to the 3 regional offices, 6 teleservice centers (Atlanta, Los Angeles, Manassas, Parlin, Upper Darby, and Westminster), and 10 district and branch offices. Our visits to the teleservice centers were made to obtain an understanding of how various centers operate and to develop information needed to conduct our accessibility test. Lastly, we obtained input from each of SSA's regional offices on the types of telephone answering units operated, population served, and geographic areas covered.

Our review work was done from April 1984 to October 1985 and was performed in accordance with generally accepted government auditing standards.

SSA Accessibility by Telephone Varies Widely

About three of every four calls we placed to SSA went through directly or were placed on hold for less than 2 minutes. SSA accessibility varied widely, however, depending on the telephone answering facility called and when the call was placed.

Because SSA has not established service-level standards for central answering units and local offices other than teleservice centers (see ch 3), we used the teleservice center standards when measuring access to the other telephone answering facilities.

From 2 to 95 percent of all our calls to the 34 teleservice centers were answered directly. Our calls to four teleservice centers, 5 of the 12 state-wide units, and local offices as a group received busy signals often enough that those facilities exceeded the SSA 15-percent busy signal standard that applies to teleservice centers. Likewise, our calls to mini-teleservice centers as a group were placed on hold long enough and frequently enough that the standard of a less-than-2-minute average wait was exceeded.

Also, it was easier to reach SSA after 11.00 A.M., later in the week, and during the middle of the month; test results showed. Geographically, people in the Seattle region had an 8 out of 10 chance of getting through directly or within 2 minutes of being placed on hold, while people residing in the New York region had only a 5 out of 10 chance of similar access.

Inability to reach SSA by telephone can cause public dissatisfaction with SSA service and increase field office visits by people unable to have their business handled over the telephone. According to SSA, a large volume of call activity, combined with such factors as insufficient staff, problems in assigning part-time personnel and analyzing line configurations, have contributed to the fluctuations in telephone accessibility.

During our test, we found SSA representatives who handled our telephone calls in almost all cases to be courteous and our test questions generally to be answered correctly.

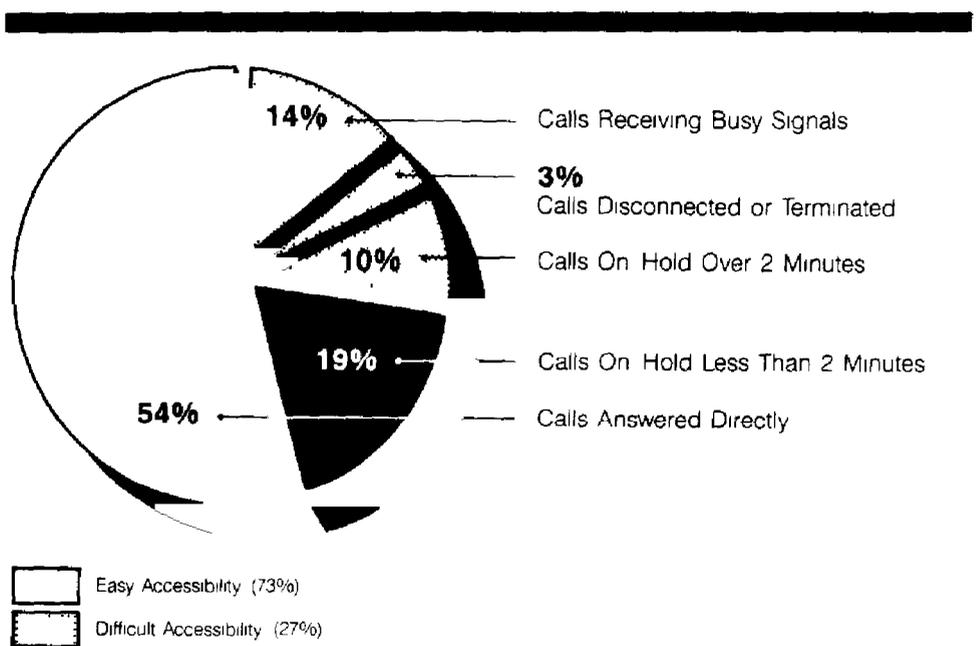
Overall Accessibility: Test Results Mixed

About 54 percent of our test telephone calls to SSA went straight through to a representative, that is, the call was answered within 10 rings and not placed on hold. About 19 percent of the calls were kept on hold for less than 2 minutes. By SSA standards for teleservice centers, calls kept on hold for an average of less than 2 minutes represent "acceptable"

service. The remaining 27 percent represents calls getting busy signals, calls disconnected or terminated (for which SSA has not established a standard), and calls kept on hold longer than 2 minutes

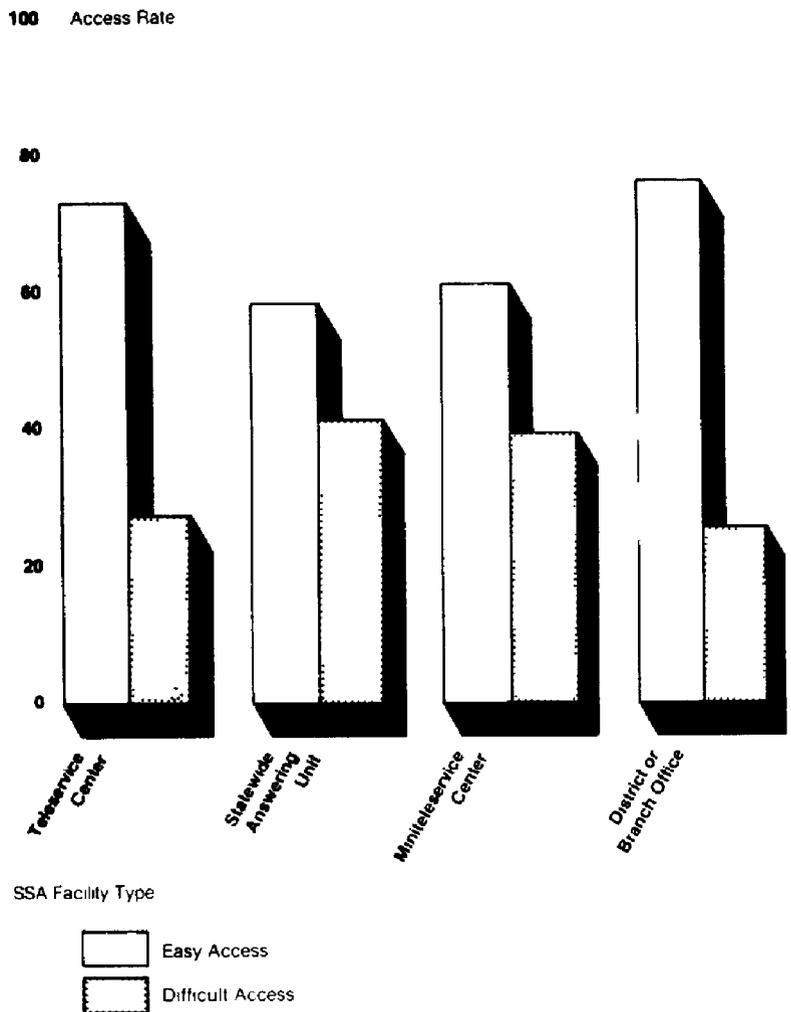
The results of our test of SSA telephone accessibility are shown in figure 2.1

Figure 2.1: Overall Access to SSA by Telephone



Overall, SSA district and branch offices were the easiest to reach by telephone, having an access rate of 76.1 percent, while statewide units' easy-access rate was lowest at 58.5 percent. Easy- and difficult-access rates by type of SSA facility are shown in figure 2.2.

Figure 2.2: Comparison of Access Rates by SSA Facility Type



When we examined easy-access calls by facility type, we found wide variance in the percentages of calls that went straight through. Local offices had the highest straight-through rate, while statewide units and miniteservice centers had the lowest. A call to a local office was almost twice as likely to go straight through as a call to a statewide unit or a miniteservice center. Teleservice centers and statewide units (excluding Maine) had about the same easy-access rate. Miniteservice centers had the lowest rate. Easy-access rates for the various facilities are shown in table 2.1.

Table 2.1: Easy-Access Rates by Facility Type

Figures represent percents of calls placed

Facility type	Easy-access rate	Calls straight through	Calls on hold less than minute
Teleservice centers	73.1	50.6	22
Statewide units	58.5 ^a	31.7	26
Miniteleservice centers	60.7	37.1	23
Local offices	76.1	64.0	12
Overall results	72.6	54.0	18

^aExcluding the Maine statewide unit, the overall easy-access rate was 72.8 percent for the statewide units

Difficult access noted during our test was largely attributable to busy signals and calls being kept on hold for more than 2 minutes. Our overall test results of 14.3 percent busy signals was within the 15-percent busy signal standard that SSA applies to teleservice centers. But statewide units and local offices both exceeded this standard (see table 2.2). SSA instructions advise that consistent monthly busy signal rates of 10 percent or higher should be viewed by management as an indicator of a possible problem requiring further study. Our calls to miniteleservice centers received busy signals for 13.2 percent of our calls and had the highest rate of calls kept on hold longer than 2 minutes. Disconnected calls and calls terminated after 10 rings were a larger problem for statewide units than for the other facilities.

Table 2.2: Difficult-Access Rates by Facility Type

Figures represent percents of calls placed

Facility type	Difficult-access rate	Busy rate	Calls on hold longer than 2 minutes	Disconnects terminate call
Teleservice centers	26.9	8.9	13.8	4
Statewide units	41.5 ^a	20.4	13.1	8
Miniteleservice centers	39.3	13.2	20.3	5
Local offices	23.9	19.3	3.3	1
Overall results	27.4	14.3	9.8	3

^aExcluding the Maine statewide unit, the overall difficult-access rate was 27.2 percent for the statewide units

Another way to look at service is how frequently calls that get through are placed on hold. Overall, about 35 percent of our calls that were answered were placed on hold. Calls answered by local offices were placed on hold about 20 percent of the time, while calls answered by

other facilities were placed on hold more than twice as often, as shown in table 2.3. The amount of time calls remained on hold is discussed on page 38 and in chapter 3.

