United States General Accounting Office

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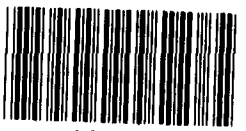
Report to the Chairman, Special Committee on Aging, U.S. Senate

August 1991

SOCIAL SECURITY

Measure of Telephone Service Accuracy Can Be Improved



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

Human Resources Division

B-245020

August 30, 1991

The Honorable David Pryor
Chairman, Special Committee on Aging
United States Senate

Dear Mr. Chairman:

This report responds to your April 28, 1989, request that we evaluate the accuracy of the information provided to the public by the Social Security Administration (SSA) over its toll-free 800 telephone service. In your request, you expressed concern that the public is receiving inaccurate information and that SSA studies designed to measure accuracy are flawed.

As agreed with your staff we limited our review to an assessment of SSA's method for measuring accuracy, including jointly monitoring with SSA a limited number of phone calls from the public to the 800 service. We provided the detailed results of this monitoring in our May 18, 1990, testimony before your Committee. This report focuses on our assessment of SSA's methodology.

Results in Brief

SSA's method of assessing the accuracy of information provided over its 800 number telephone service did not produce consistent evaluations of the responses it provided to callers. Hence, SSA's study results were unreliable. Overall, using the same criteria, our contractors (who monitored the calls) disagreed with SSA ratings of response accuracy and completeness on 35 percent of the 260 issues evaluated during 188 jointly monitored phone calls. Further, our analysis showed that SSA reviewers inconsistently rated the responses of their teleservice representatives (TSR).

The inconsistent ratings were caused by two fundamental shortcomings in SSA's "live-call" study methodology.

- At the time of our review, SSA guidance for evaluating telephone responses was inadequate. The guidance was very general; it did not clearly define a standard for identifying when a response was to be considered accurate or inaccurate. Further, confusion about the accuracy of a response arose whenever incomplete information was given to the caller. Since the completion of our work, SSA has made improvements to the guidance that address our concerns.

- SSA did not record the telephone calls it sampled for study, making it difficult for reviewers to make consistent and well-reasoned evaluations of conversations. Recording monitored phone calls would greatly enhance SSA's live-call study methodology. The General Services Administration (GSA) issues regulations for the monitoring and recording of telephone conversations by federal agencies. It also approves or rejects proposals relating to these regulations. The regulations allow federal agencies to record phone calls to determine the quality of service provided to the public, if appropriate controls are established to protect privacy. To strengthen the study methodology for measuring the quality of telephone service, SSA should seek GSA approval to record monitored calls.

In a related matter, recent legislation requires SSA to restore phone access directly to more than 800 local SSA field offices in addition to its ongoing toll-free 800 number service. To have a comprehensive monitoring program, SSA needs to develop a methodology for measuring the accuracy of phone service to be provided by these offices.

Background

In October 1988, SSA provided a toll-free 800 number to improve phone service to the public. SSA employs over 3,200 TSRs in 37 teleservice centers (TSC) that respond to more than 50 million calls per year to the 800 telephone service. About 80 percent of the inquiries are handled to completion over the phone. Complex matters are generally referred by TSRs to local field offices to handle.

To evaluate the level of service the public receives over the 800 number, the accuracy of the information provided to callers needs to be constantly monitored. However, developing and applying a sound measurement methodology is no simple task. All potential study methods have certain shortcomings that must be recognized and addressed.

SSA has tried two methods to measure the quality and accuracy of its telephone service. Between October 1988 and April 1989, SSA conducted three limited accuracy studies.

In two of the studies, SSA evaluated its employees' responses to hypothetical test questions posed by other SSA employees over the telephone. This approach can produce reliable assessments because the correct answers to the questions asked are known to the reviewers before the conversation happens. However, the approach may not produce results that are truly representative of the service provided to the public by

TSRs because the hypothetical questions are limited to situations that do not require TSRs to access individual social security records—a common occurrence in actual inquiries.

In the other study, SSA listened to a sample of live calls from the public. Although this is a better way to measure the service provided by SSA, it is more difficult to employ when it comes to measuring responses correctly and consistently. Reviewers must assess conversations as they occur. The conversations can cover any SSA program and multiple issues. Such an evaluation approach would be greatly aided by recording the conversations monitored. Recordings would permit reviewers to research the issues covered before finally assessing the quality of the service provided.