Table 2.3: Frequency of All Answered Calls Placed on Hold

Type of facility	Frequency (percent)
Teleservice centers	41.8
Statewide units	55.7
Miniteleservice centers	54.7
Local offices	19.4
Overall results	34.5

Access to Teleservice Centers Varies Geographically

Among teleservice centers, performance varied widely. This variation could result from a large volume of call activity combined with factors ranging from staffing imbalances to problems with managing line and trunk configurations, according to several SSA headquarters and field office managers. Teleservice center easy-access rates ranged from 96.7 percent (Grand Prairie, Texas) to 25.8 percent (Jersey City, New Jersey). Overall, 23 centers were above and 11 were below the overall access rate of 73.1 percent. (See table 2.4 for a comparison of easy-access rates for teleservice centers.)

Chapter 2
SSA Accessibility by Telephone Varies Widely

Table 2.4: Easy-Access Rates by Teleservice Center

Figures represent percents of calls placed

Teleservice center	Easy-access rate	Calls straight through	Calls on hold less than 2 minutes
Grand Prairie, TX	96.7	95.0	1.7
Atlanta, GA	93.4	66.7	26.7
St. Louis, MO	93.3	78.3	15.0
Upper Darby, PA	91.7	71.7	20.0
Phoenix, AZ	91.5	76.3	15.3
Pittsburgh, PA ^a	90.2	41.0	49.2
Houston, TX	90.0	68.3	21.7
Des Moines, IA	89.8	55.9	33.9
Kansas City, MO	89.7	69.0	20.7
New Orleans, LA	88.2	72.9	15.3
Twin Cities, MN	87.7	64.9	22.8
Indianapolis, IN	86.6	68.3	18.3
Tampa, FL	85.2	50.0	35.2
Portland, OR	84.7	55.9	28.8
Chicago(N), IL	83.3	60.0	23.3
Detroit, MI	81.7	70.0	11.7
Seattle, WA	81.6	3.3	78.3
Los Angeles, CA	81.4	66.1	15.3
Westminster, MD	81.3	61.0	20.3
Milwaukee, WI	81.0	50.0	31.0
Berkeley, CA	78.7	60.7	18.0
Boston, MA	77.6	56.9	20.7
Manassas, VA	76.3	47.5	28.8
Golden, CO	71.8	43.6	28.2
Chicago(S), IL	68.9	44.8	24.1
San Diego, CA	68.9	41.0	27.9
Jamaica, NY	67.3	48.3	19.0
Cleveland, OH	66.7	36.7	30.0
Ft. Lauderdale, FL	65.0	40.0	25.0
Buffalo, NY	63.8	1.7	62.1
Lodi, NJ	49.2	37.7	11.5
Cincinnati, OH	41.7	21.7	20.0
Parlin, NJ	32.7	22.4	10.3
Jersey City, NJ	25.8	8.6	17.2
Overall results	73.1	50.6	22.5

^aResults for the Pittsburgh teleservice center apply to only four of its five public telephone numbers. One number was inadvertently omitted from our test, which had no effect on the statistical results.

Direct access to an SSA representative ranged from less than 2 to 95 percent. Three centers—Seattle, Buffalo, and Jersey City—had an extremely low percentage of calls that were answered directly (see table 2.4). The Seattle and Buffalo center managers told us that all incoming calls to their centers received a recorded message before being answered. The recording, which is a requirement of state or local law, alerts callers that their call may be monitored by a center supervisor to assess the quality of service provided. Jersey City's low percentage of calls answered directly was attributed by the center manager to inexperienced staff, as discussed below.

Overall, 11 of the 34 teleservice centers had difficult-access rates higher than the average of 27 percent. Four centers—Parlin, Cincinnati, Lodi, and Westminster—did not meet the teleservice center standard of no more than 15 percent of all calls receiving a busy signal, as table 2.5 shows.

Chapter 2
SSA Accessibility by Telephone Varies Widely

Table 2.5: Difficult-Access Rates by Teleservice Center

Figures represent percents of calls placed

Teleservice center	Difficult-access rate	Busy rate	Disconnected/terminated calls	Calls on hold longer than 2 minutes
Jersey City, NJ	74.1	13.8	6.9	53.4
Parlin, NJ	67.3	22.4	0	44.9
Cincinnati, OH	58.3	21.7	3.3	33.3
Lodi, NJ	50.8	16.4	19.7	14.7
Buffalo, NY	36.2	12.1	0	24.1
Ft. Lauderdale, FL	35.0	10.0	6.7	18.3
Cleveland, OH	33.3	6.6	10.0	16.7
Jamaica, NY	32.7	10.3	12.1	10.3
San Diego, CA	31.1	8.2	0	22.9
Chicago(S), IL	31.0	3.4	5.2	22.4
Golden, CO	28.2	7.7	0	20.5
Manassas, VA	23.7	11.9	3.4	8.4
Boston, MA	22.4	1.7	1.7	19.0
Berkeley, CA	21.3	3.3	8.2	9.8
Milwaukee, WI	19.0	6.9	1.7	10.4
Westminster, MD	18.7	16.9	0	1.8
Los Angeles, CA	18.6	10.2	1.7	6.7
Detroit, MI	18.3	6.7	1.6	10.0
Seattle, WA	18.3	8.3	0	10.0
Chicago(N), IL	16.7	3.3	5.0	8.4
Portland, OR	15.3	8.5	0	6.8
Tampa, FL	14.8	7.4	1.8	5.6
Indianapolis, IN	13.3	6.7	1.6	5.0
Twin Cities, MN	12.3	0	1.7	10.6
New Orleans, LA	11.9	1.7	3.4	6.8
Kansas City, MO	10.3	3.4	3.4	3.5
Des Moines, IA	10.2	0	3.4	6.8
Houston, TX	10.0	10.0	0	0
Pittsburgh, PA ^a	9.8	6.5	3.3	0
Phoenix, AZ	8.5	5.1	1.7	1.7
Upper Darby, PA	8.3	6.7	0	1.6
Atlanta, GA	6.7	5.0	1.7	0
St. Louis, MO	6.7	3.3	1.7	1.7
Grand Prairie, TX	3.3	0	3.3	0
Overall results	26.9	8.9	4.2	13.8

^aResults for the Pittsburgh teleservice center apply to only four of its five public telephone numbers. One number was inadvertently omitted from our test, which had no effect on the statistical results.

We obtained comments on our test results from the managers of the four centers with the worst access rates

- Lodi—The manager said he had no way to determine the number of callers who received a busy signal or were disconnected because his equipment does not record such data. Hold time during busy periods would continue to exceed SSA standards if staffing remained the same, he stated, adding that his staff of 43 representatives would have to be increased by about 10 to 12 to reduce the number of incoming calls placed on hold longer than 2 minutes.
- Parlin—The test results were probably accurate, according to the manager. He too said that Parlin could not routinely meet the 2-minute average wait time standard unless his staff was larger. An increase from 48 to 63 representatives would help resolve hold time problems, he said indicating that these occurred primarily during the first 2 weeks of the month.
- Jersey City—The manager believed service was pretty good, judging from his own performance statistics and the few complaints he received from SSA field offices in his service area. In the first 6 months of 1985, which included the month we made our test, about one-third of his 77 teleservice representatives were either new or being trained, this, he said, could have affected service levels.
- Cincinnati—The manager was unaware of any service problems based on his performance reports and was surprised by our test results. Since our May 1985 test, he said, he has made some changes, such as opening the center half an hour earlier and spreading out lunch periods to improve service

Both the Lodi and Parlin managers told us that long hold times were an indication of insufficient staff. But our analysis of May 1985 statistics shows that there is not always a direct relationship between available staff, call volume, and on-hold times. For example, the Berkeley teleservice center, with 51.2 full-time equivalent staff, answered 75,672 calls and had an average wait time of 84 seconds for all calls placed on hold by our calculation. In contrast, Parlin with 50.2 full-time equivalent staff, answered 55,259 calls and had an average wait time of 208 seconds for all calls placed on hold.

Another example involves the Lodi and Houston teleservice centers. The Houston center, with 39.6 full-time equivalent staff, answered 76,105 calls and had an average wait time for on-hold calls of 22 seconds, according to our calculations. Lodi, with 40.7 full-time equivalent staff

however, answered 45,458 calls and had an average wait time of 158 seconds for calls on hold.

Some teleservice centers limit their average wait time by establishing call-back policies. This practice is usually followed for telephone inquiries that involve lengthy research. SSA representatives obtain the caller's telephone number and call back after the information is obtained, thus avoiding long holding times. For example, the Jamaica teleservice center follows a strict policy mandating call-backs for calls requiring system queries and for calls during extremely heavy traffic periods.