SSA prefers the live-call approach because it attempts to measure SSA's actual performance over the phone, rather than measuring performance for only limited hypothetical situations. For this reason, it chose the live-call approach when it implemented a comprehensive testing program in October 1989. However, it did not record these calls as part of its methodology.

Under SSA's live-call study approach, all monitored calls had to be documented, but the extent of documentation varied greatly based on the rating of the TSR's response. For responses rated as accurate and complete, reviewers had to only broadly identify the purpose of the call and the program involved. For responses rated as inaccurate and/or incomplete, reviewers had to describe the inquiry and response, and explain why the response was deficient.

From October 1989 through September 1990, 140 SSA reviewers nationwide listened to about 50,000 randomly selected calls using the live-call methodology. One reviewer monitored each sampled call and was expected to monitor at least 35 calls each day. Because of time constraints, reviewers often delayed documenting the responses rated as inaccurate or incomplete until they finished monitoring their quota of calls. Because the calls were not recorded, the evaluations had to be based on the reviewer's notes and recollections.

Accuracy and completeness of responses were evaluated by comparing the responses to the TSC operating procedures manual. This manual details many basic instructions for handling particular questions. It also may refer the TSR to sections of SSA's program operations manual, which

provides more detailed program requirements and processing instructions.

SSA reviewers categorized the responses into one of five broadly defined categories. These categories were:

- Correct. When the response was correct.
- Incorrect/payment. When the response was incorrect and could result in an incorrect payment amount.
- Incorrect/loss of benefits. When the response was incorrect and could result in a loss of benefits.
- Incorrect/work loads. When the response was incorrect and could result in an unnecessary or additional SSA work load.
- Incorrect/caller inconvenience. When the response was incorrect and could unnecessarily result in an inconvenience for the caller.

For internal reporting purposes, SSA classified inaccurate responses into two broad categories—payment/benefit errors and work load/caller inconvenience errors.

SSA also evaluated the completeness of the responses to identify whether its TSRs omitted information required by existing procedures. The accuracy study instructions required that incomplete responses be categorized into the following:

- Seven categories that identified specific types of required information missing from the response, such as not discussing documents that a potential claimant may need when filing an application; not recommending direct deposit to a caller reporting a change of address or nonreceipt of a check; or not offering to schedule an appointment with a field office for a person wishing to file a claim.
- Two categories that included one covering omitted required information not detailed in one of the previous seven specific categories and the second covering situations in which the reviewer believed additional information would have enhanced service to the caller, though not required.

Supplemental guidance to clarify evaluation procedures was issued to reviewers after the accuracy study began. The supplemental guidance stated that accuracy and completeness were to be evaluated separately and for a response to be rated inaccurate, something said or done (e.g., inappropriately referring a caller to a field office for assistance) must have actually been wrong.

Apparently in conflict with this guidance, the same supplemental guidance for rating completeness stated that omitted information had to be considered in terms of whether the omission affected accuracy; that is, whether the omission could render what was said or done by the TSR as incorrect. If reviewers judged that an omission could affect accuracy, they were to record the response as inaccurate. Otherwise, it was to be rated accurate but incomplete.

Objective, Scope, and Methodology

Our objective was to evaluate the reliability of SSA's live-call methodology for measuring the accuracy of information provided over SSA's 800 number. We accomplished this by examining how SSA (1) designed and implemented its accuracy study and (2) compiled and reported the study results.

To provide information on the operation of the test methodology, we observed how SSA reviewers implemented SSA's study design on a small number of phone calls. We contracted with three former SSA employees to listen in on a sample of calls at the same time as SSA reviewers. These former employees had an average of 19 years' experience at SSA, including 10 years' supervisory experience in monitoring telephone calls at TSCs.

Our contractors independently assessed the accuracy of responses to 260 separate questions asked by the public during 188 phone calls placed to SSA's Metro West TSC in Baltimore. We had two contractors listen in on each call and independently rate the accuracy and completeness of the SSA response. Our study results are applicable only to the 188 calls we monitored and cannot be projected to SSA's 800 number service nationally, regionally, or at the Metro West facility on the days monitored.

Because GSA specifies conditions under which government agencies can record conversations with the public, we discussed with GSA officials the requirements regarding recording and listening in on telephone calls with the public. Also, because GSA granted approval to the Department of Veterans Affairs (VA) in 1988 to record certain conversations with veterans in order to monitor the accuracy of information provided by its employees, we discussed with VA officials their efforts to obtain GSA approval to record such calls.