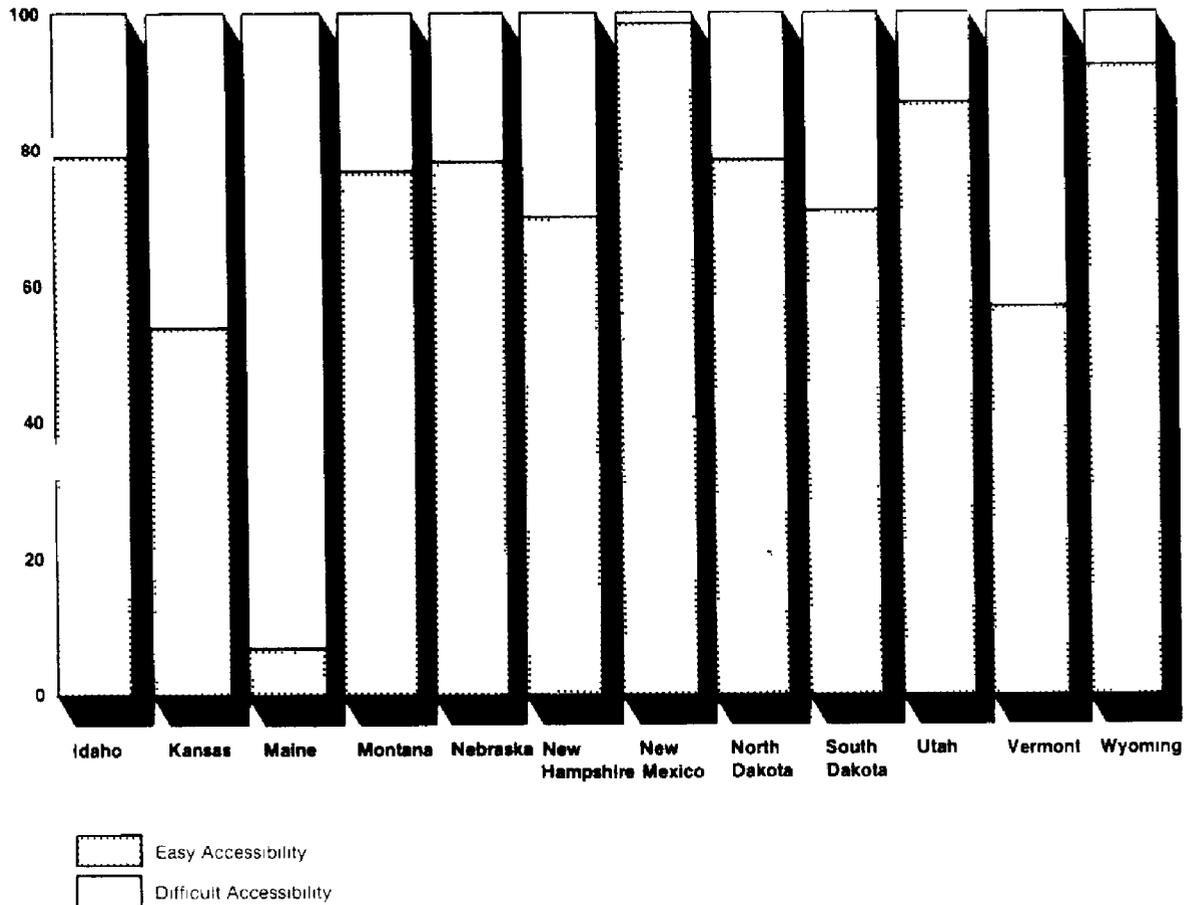
The managers of the Jersey City and Cincinnati teleservice centers cited their performance reports as evidence that their facility's performance was higher than our test showed. However, as we discuss in more detail in chapter 3, we believe that teleservice center performance reporting is misleading and inconsistent and that our test results present a more precise measure of access to these centers.

The Lodi, Cleveland, and Jamaica teleservice centers had the highest percentage of disconnected and/or terminated calls— 19.7, 10.0, and 12.1, respectively, as table 2.5 shows. Caller-terminated calls—which we categorized for our test as those calls not answered within 10 rings—represented most of the calls in this category. In the case of Lodi, three of every four calls in this category were terminated calls. According to an SSA official in the Office of Materiel Resources, a high ratio of caller-terminated calls often indicates insufficient staff to answer the telephone. For calls terminated, teleservice center reports use the difference between the number of incoming calls and the number of calls answered. Disconnected calls, according to the official, are usually the result of equipment malfunctions or human error. Teleservice center reports do not reflect the extent of disconnects.

Access to Statewide Units Also Varied

Like teleservice centers, access to statewide units varied widely. Again, SSA personnel cited staffing situations, such as inadequate personnel to answer the telephones, as a major factor. In addition, they mentioned problems with the assignment of part-time personnel and management of telephone lines and trunks as contributing to variations in access to statewide units. The easy- and difficult-access rates we found in making test calls to each of the 12 statewide units appear in figure 2.3.

Figure 2.3: Telephone Access Rates of Statewide Units



Easy access to statewide units ranged from 97.4 percent for New Mexico to 7.7 percent for Maine. Maine's access rate had a significant adverse influence on the overall rate of 58.5; excluding Maine, the overall rate was 72.8.

With respect to calls answered directly and calls placed on hold for less than 2 minutes, we also found some variation in easy access (see table 2.6). For example, Wyoming with an overall rate of 92.5 percent placed only 10 percent of the calls on hold for less than 2 minutes. In contrast, Utah with an overall rate of 86.5 percent placed 48.7 percent of the calls on hold for less than 2 minutes.

Table 2.6: Easy-Access Rates by Statewide Units

Figures represent percents of calls placed

Statewide unit	Easy-access rate	Calls straight through	Calls on hold less than 2 minutes
New Mexico	97.4	71.1	26.3
Wyoming	92.5	82.5	10.0
Utah	86.5	37.8	48.7
Idaho	78.9	55.3	23.6
North Dakota	78.9	55.2	23.7
Nebraska	77.5	25.0	52.5
South Dakota	71.0	57.9	13.1
Montana	73.2	41.5	31.7
New Hampshire	69.2	25.6	43.6
Vermont	57.5	10.0	47.5
Kansas	54.0	24.3	29.7
Maine	7.7	5.1	2.6
Overall results	58.5	31.7	26.8

We received busy signals on our test calls more frequently than the teleservice center standard of 15 percent when we called five statewide units—Maine (43.5 percent of calls), Vermont (27.5), South Dakota (26.3), Kansas (24.3), and New Hampshire (20.5). (Data on the various problems of difficult access we encountered on calling statewide units—busy signals, disconnected or terminated calls, and calls on hold longer than 2 minutes—are shown in table 2.7.)

Table 2.7: Difficult-Access Rates by Statewide Units

Figures represent percents of calls placed

Statewide unit	Difficult-access rate	Busy rate	Disconnected/terminated calls	Calls on hold longer than 2 minutes
Maine	92.3	43.5	25.7	23.1
Kansas	46.0	24.3	13.5	8.2
Vermont	42.5	27.5	2.5	12.5
New Hampshire	30.8	20.5	0	10.3
Montana	26.8	9.8	0	17.0
South Dakota	29.0	26.3	2.7	0
Nebraska	22.5	5.0	2.5	15.0
North Dakota	21.1	10.5	5.3	5.3
Idaho	21.1	7.9	5.3	7.9
Utah	13.5	2.7	0	10.8
Wyoming	7.5	7.5	0	0
New Mexico	2.6	0	0	2.6
Overall results	41.5	20.4	8.0	13.1

The district manager responsible for the Maine unit told us that he had an average of only two to three staff to answer incoming lines. He was not surprised by the high rate of busy signals we experienced when calling that unit and indicated that terminated calls also were high because people do not like to wait on hold.

Nor was the district manager for the New Hampshire unit surprised to learn that 20 percent of our test calls to it received busy signals. She had only one person to answer the one incoming line, she said, and her own office studies confirmed that an additional line was necessary. No changes had been made, she said; she had not been able to get additional staff or the needed line because SSA is under budgetary constraints.

With regard to the South Dakota unit, the assistant district manager expressed surprise over the high busy rate, but said that because management was not graded on telephone service, this function did not receive the attention it should. The district sends about 30 letters a month to randomly selected callers in South Dakota asking them to rate the telephone service they received. Most responses, he said, have been positive, adding that a spring 1985 office study indicated a 1-percent busy signal rate.

The district manager in Kansas and the assistant manager in Vermont had received no public complaints about telephone access to their state-wide units, they said. Telephone performance data for their units were limited, both indicated.

SSA Performance, Service Affected by Access Problems

SSA telephone answering facilities that experience high busy signal rates, average wait times on hold in excess of 2 minutes, and high disconnect or termination rates affect SSA's overall performance and service to the public. For example, our January 1985 report to the Congress included comments from a number of questionnaire respondents who expressed dissatisfaction with their experiences in reaching SSA by telephone.¹

Walk-in traffic increases when the public is unable to reach SSA by telephone, most field office managers we interviewed agreed. In this regard, a February 1982 study² by SSA's Philadelphia region showed that about 15 percent of the clients surveyed elected to visit a field office because SSA telephones were busy.

In another study, SSA's Office of Management, Budget, and Personnel³ analyzed the reasons for 81,000 visits to field offices during a 1-week period in 1981. The office estimated that 74 percent of the visitors to SSA field offices could have transacted their business by telephone or mail. Effective telephone service has the potential to significantly reduce the volume of face-to-face visits, the study pointed out, and consequently the waiting time of the public who must visit a field office.

Time of Call, Geography Affect Access

In this section, we discuss the results of other analyses we performed on our test data, specifically, SSA telephone accessibility by (1) time of day, day of the week, and week of the month and (2) SSA region. We also computed the average wait time to determine to what extent performance met the teleservice center standard for average wait time.

¹Quality of Services Generally Rated High by Clients Sampled (GAO/HRD-86-8, Jan. 30, 1986)

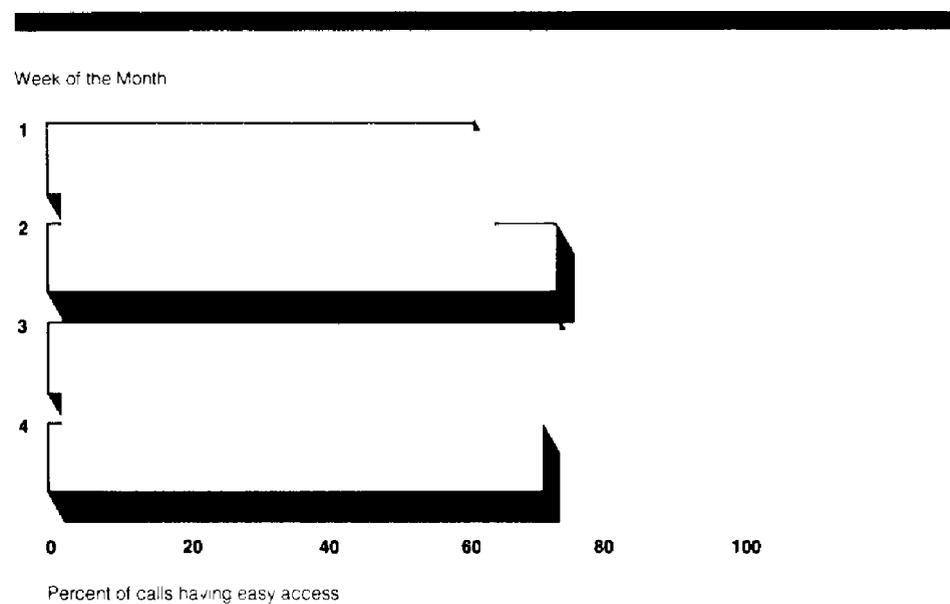
²Results of Reception Area Practices Study, SSA, Philadelphia Regional Office, Feb. 9, 1982

³Service to the Public Walk-in Traffic Study, SSA, Office of Management, Budget, and Personnel, May 1981

Accessibility Varies by When Call Is Made

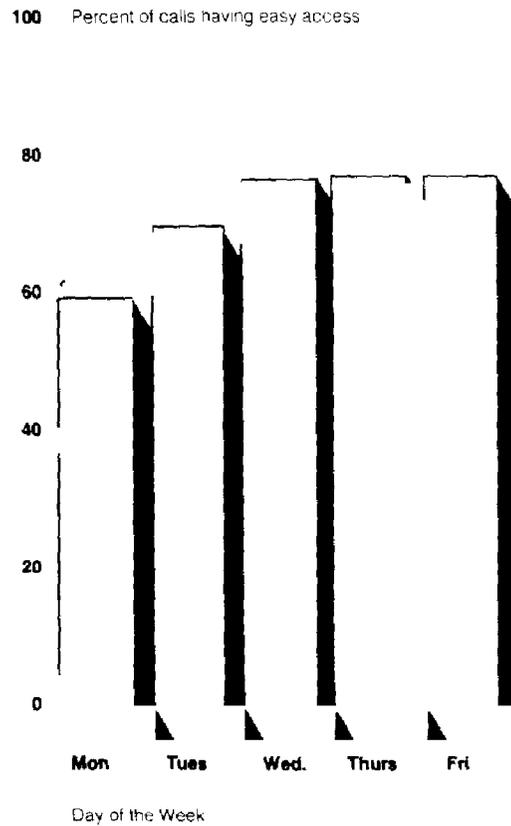
A person's chances of reaching SSA on the first call are better if the telephone call is made later in the week, in the middle of the month, and after 11:00 A.M., periods when SSA work volumes generally are not at their peak. The easy-access rate by week of the month, as derived from our test data, is shown in figure 2.4. Easy-access rates ranged from 64 percent in week 1 to 76.3 percent in week 3.

Figure 2.4: Easy-Access Rates by Week of the Month



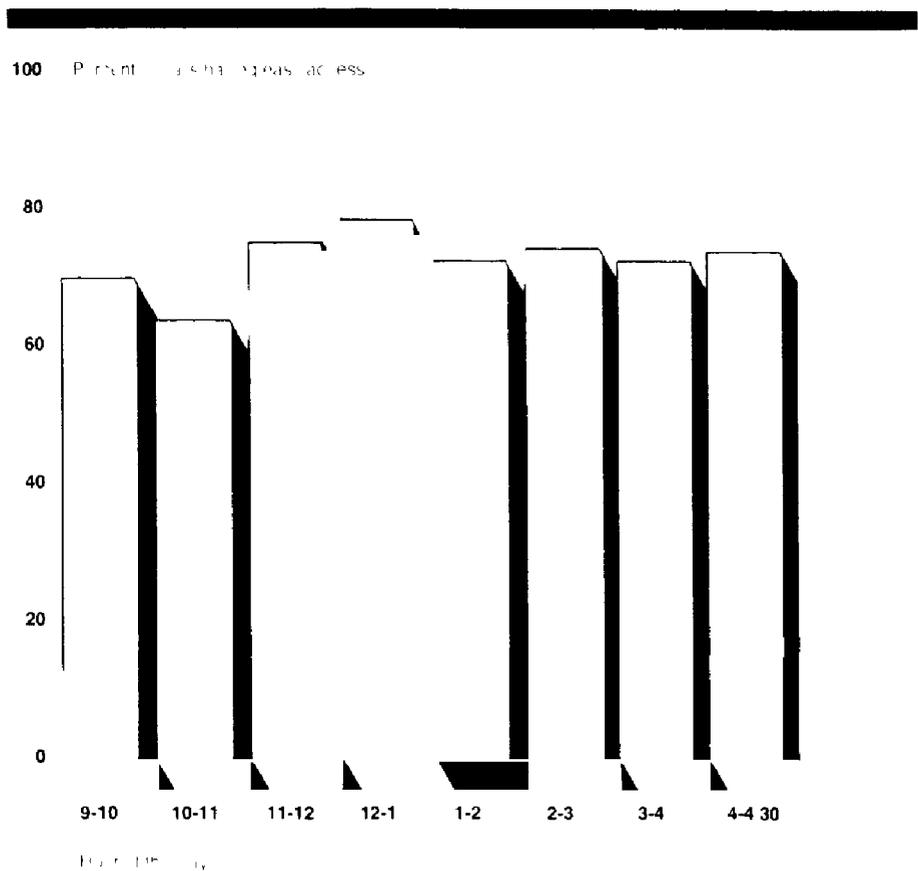
Easy access in terms of calls answered directly or within 2 minutes of being placed on hold varied slightly more widely by day of the week. As shown in figure 2.5, it ranged from 59.7 percent on Mondays to 76.8 percent on Thursdays and Fridays.

Figure 2.5: Easy-Access Rates by Day of the Week



Finally, the hour of day the call is placed matters. Calling SSA before 11:00 A.M. reduces chances of easy access. As figure 2.6 shows, only 69.9 percent of our calls between 9:00 and 10:00 A.M. and 63.1 percent of our calls between 10:00 and 11:00 A.M. were answered directly or within 2 minutes of being placed on hold. By comparison, access after 11:00 A.M. was somewhat better.

Figure 2.6: Easy-Access Rates by Hour of the Day



According to an SSA official in the Office of Materiel Resources, our data as presented in figures 2.4-2.6 reflect the traditional experience with SSA that peak volumes occur early in the day, week, and month. Also mail received by the public on Saturday when SSA is not open for business contributes to the peak volume on Mondays, he told us. Lastly, Social Security beneficiaries and recipients receive their checks on the first and third of the month, he explained, and this is a factor in the increased telephone activity early in the month.

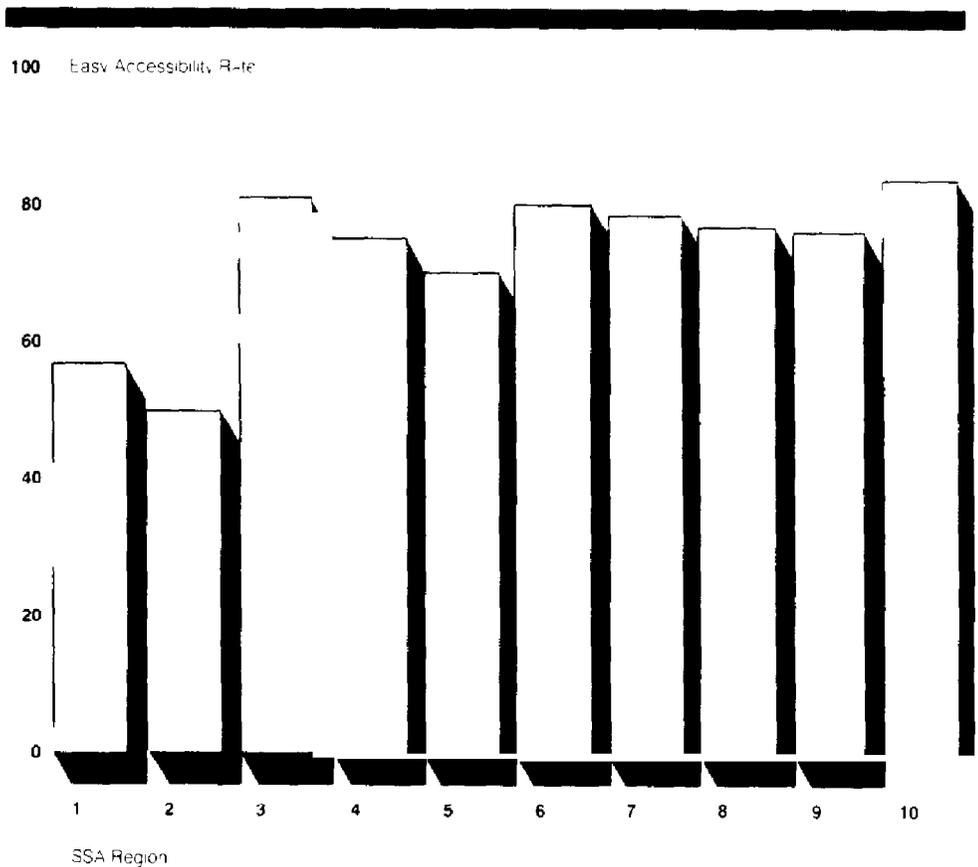
To more evenly distribute the workload, some field offices use the media to inform the public of the best time to call SSA. For example, an SSA manager in New Jersey used the local paper to provide advice to residents concerning the best times to call the Parlin teleservice center. In an interview for an article in the paper, he suggested that the easiest times to get through were after 11:00 A.M. and during the last 2 weeks of every month, except Mondays.

To the extent that the public's calls to SSA are concentrated during certain hours of the day and not randomly distributed as were those we placed during 15-minute intervals throughout the day, access during those hours could be more difficult than the overall averages reflected in this report

Geographic Differences in Accessibility Found

Analyzing our overall test results by SSA region, we found that easy-access rates ranged from about 50 percent in region 2 to 83 percent in region 10 (see fig. 2.7). The lowest performing regions were region 2 (New York) with an overall easy-access rate of about 50 percent and region 1 (Boston), 58 percent.