Our work was performed between June 1989 and October 1990 in accordance with generally accepted government auditing standards. Further

details on our telephone assessment methodology are presented in appendix I.

SSA's Methodology for Measuring the Accuracy of Its 800 Service Produced Unreliable Results

SSA's methodology for evaluating its telephone service had two significant shortcomings that rendered its results inconsistent and therefore unreliable. First, SSA's study guidelines did not establish clear criteria for evaluating response accuracy, especially when reviewers found that incomplete information was provided. Second, SSA did not record the telephone conversations sampled, which made it difficult for reviewers to make consistent and well-reasoned decisions on their accuracy. Overall, GAO disagreed with SSA ratings on 35 percent of the 260 issues evaluated during the 188 jointly monitored calls.

Evaluation Criteria Were Unclear

SSA's evaluation criteria for its reviewers were not very clear nor specific. The criteria contained conflicting instructions and did not clearly define what constituted an accurate or inaccurate response.

The criteria were particularly confusing in explaining how incomplete information affected the accuracy of the response. As discussed previously, SSA's instructions stated in one section that accuracy and completeness were separate evaluations, implying that an incomplete response would not constitute an inaccurate response. Another section of the instructions stated that incomplete information was to be considered in terms of whether the omission affected the call's accuracy. Reviewers were instructed to rate calls as inaccurate if the omission could render what was said or done inaccurate.

Reviewer instructions further complicated the accuracy rating by providing a deficiency category in the completeness rating to cover situations where reviewers believed additional, but not required, information would have enhanced service to the caller. Thus, deficiencies could be found even when all requirements in the TSR operating manual were met. These judgments were left to the discretion of each reviewer.

To ensure reliable and consistent study results, it is crucial that clear and specific criteria be developed for reviewers to follow in evaluating the accuracy and completeness of responses. We believe SSA's instructions confused reviewers about the standard to be used for judging response accuracy. The ambiguity of SSA's instructions led to different decisions between our contractors and SSA reviewers and among SSA reviewers in evaluating the accuracy of calls.

Our Contractors Disagreed With SSA Reviewers

In 16 (9 percent) of the 188 calls jointly monitored, we rated the responses as inaccurate while SSA reviewers rated the responses as accurate but incomplete. Documentation prepared by the reviewers showed that the rating difference depended on how the reviewer factored in the omitted information of the response relative to its accuracy—not on the content of the call. Using SSA evaluation criteria, our contractors believed the responses were inaccurate because the callers could have been inconvenienced or adversely affected by the TSRs' failure to provide complete information or service.

For example, in 9 of the 16 calls, TSRs failed to discuss all the evidence needed to get an original or replacement card. If the caller provided to SSA only the evidence that the TSR said was necessary, the request for a new or replacement social security card would have been delayed until the additional evidence was provided. The remaining seven calls concerned TSRs' failure to provide some immediate assistance to the caller, which the operating instructions said they should have provided at the time of the call.

SSA Reviewers Were Inconsistent

In examining decisions made by SSA reviewers, we found six situations in which they rated the same types of responses inconsistently. For example, one reviewer listened to two callers who wanted to file their annual reports of earnings with SSA. In both cases the TSR failed to take the earnings information over the phone as required by the TSC operating guide. In one call, the SSA reviewer rated the response as inaccurate; in the other, he rated it as accurate but incomplete.

Further, an SSA reviewer listened to three calls where the TSR failed to discuss all the required proofs of identity needed for a parent to get a social security card for a child. On one call, the SSA reviewer rated the response as inaccurate; on another, he rated it as accurate but incomplete; and on a third, he rated it as accurate and complete.

Recording Sampled Calls Would Improve Assessments

Listening to live calls and evaluating response accuracy correctly and consistently is a difficult assessment methodology to employ. Reviewers must assess the accuracy and completeness of an entire dialogue between a caller and a TSR. A call can cover any SSA program or issue, and it is also common for a single phone call to cover multiple issues and last 10 minutes or longer.

Without being able to play back a recording of the calls to help the decision-making process, reviewers have only one opportunity to hear the

calls. This means that reviewers have to recall all the manual requirements while monitoring the calls and rely on either memory or notes taken during the conversations when they document the evaluations. Without recordings, reviewers are more likely to misinterpret questions and answers, overlook policies and procedures, and make inconsistent evaluations. Further, SSA cannot determine the consistency and appropriateness of its reviewers' decisions.