Figure 2.7: Easy-Access Rates by SSA Region



The easy-access rates by facility type within each region are shown in table 2.8. In the case of region 2, teleservice center performance of 45 percent was largely responsible for the region's low accessibility. In

region 1, however, the statewide unit's performance of 26 percent caused the low accessibility. In contrast, region 10's overall easy-access rate of 83 percent was aided by the performance of teleservice centers and local offices, which had access rates of 83 and 91 percent, respectively

Table 2.8: Easy-Access Rates by SSA Region and Facility Type

No.	Location	Region	Easy-access rate	By facility type (percent)		
				Teleservice centers	Statewide units	Miniteleservice centers
10	Seattle		83.3	83.0	78.9	91.0
3	Philadelphia		80.8	84.6		77.0
6	Dallas		80.0	92.0	97.4	13.0
7	Kansas City		78.0	91.3	61.6	91.0
8	Denver		76.4	71.8	80.1	70.0
4	Atlanta		75.8	78.1		70.7
9	San Francisco		75.8	80.9		66.7
5	Chicago		70.0	73.8		42.6
1	Boston		57.5	77.6	26.0	77.0
2	New York		49.5	44.6		77.0

Wait Time Standard Met by Most Teleservice Centers

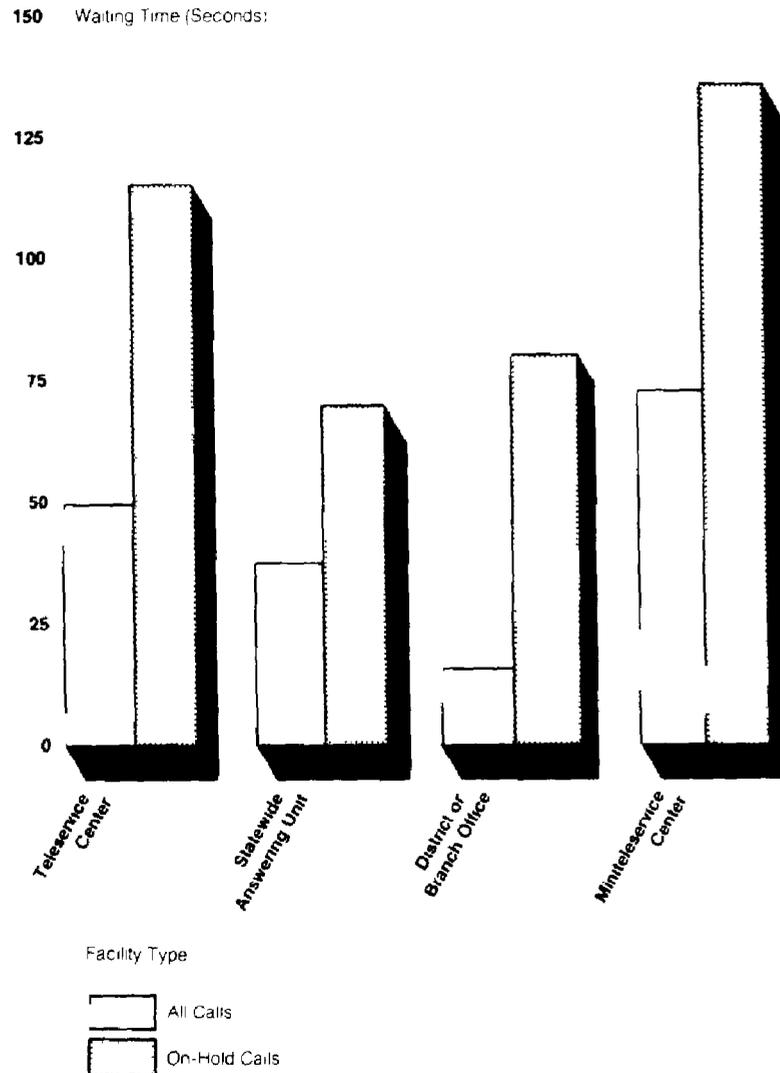
With few exceptions, teleservice center performance, when computed the agency's method, met the average wait time standard. As we discuss in chapter 3, SSA's service-level standards provide that 20 seconds or less is optimal, 21 to 119 seconds is acceptable, and 120 seconds or greater unacceptable

The centers compute average wait time by dividing the total time on hold by the total number of answered calls, including those answered without the caller being placed on hold. On an individual facility basis 32 of 34 teleservice centers met the standard when computed this way. The two that did not were Parlun and Jersey City, which had average wait times of 148 and 200 seconds, respectively

While teleservice center performance in this respect appears good, we believe the way average wait times are computed tends to distort actual time on hold. For example, computing average wait time using only on-hold calls significantly changes the average wait time and results in 11 of the 34 teleservice centers not meeting the average wait time standard. In figure 2.8, we compare average wait times for our test calls (by facility) as computed by our method (based on on-hold calls only) with

average wait times as computed by SSA's method (based on all calls)
(This issue is discussed in more detail in ch 3)

Figure 2.8: Average Time on Hold (All Calls vs On-Hold Calls Only), by SSA Facility Type



As the graph shows, miniteservice centers are particularly illustrative of the distortion in computing average wait times. Using all calls answered in our test, miniteservice centers had an average wait time of 73 seconds. However, using on-hold calls only, miniteservice centers had an average wait time of 136 seconds, which is above the 2-minute standard applicable to teleservice centers.

SSA Responses Deemed Courteous, Accurate

SSA representatives generally provided courteous, accurate responses. During our test, over 99 percent of the SSA representatives responded courteously in the judgment of the individual placing the call. For over 95 percent of the calls that reached SSA, the representatives provided an accurate answer.

As noted earlier, by design we selected questions that were not considered difficult to answer because we did not want to be (1) put on hold while the representative researched the answer or (2) referred to another individual assigned to respond to complicated or time-consuming inquiries. The above situations likely would have occurred had we asked questions involving a specific claim, payment, earnings record, or social security number.

SSA's accuracy and courtesy as measured by our test essentially parallel the data SSA compiles on the quality of the responses provided by teleservice center representatives. Each month, supervisors observe or listen to a sample of calls and rate the response on courtesy, accuracy, and other factors. (See app. III for the teleservice center standard and the rating form.) Teleservice centers report monthly on the quality of the responses provided by their representatives. For May 1985, 97 percent of the calls sampled were rated by the supervisors as satisfactory or better.

Conclusions

Overall, the public stands a 3 out of 4 chance of reaching SSA either directly or within 2 minutes of being placed on hold. Accessibility varies, however, depending on which telephone answering facility is called and when the call is placed.

SSA needs to determine whether the factors cited by its managers are resulting in some facilities not complying with service-level standards and should take appropriate action to bring such facilities into compliance. Specific actions needed to improve accessibility will depend on the situations of the individual telephone answering facilities.

Recommendation to the Secretary of Health and Human Services

We recommend that the Secretary of Health and Human Services direct the Commissioner of Social Security to:

- Take steps to bring into compliance those facilities not meeting service level standards.

Agency Comments

SSA agreed to implement the recommendation

Standards and Performance Data Needed to Monitor Telephone Service

SSA has developed service-level standards for teleservice centers, but not for other central answering units or local offices. In addition, SSA knows little about how easy or difficult it is for the public to reach SSA by telephone. Limited information is available on teleservice center performance, but for miniteleservice centers, statewide units, and local offices there is little information on telephone service they provide.

Development of Teleservice Center Standards

In 1981, SSA conducted a study focusing on the levels of service provided by teleservice centers to reevaluate the usefulness and effectiveness of its established service standards. The standards, then in effect (since 1971), included a busy signal rate not to exceed 4 percent and a requirement that speed of answer (the time a call is on hold awaiting initial service by an SSA representative) average 12 to 15 seconds.

To determine how other organizations that deal with the public evaluate levels of telephone service, SSA contacted eight other organizations. SSA data on the organizations and their service-level standards are summarized in table 3.1.

Table 3.1: Telephone Service Standards of Selected Organizations

Organization	Busy signal rate ^a (percent)	Speed of answer ^b (seconds)
Federal agency	10	20
Airline company	5	
Car rental company	1	
Health insurance provider	•	
Department store	•	
Credit card company	2	
Public utility	25	
Hotel chain	5	

^aAs a percent of calls received

^bAccording to SSA, the speed of answer being used by the various organizations included all calls answered

^cFor 85 percent of calls

After analysis of regional suggestions and consideration of equipment capability, SSA concluded that the rate of busy signals, average speed of answer, and quality of the SSA representatives' responses were the best measures of service provided to the public by teleservice centers. SSA standards applicable to teleservice centers were issued and became

effective October 1, 1984. They are included in full in appendix III and can be summarized as follows:

1 Rate of "all trunks busy" (ATB, a measure of the frequency with which all lines are busy):

Optimal - 5 percent or less

Acceptable - 6 to 15 percent

Unacceptable - 16 percent or more

2 Average waiting time (a measure of the average time a caller is on hold):

Optimal - 20 seconds or less

Acceptable - 21 to 119 seconds

Unacceptable - 120 or more seconds

3. Quality of SSA representative response (a written evaluation by the supervisor of the technical correctness, courtesy, and responsiveness of the SSA representative handling the call).

Teleservice centers must report their performance against these standards monthly. As can be seen, the revised standards are more relaxed than those established in 1971. SSA cited increased program complexity, telephone equipment limitations, and difficulty in complying with the more stringent requirements as reasons for revising the standards

Data on Teleservice Center Accessibility Limited

To measure the public's access to teleservice centers, SSA relies on two key indicators: the rate of busy signals and the average wait time on hold

Busy Signal Data of Limited Usefulness

As of April 30, 1986, the 34 teleservice centers did not have equipment capable of recording and reporting actual busy signals. As an alternative, SSA requires teleservice centers to use all-trunks busy data to measure the extent to which lines are busy. A trunk is a group of telephone lines that handle calls from a particular geographic area. All-trunks busy data is collected to show either the percentage of time or the number of times all lines in a trunk are busy

As of March 1986, only seven teleservice centers were reporting the percentage of time, and only one center was reporting the number of times

all trunks were busy. According to an SSA official in the Office of Material Resources, the centers that do not report all-trunks busy data either lack equipment capable of recording such data or do not report the data because of other problems. For example, the teleservice center manager in Atlanta stated that, although the telephone equipment generates numerous reports on an hourly, daily, weekly, and monthly basis, she did not know how to extract the relevant information. Consequently, all-trunks busy data are not reported by the Atlanta teleservice center.

According to SSA's operating instructions, actual busy signal data provides a truer measure of the public's ability to reach SSA by telephone than all-trunks busy data. In our opinion, neither the percentage of time or the number of times trunks are busy provides a precise measure of the number or percentage of incoming calls that actually receive a busy signal. To illustrate, we compared our May 1985 test results with data from the seven teleservice centers that reported the percentage of time all trunks were busy that month (see table 3.2).

Table 3.2: Comparison of SSA and GAO Busy Signal Calculations for Teleservice Centers Reporting All Trunks Busy

Teleservice center	SSA data: percent of time lines busy	GAO data: percent test calls busy
Boston	1.9	
Westminster	1.9	
Chicago-South	15.7	
Milwaukee	7.5	
Los Angeles	2.4	16.9
Phoenix	15.4	
Seattle	1.9	

There is no consistent relationship between teleservice center-reported data and our findings on actual busy signals, as the table shows. For example, the Westminster center reported an all-trunks busy rate of only 1.9 percent for May, but 16.9 percent of our test calls got a busy signal. In contrast, the Chicago-South center reported an all-trunks busy rate of 15.7 percent for May, while only 3.4 percent of our test calls got a busy signal. As we discussed in chapter 2, the problem of busy signals may be greater than the data indicate. Our calls were placed randomly throughout the day. To the extent that calls are concentrated earlier in the day, week, or month, as we mention in chapter 2, a higher percentage of busy signals could occur at these times.

Average Wait Time Data
Misleading

When the current teleservice center standards were published in October 1984, only a few centers had the capability to measure average wait time. As an interim measure, SSA required the centers to report a call completion rate, computed by dividing the monthly number of answered calls (callers reaching an SSA representative) by the monthly number of incoming calls that got through to the center. SSA set the "unacceptable" rate at 82 percent or less. Call completion rates do not measure how long callers are kept on hold but rather how often they tire of waiting and decide to hang up.

In 1984, SSA upgraded the teleservice centers' telephone systems by purchasing and installing new automatic call distributors in 22 centers. The upgrading was done in anticipation of significant workloads resulting from the taxation of certain SSA benefits beginning in January 1985. As a result of the acquisition, most centers are now capable of measuring average wait time, and as of March 1986, 26 of the 34 teleservice centers were reporting such data. The recent equipment upgrades that enable centers to report average wait time give SSA needed performance data. We believe, however, that the way the teleservice centers continue to compute average wait time tends to distort their performance and should be changed.

Centers compute average wait time on hold by dividing total wait time by the number of calls answered, which includes calls answered without placing the caller on hold. As noted (see p. 38), using this method, our test showed that only two centers failed to meet the standard of 119 seconds or less. Computing average wait time, however, on the basis of the number of calls actually placed on hold increases the number of teleservice centers that exceed the 2-minute standard. Under this method, 10 centers did not meet the wait time standard. Results of using the two methods to compute average wait time for the 10 facilities are compared in table 3.3.

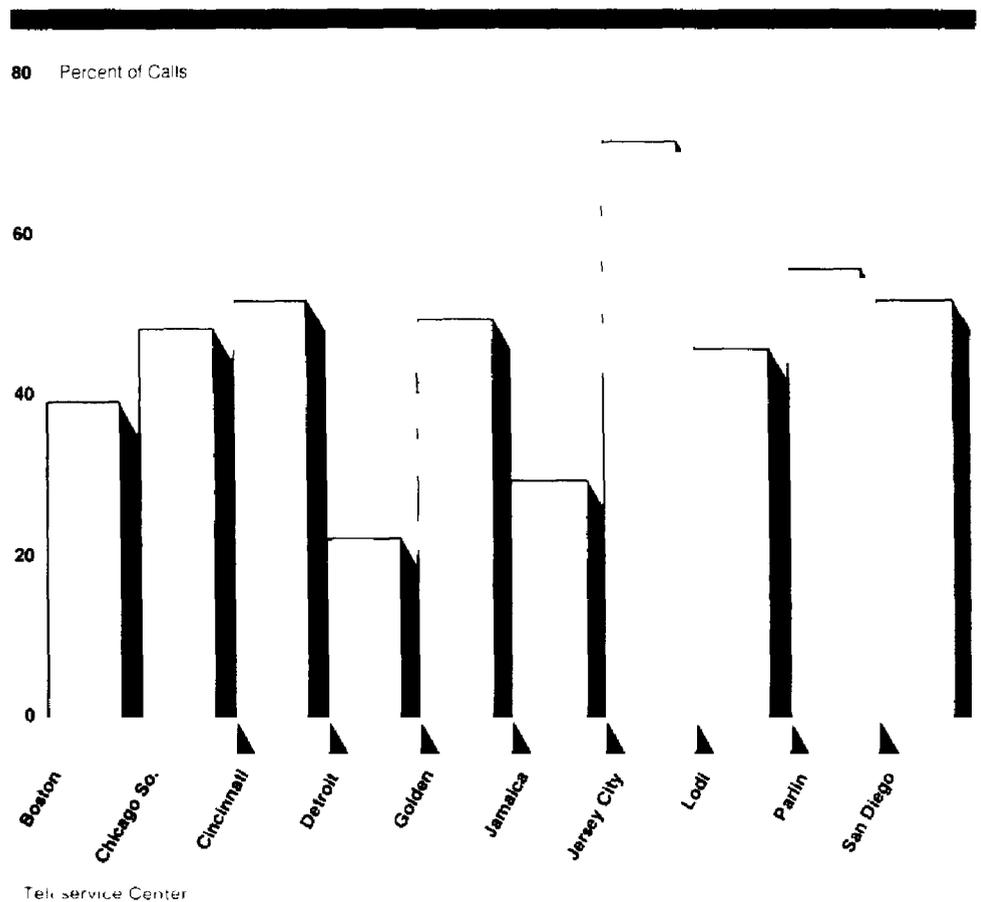
Chapter 3
 Standards and Performance Data Needed to
 Monitor Telephone Service

**Table 3.3: Comparison of Two Methods
 for Calculating Average Telephone Wait
 Time for 10 Teleservice Centers**

Teleservice center	Average wait time (in seconds) based on	
	All calls answered	On-hold calls only
Boston	58	
Chicago-South	68	
Cincinnati	117	
Detroit	36	
Golden	69	
Jamaica	46	
Jersey City	200	
Lodi	65	
Parlin	148	
San Diego	34	

A dramatically different picture of teleservice center performance emerges when wait time is computed on the basis of only calls on hold as the table shows. The San Diego center particularly illustrates this point. SSA's computation indicates that the teleservice center is performing well, with an average wait time of 34 seconds. Considering on-hold calls only, however, shows that the average wait time is 186 seconds. In other words, persons put on hold by the San Diego center (over half of the callers to that facility) are kept on hold for an average of over 3 minutes. The percentage of our test calls that were placed on hold for the 10 teleservice centers that did not meet the standard, using on-hold calls only, is shown in figure 3.1.

Figure 3.1: Percentage of GAO Test Telephone Calls Placed on Hold, by Teleservice Center



Other Performance Data Lacking

Neither SSA's headquarters nor its 10 regional offices have established performance standards for miniteleservice centers, statewide units, or local offices. The Denver Regional Commissioner, commenting in 1983 on the proposed standards for teleservice centers, stated that the need for criteria on acceptable levels of service also existed for miniteleservice centers. Commenting on the same issue, the Boston Regional Commissioner said that miniteleservice centers would have to upgrade their equipment if the intention was to hold miniteleservice centers accountable for meeting teleservice center standards.

Only four of eight regions that have statewide units or miniteleservice centers require some type of performance reporting. The reporting that is required concerns workloads (e.g., number of calls answered). Information is not reported on busy signals or wait time on hold because

statewide units and miniteleservice centers either lack the equipment capability or were not asked to record and report such data.

For local offices, telephone traffic data are not routinely reported to or evaluated by headquarters or the regions. According to SSA officials at both levels, local managers are responsible for monitoring their office telephone traffic patterns and reporting problems. As a result, SSA has little information with which to evaluate the telephone service of statewide units, miniteleservice centers, and local offices.

Conclusions

SSA should improve the monitoring of its telephone service. Service-level standards should be established for all SSA telephone facilities, including local offices, statewide units, and miniteleservice centers. Once done, SSA should periodically measure telephone accessibility against the established standards as a means to monitor performance for all its telephone answering facilities and to determine which facilities provide service below standards.

Collecting and obtaining performance data on a monthly basis from miniteleservice centers, statewide units, and local offices, as is required by SSA for teleservice centers, could entail an additional expense and prove costly during a period of budgetary constraints. The extent of such additional cost would depend largely on the capability of the facilities' equipment to measure accessibility, a capability not existent at many facilities. Periodically testing telephone accessibility against established standards, as we did, could provide a less costly alternative that would measure overall service and could determine which facilities are not meeting access standards. SSA could consider using or modifying the computer-assisted telephone interviewing program we used to sample telephone facilities. To assist SSA in this regard, we are making our computer program available to SSA for its use.

Also, SSA should compute average wait time on the basis of calls on hold, not all calls answered. This would give a more accurate indication of length of time the caller waits to talk to an SSA representative.

Recommendations to the Secretary of Health and Human Services

- We recommend that the Secretary of Health and Human Services direct the Commissioner of SSA to
- Clarify the average wait time standard to require that only calls on hold be used in computing the average.