The need to record calls can be seen in a number of cases where our reviewers differed with SSA's reviewers. In 38 (20 percent) of the 188 jointly monitored phone calls, we reached different conclusions from SSA on the accuracy or completeness of the responses because we apparently heard the conversations differently from SSA.

For example, a caller requested a replacement form 1099 from SSA. Beneficiaries use this form to report, on their tax returns, the social security benefits they received during the year. In response, the TSR arranged to mail another 1099 to the caller. The manual requires TSRs to verify the caller's address when a caller alleges nonreceipt of such documents, since it is possible that the caller failed to report an address change. If the form was sent to the old address, the caller would be inconvenienced. Thus, we rated the response as inaccurate because we did not hear the TSR verify the caller's address.

The SSA reviewer rated the TSR response as accurate. Presumably, the SSA reviewer either heard the TSR verify the caller's address, did not remember that the address was not verified when completing the rating, or was unaware of the verification requirement. Because the call was not recorded and SSA did not require reviewers to document the facts surrounding calls rated as accurate and complete, we could not resolve the conflict between SSA's and our ratings.

Recording calls would provide documentation for all conversations evaluated by SSA reviewers. They could be played back to assist reviewers in making better and more consistent evaluations by (1) resolving any uncertainty about what was asked and answered, (2) providing reviewers the opportunity to research requirements they were uncertain about, and (3) allowing reviewers and management to compare evaluations of similar calls.

GSA regulations govern the recording of telephone conversations by federal agencies. The regulations are designed to protect the privacy of the public. They delineate a limited number of circumstances under which

federal agencies can monitor or record conversations. One of these is to determine the quality of service an agency provides to the public. The regulations state that agencies conducting such public service monitoring or recording must establish certain controls and issue written policies and procedures governing them. Agencies also must seek GSA approval to record such calls. GSA has approved a request by VA to record conversations between its employees and the public in support of its Veterans Assistance Service program.

SSA did not record the calls monitored in its studies of telephone response accuracy. Apparently, SSA never considered recording monitored calls in designing its test methodology. Hence, GSA approval was never formally requested.

SSA Acknowledges Improvements Are Needed

SSA officials acknowledge that the current study methodology has resulted in inconsistent assessments of accuracy by SSA's 140 reviewers nationwide, particularly in regard to work load/caller inconvenience errors. As a result, SSA has redesigned its accuracy study, proposing a number of changes to its methodology that address our concerns. SSA believes these changes will result in more consistent decisions by its reviewers.

Specifically, the proposed methodology eliminates the confusion caused by assessing both accuracy and completeness. Calls are rated for accuracy only. When inaccurate responses are identified, they are classified into one of two subcategories—payment or service errors. Further, errors are extensively defined in terms of a clear and consistent standard—noncompliance with the TSC operating manual and the program operations manual. Finally, this methodology requires the reviewers to complete their assessments of accuracy before monitoring the next call.

SSA has trained its reviewers on the proposed methodology, which it is testing for consistency on a pilot basis. SSA plans to make further refinements in response to the pilot test and to implement the methodology nationwide in a few months.

Other Related Matters

Our work disclosed two additional situations related to monitoring the accuracy of the 800 service that require attention. These include (1) providing accuracy data that do not overstate performance and (2) developing a methodology to assess the accuracy of telephone service

provided outside the 800 service system, given recent legislative requirements.

Disclosure of Data on Response Accuracy

As stated in our May 1990 testimony before your Committee, SSA has not fully disclosed to the Congress the results of its accuracy studies. Since the nationwide accuracy study began in October 1989, SSA has reported an 800 service accuracy rate of 97 percent, which it qualified as "regarding payment amounts or eligibility." From an informational standpoint, this statement is incomplete and misleading.

It is incomplete because it ignores the extent to which SSA's responses (1) inconvenienced callers or created unnecessary work for its field staff and (2) provided callers incomplete information. Although such matters are of less significance than errors that potentially affect benefit payments or eligibility, they are nevertheless public service issues that should have been reported to the Congress.

The statement is misleading because the figure SSA provided to the Congress was computed by dividing the number of calls with erroneous responses affecting social security payments and/or benefits by the total number of monitored calls, rather than on the number of calls that had the potential to affect payments or benefits. Computing the payment/benefit accuracy rate based on all calls monitored overstates the probability that somebody calling about payments or benefits will get an accurate answer, since not all calls have the potential to affect payments or benefits.