Chapter 3
Standards and Performance Data Needed to
Monitor Telephone Service

- Develop busy signal and average wait time standards for telephone calls to miniteleservice centers, statewide units, and local offices.
- Periodically measure and evaluate service provided by SSA's telephone answering facilities against established standards

Agency Comments

SSA said that it would develop and compare alternatives to the present average wait time standard and keep GAO informed of its progress. With respect to developing standards for nontele-service center facilities and periodically measuring and evaluating service, SSA agreed with GAO's recommendations. Further, as a first step in implementing the recommendations, SSA said it would collect data on the service currently provided by these facilities.

Sampling and Estimation Methodology

The purpose of our test was to assess the public's access to SSA by telephone. Our results are based on a nationwide telephone survey, conducted May 3-31, 1985, of SSA's telephone facilities. It included (1) teleservice centers, (2) statewide units, (3) miniteleservice centers, and (4) local (district and branch) offices. The universe of facilities, the proportion of the national population served, and numbers of calls made are presented below.

Table I.1: GAO Survey: Sample Size by Facility Type

Facility type	No.	Approximate percent of U.S. population served	No. of calls made	Percent sampled
Teleservice centers	34	49.0	1,991	4
Statewide units	12	5.5	465	1
Miniteleservice centers	20	6.5	352	3
Local offices	627	39.0	1,236	3
Total	693	100.0	4,044	10

Sample Sizes Statistically Reliable

We computed sample sizes (that is, the number of sample telephone calls to be made) to provide statistically reliable estimates for each of the 34 teleservice centers and the 12 statewide units. Conversely, sample sizes for miniteleservice centers and local offices were sufficient for statistically reliable estimates for each of these two groups as a whole, but not for individual facilities. To obtain statistically reliable estimates for individual miniteleservice centers and local offices would have required the number of test telephone calls to be about four times larger, requiring considerably more time and resources. Sample sizes were selected to assure a sampling error of no more than plus or minus 5 percent at the 95-percent level of statistical confidence for each type of facility.

Sample Design and Estimates

We first identified all telephone numbers by which the public could call each of SSA's 693 facilities. We then developed a matrix dividing each workday into 15-minute intervals. The intervals spanned 9:00 A.M. to 4:30 P.M. local time at the facility to be called, this is the official work schedule followed by virtually all SSA regional and field offices. We then randomly assigned sample calls to the telephone numbers available in a time interval. The call was made at any time within the interval that a caller became available. We made calls to each of the 34 teleservice centers, 12 statewide units, and 20 miniteleservice centers, and to

**Appendix I
Sampling and Estimation Methodology**

413 of the 627 local offices that were randomly selected based on our sampling plan. We computed the estimates presented in this report by applying appropriate weighting factors to reflect the varying sampling ratios for each facility

Our estimates of easy-access rates and the associated sampling errors computed at the 95-percent level of statistical confidence are presented in tables I.2 and I.3. That is, the odds are 19 out of 20 that the actual performance in each group would be within the range resulting from adding and subtracting the sampling error from the estimate.

Table I.2: Easy-Access Rates and Associated Sampling Errors, by Facility Type

Figures represent percents of calls placed, sampling errors in parentheses

Facility type	Easy-access rate	Calls straight through	Calls on hold less than 2 minutes
Teleservice centers	73.1 (2.1)	50.6 (2.3)	22.5 (2.0)
Statewide units	58.5 (4.3)	31.7 (4.2)	26.8 (4.2)
Miniteleservice centers	60.8 (5.1)	37.1 (5.1)	23.7 (4.5)
Local offices	76.1 (2.4)	64.0 (2.7)	12.1 (1.8)
Total	72.6 (1.4)	54.0 (1.6)	18.6 (1.2)

**Appendix I
Sampling and Estimation Methodology**

Table I.3: Estimates of Easy-Access Rates for Teleservice Centers

Figures represent percents of calls placed; sampling errors in parentheses

Teleservice center	Easy-access rate	Calls straight through	Calls hold time that minute
Grand Prairie	96.7 (4.5)	95.0 (5.5)	1.7 (1.1)
Atlanta	93.4 (6.3)	66.7 (11.9)	26.7 (1.1)
St. Louis	93.3 (6.3)	78.3 (10.4)	15.0 (1.1)
Upper Darby	91.7 (7.0)	71.7 (11.4)	20.0 (1.1)
Phoenix	91.5 (7.1)	76.3 (10.8)	15.2 (1.1)
Pittsburgh	90.2 (7.5)	41.0 (12.3)	49.2 (1.1)
Houston	90.0 (7.6)	68.3 (11.8)	21.7 (1.1)
Des Moines	89.8 (7.7)	55.9 (12.6)	33.9 (1.1)
Kansas City	89.7 (7.8)	69.0 (11.9)	20.7 (1.1)
New Orleans	88.2 (8.2)	72.9 (11.3)	15.3 (1.1)
Twin Cities	87.7 (8.5)	64.9 (12.4)	22.8 (1.1)
Indianapolis	86.6 (8.6)	68.3 (11.8)	18.3 (1.1)
Tampa	85.2 (9.5)	50.0 (13.3)	35.2 (1.1)
Portland	84.7 (9.2)	55.9 (12.7)	28.8 (1.1)
Chicago (N)	83.3 (9.4)	60.0 (12.4)	23.3 (1.1)
Detroit	81.7 (9.8)	70.0 (11.6)	11.7 (1.1)
Seattle	81.6 (9.8)	3.3 (4.5)	78.3 (1.1)
Los Angeles	81.4 (9.9)	66.1 (12.1)	15.3 (1.1)
Westminster	81.3 (9.9)	61.0 (12.4)	20.3 (1.1)
Milwaukee	81.0 (10.0)	50.0 (12.9)	31.0 (1.1)
Berkeley	78.7 (10.3)	60.7 (12.3)	18.0 (1.1)
Boston	77.6 (10.7)	56.9 (12.7)	20.7 (1.1)
Manassas	76.3 (10.9)	47.5 (12.7)	28.8 (1.1)
Golden	71.8 (14.1)	43.6 (15.6)	28.2 (1.1)
Chicago (S)	68.9 (11.9)	44.8 (12.8)	24.1 (1.1)
San Diego	68.9 (11.6)	41.0 (12.3)	27.9 (1.1)
Jamaica	67.3 (12.1)	48.3 (12.9)	19.0 (1.1)
Cleveland	66.7 (11.9)	36.7 (12.2)	30.0 (1.1)
Ft. Lauderdale	65.0 (12.1)	40.0 (12.4)	25.0 (1.1)
Buffalo	63.8 (12.4)	1.7 (3.3)	62.1 (1.1)
Lodi	49.2 (12.5)	37.7 (12.2)	11.5 (1.1)
Cincinnati	41.7 (12.5)	21.7 (10.4)	20.0 (1.1)
Parlin	32.7 (12.1)	22.4 (10.7)	10.3 (1.1)
Jersey City	25.8 (11.3)	8.6 (7.2)	17.2 (1.1)
Total	73.1 (2.1)	50.6 (2.3)	22.5 (1.1)

GAO Telephone Accessibility Test Questions

1 At what rate is earned income taxed for Social Security purposes?

Answer: 7.05 percent

2 What are the maximum earnings subject to Social Security taxes for someone who is under 65 and is still working (for 1985)?

Answer: \$39,600

3 What is the maximum amount of earnings that can be taxed for a self-employed person (in 1985)?

Answer: \$39,600

4 For 1985, how much must a person earn to qualify for one quarter of coverage?

Answer: \$410 per quarter

5 What is the earnings limitation in 1985 for a person who is 67 years old, still works, and receives Social Security benefits?

Answer: \$7,320 for an individual between 65 and 69 years of age

6 What is the earnings limitation in 1985 for a person who is 63 years old, still works, and receives Social Security benefits?

Answer: \$5,400 for an individual under 65 years of age

7 Under the earnings limitation rules, does investment income count towards the earnings threshold?

Answer: No, only income earned from work counts toward limitations

8 How long is the waiting period before disability benefits begin after a person has been determined eligible for benefits?

Answer: 5 months

9 Are survivors' benefits subject to cost-of-living increases?

Answer: Yes.

10 If a person continues working beyond age 65, is he/she still able to receive Medicare benefits?

Answer: Yes

11 What is the monthly premium in 1985 for part B of Medicare?

Answer: \$15.50

12 Are X-rays covered under Medicare?

Answer: Yes

13 Does Medicare pay for eye examinations for eyeglasses?

Answer: No

14 Does Medicare cover the costs for routine physical examinations?

Answer: No.

15 Does Medicare cover medical care received out of the U.S.?

Answer: Generally no

16. How long prior to the time of retirement should a person file an application for benefits?

Answer: 2 to 3 months.

17 When a person receiving disability benefits turns 65, does he/she need to reapply for retirement benefits?

Answer: No, disability benefits are automatically converted to retirement benefits at age 65.

18 How old does a widow have to be before she can collect disability benefits on her dead husband's account?

Answer: 50 years old

19 Can a person own a home and still be able to get Supplemental Security Income?

Answer Yes, but the house must be the person's primary residence

20 What evidence do I need to get a Social Security number for my child?

Answer. A birth certificate or religious record of birth or baptism

21. Can a husband and wife each get their own checks instead of a combined check?

Answer Yes.

22. If a person becomes a new federal employee in 1985, is he/she required to pay into Social Security?

Answer: Yes

23 Can a person's Social Security check be deposited directly into his/her savings account?

Answer Yes.

24 When a person reaches age 65, does he/she automatically begin to receive Social Security benefits if eligible?

Answer: No An application must be filed to receive benefits

25. How long does a person collecting disability benefits have to wait before being eligible for Medicare?

Answer 24 months

SSA Service Standards for Teleservice Centers

(Source SSA Administrative Instructions Manual System)

18.01.00 Table of Contents	18 01 01 Purpose 18 01 02 Policy 18.01 03 Responsibilities 18 04 04 Public's Expectations 18 01.05 Level of Service Indicators and Standards 18.01 06 Attachment A. Form SSA-947-U2-Evaluation of Interviewing Practices
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18.01.01 Purpose	This instruction establishes key measures for evaluating the levels of service provided by SSA's Teleservice Centers (TSCs) It describes the level of service indicators and standards that will be used to evaluate how well TSC's are fulfilling their assigned role from the public's perspective It does not apply to mini-TSC's
------------------	--

18.01.02 Policy	The role of the TSC is to answer incoming telephone inquiries from the public and to handle as many as possible to completion at the time of call Receptioning incoming calls (i e., taking the caller's name and telephone number without determining the reason for the call and then calling back) does not meet the objective of completing the call at the time it is received Work transferred by District Offices/Branch Offices for processing by TSC personnel, commonly referred to as "downtime workload," may be assigned to the TSCs to allow for efficient use of personnel when they are not busy on the telephone but only to the extent that such work does not interfere with the TSC's basic mission of answering telephone inquiries.
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18.01.03 Responsibilities	The TSCs, Area Directors, Regional Offices and Office of Field Operations are responsible for monitoring the level of service indicators If a TSC performing at an unacceptable level in any area, local, area and regional management will determine the cause and take remedial action to enable the TSC to operate at an acceptable level
---------------------------	--

18.01.04 Public's Expectations	From the public's perspective, the TSC's exist to answer the telephone and provide answers to questions. Therefore, the public is concerned with
--------------------------------	--

A Being able to reach the TSC by telephone

B Being able to speak to a Teleservice Representative (TSR) as soon as possible, and

C Receiving a courteous, accurate, and complete reply.

8.01.05 Level of Service
Indicators and Standards

A The indicators that will best reflect the public's expectations of good telephone service are

- 1 A measure of the rate of all trunks busy,
2. A measure of the average waiting time before reaching a TSR; and
3. A measure of the quality of TSR response

B Three levels of service have been developed to assess the TSC's monthly performance for the rate of all trunks busy and average waiting time indicators. They are.

1 Optimal—The maximum level to which the TSC should aspire. At this level, management should determine how further improvements can be achieved through means other than the additional commitment of available resources. For example, diverting personnel from other TSC operations to answer telephones may not be cost-effective or desirable if it results in slight performance gains

2 Acceptable—The range into which TSC performance should fall on average

3 Unacceptable—The level to which performance should not fall and at which action must be taken to improve performance

C Performance should be assessed on a monthly basis to account for workload fluctuations during the month. The assessment will be based on the following indicators and standards

1 RATE OF ALL TRUNKS BUSY (ATB)

A Although busy signal data provide a truer measure of the public's ability to reach a TSC, the TSC's do not have the capability to routinely

capture these data. Since these data must be obtained from the telephone company, usually at a fee, the ATB rate will be used as the performance measurement.

B. The monthly standards for rate of all trunks busy are:

Optimal 5%
Acceptable 6%-15%
Unacceptable 16%

C. With some exceptions, TSC equipment provides ATB data as either the number of times all lines in a trunk group are busy or the percent of time all lines in a trunk group are busy.

D. Where the equipment gives the number of ATB's, the ATB rate is calculated by dividing the monthly number of ATB's by the total number of incoming calls. Where the equipment gives the percent of time ATB, the rate is calculated by dividing the cumulative weekly rate by the number of weeks in a reporting month.

E. Although the acceptable range is 6 percent-15 percent, a consistent monthly rate of 10 percent or higher should be viewed by management as an indicator of a possible problem requiring further study.

2. AVERAGE WAITING TIME

A. The average waiting time is the length of time a caller is on hold before being connected with a TSR. Average waiting time should not include messages explaining that the call will be monitored for quality assurance purposes when the length of the message directly increases waiting time. For example, the caller receives the message immediately upon reaching the TSC or upon being connected with a TSR. If the call is first placed on hold because there is no available line, and the message is given during this hold period, then the message time is not excluded since waiting time resulted from the nonavailability of lines and not from a service observation message.

B. The monthly standards for average waiting time are:

Optimal 20 seconds
Acceptable 21 to 119 seconds
Unacceptable 120 seconds

C At the current time, only a few TSC's have equipment which can measure average waiting time. However, the specifications for all future equipment include this capability.

D In the interim, monthly call completion rates will be used in lieu of the average waiting times. The monthly call completion rate is the percent derived by dividing the monthly number of answered calls (callers reaching a TSR) by the total monthly number of incoming calls to the TSC. When call completion rates are used in lieu of average waiting times, the following monthly standards will be used.

Optimal 95 percent
Acceptable 83-94 percent
Unacceptable 82 percent

Therefore, if a TSC's monthly call completion rate is averaging 82 percent or less, remedial action should be initiated.

3 QUALITY OF TSR RESPONSE

A The quality of a telephone response encompasses not only the technical correctness of what the TSR tells the caller but also the courtesy and responsiveness shown by the TSR, the completeness of the interview and the TSR's control of the interview. The quality of a TSR's response should be evaluated and rated unsatisfactory, satisfactory or exceptional using service observation of calls by TSC supervisors. The written evaluation and documentation should be recorded on Form SSA-947-U2-Evaluation of Interviewing Practices (Attachment A).

B Supervisors should consider the following elements in rating a call satisfactory:

- Professional interviewing. The TSR.
 - Is courteous
 - Controls the interview
 - Tailors language to the caller's level of understanding
 - Avoids jargon
 - Identifies himself/herself by name
- Technical knowledge. The TSR.
 - Gives correct information

Appendix III
SSA Service Standards for
Teleservice Centers

- Takes correct action
- Properly uses queries
- Safeguards confidential information

- Information/Referral The TSR.
 - Makes proper referrals to district/branch offices
 - Elicits enough information to complete appropriate referrals

C This list is not intended to be all-inclusive. Also, a minor flaw in the call would not necessarily be cause for rating it unsatisfactory. Supervisory personnel need to use judgement in each individual case to determine if the caller was well served and the Agency's objective was met.

D. "Exceptional" ratings should be reserved for calls in which the TSC displayed extraordinary skill, tact, and sensitivity in handling a difficult call.

E Data reflecting TSC performance in these areas will be included on the Teleservice Center Weekly Report (YY 359). The data should be reported in accordance with the instructions contained in Chapter 58 of the Management Information Manual Part II (MIM-II).

Advance Comments From the Department of Health and Human Services



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of Inspector General

JUL 17 1986

Mr. Richard L. Fogel
Director, Human Resources
Division
U.S. General Accounting Office
Washington, D.C. 20548

Dear Mr. Fogel:

The Secretary asked that I respond to your request for the Department's comments on your draft report, "Social Security: Improved Phone Accessibility Needed to Better Serve the Public." The enclosed comments represent the tentative position of the Department and are subject to reevaluation when the final version of this report is received.

We appreciate the opportunity to comment on this draft report before its publication.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "R. Kusserow".

Richard P. Kusserow
Inspector General

Enclosure

**Appendix IV
Advance Comments From the Department of
Health and Human Services**

THE DEPARTMENT OF HEALTH AND HUMAN SERVICES' COMMENTS ON THE
GENERAL ACCOUNTING OFFICE DRAFT REPORT, "IMPROVED PHONE
ACCESSIBILITY NEEDED TO BETTER SERVE THE PUBLIC"

General

This report, one of a series on Social Security Administration (SSA) service to the public, discusses the results of a General Accounting Office (GAO) nationwide test to reach SSA by telephone. To test SSA's accessibility by telephone, GAO made 4,044 random calls in May 1985 to all types of SSA telephone answering facilities, nationwide. GAO recorded each call's outcome and classified calls answered directly, or within 2 minutes of being put on hold, in an "easy accessibility" category. Busy signal calls, calls on hold more than 2 minutes, disconnects, and calls not answered after 10 rings were classified under "difficult accessibility." Seventy-three percent of the GAO test calls were classified as easy access and 27 percent as difficult access. Regional and facility variations and variations by type of facility are treated in the report.

The auditors also noted that, while we have accessibility standards for our teleservice centers, our other types of public contact facilities do not have specific standards for telephone accessibility.

We were pleased to note that, in the judgment of the GAO personnel placing the calls, more than 99 percent of our representatives were courteous, and the vast majority provided accurate answers to the test questions.

GAO Recommendation

That the Secretary of Health and Human Services direct the Commissioner of Social Security to:

- Take steps to bring into compliance those facilities not meeting service level standards;

Department Comment

We agree, and we will do so

GAO Recommendation

- Revise the average waiting time standard to require that only calls on hold be used in computing the average;

**Appendix IV
Advance Comments From the Department of
Health and Human Services**

2

Department Comment

We agree that a more precise measure of waiting time could be desirable, but not necessarily the specific one the report recommends. There may be other potentially more effective alternatives; for example, waiting time pars expressed as a percentage of calls answered within certain timeframes. We intend to compare various alternatives to the present standard and will keep GAO informed of our progress.

GAO Recommendations

- Develop busy signal and average waiting time standards for phone calls to mini-centers, statewide units, and local offices; and
- Periodically test and evaluate service provided by SSA's telephone answering facilities against established standards

Department Comment

We agree with GAO's recommendations. As noted by GAO, field facilities are not currently equipped to collect the data needed to help establish criteria or standards of service or to measure performance against the standards once they are in place. As a result, we do not know if the same standards should apply to all facilities - teleservice centers (TSC), field offices served by TSC's and those not served by TSC's, for example. A first step in implementing these recommendations must be acquisition of equipment or services or development of other means to collect data on our current service and to translate that information into appropriate standards. The same data-collection methods can then measure ongoing performance.

Other Matters

The description of duties and responsibilities of the Office of Management Planning and Analysis (OMPA) in the area of telephone service (page 9 of the draft report) needs to be clarified. OMPA has the responsibility for conducting studies as required by SSA; for example, studies of levels of service. However, policy development and its implementation remain the responsibility of the component with line authority over the facility. The Deputy Commissioner for Operations is responsible for final approval and implementation of telephone standards for field components providing service to the public.

Now on pp 16 and 17

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