During our joint monitoring, SSA reviewers found that 12 of the 188 calls we monitored had payment/benefit errors, but only 74 of the 188 calls concerned questions about payments or benefits. Using these numbers to illustrate, by basing its payment/benefit error rate on all 188 calls, SSA would calculate an accuracy rate of 93.6 percent. But if SSA calculated this accuracy rate by dividing the 12 payment/benefit errors by the 74 calls having the potential to affect payments or benefits, the accuracy rate would be 83.8 percent. Because of our small sample size, these rates are not indicative of SSA's actual rates nationwide, but they do show the relative effects of computing error rates using both methods.

SSA acknowledges that its method of calculating the payment/benefit accuracy rate overstates accuracy. In its March 1991 service quality report to the House and Senate Appropriations Committees, SSA stated that in the future, it will report payment accuracy rates as a percentage

of only those calls that could affect payment, as well as a percentage of all calls monitored. However, SSA has not agreed to provide the Congress with information on nonpayment errors.

Recent Legislation Affecting SSA Phone Service

SSA does not have a methodology for assessing the accuracy of phone service provided by local field offices. This is significant because the Omnibus Budget Reconciliation Act of 1990 (P.L. 101-508) requires SSA to restore the public's direct phone access to local field offices at the level such access was generally available in September 1989. At that time, SSA provided direct local office access to more than 800 of SSA's 1,300 field offices.

For these local offices, SSA has placed orders to have their local phone numbers and addresses published in the phone book. The effect of this change is that some SSA field offices have the potential to receive a large, although yet undetermined, number of calls that previously might have been received under the 800 phone system.

Conclusions

SSA needs to take further action to improve its telephone assessment program. Shortcomings in SSA's approach of listening to live calls undermined its effectiveness. Unclear guidance for evaluating the accuracy of responses and a failure to record monitored calls have resulted in inconsistent and erroneous evaluations of the accuracy of SSA telephone service. As a result, the figures SSA has provided the Congress on its 800 telephone service are incomplete and unreliable.

SSA has made improvements to its program evaluation criteria that address the weaknesses we identified. SSA can make further improvements by recording tested phone calls. Without recordings, SSA does not provide its reviewers the best possible tools to measure telephone response accuracy. It also does not have an adequate basis for determining the consistency and appropriateness of its reviewers' decisions.

Recent legislation restoring local telephone service to more than 800 field offices will create the need for SSA to determine the accuracy of telephone responses provided by field office personnel in order to comprehensively assess its overall phone service to the public.

Recommendations to the Commissioner of Social Security

To strengthen SSA's methodology for measuring the accuracy of telephone responses, we recommend that the Commissioner of Social Security seek GSA approval to record the phone calls it monitors for purposes of assessing the quality of its phone service and evaluating its assessment process. Such recording should take place under strict controls and procedures that protect the public's interest and include the following restrictions as a minimum. Recording should be limited to the minimum calls necessary to monitor the quality of service to the public. The caller must be informed that his/her call may be recorded for service monitoring purposes and be given the option to hang up. The recorded information must be properly safeguarded, with access limited to necessary persons. Any individual identifying information must be erased from the recording immediately after the assessment is completed. Finally, no written or other records would be kept that would identify the caller so that no records would exist which could be accessed by using individual identifying information.

We also recommend that the Commissioner

- fully disclose to the Congress the results of SSA's accuracy studies, including reporting on the extent of service errors as well as payment errors, and
- develop a methodology for assessing the accuracy of phone service provided by local SSA field office personnel.

Comments by SSA Officials

SSA did not provide written comments in time to include them in this report. However, we met with SSA officials to discuss the results of our work in February 1991. During that meeting SSA officials primarily discussed improvements being made to its study methodology. These improvements addressed our concerns and are reflected on page 9. They also raised concerns about two other issues that are discussed below.

The first concerned our characterization of its study results as unreliable. SSA officials believed that the word implied that its sample size was not large enough to statistically measure the accuracy of information provided through its telephone service. They suggested we refer to its results instead as inconsistent. We did not make this change. The large number of inconsistencies that occurred in assessments of the accuracy of information provided in individual calls causes us to conclude that the study's overall measurement of accuracy at the time of our review was unreliable.

The second concerned our discussion of expanding the accuracy study to include telephone service provided by district offices under the Omnibus Budget Reconciliation Act of 1990. The officials said that this section of our report is outside the original scope of our review. They also noted that it would be very expensive to do such monitoring, particularly because the act did not provide any additional funds for such activity.

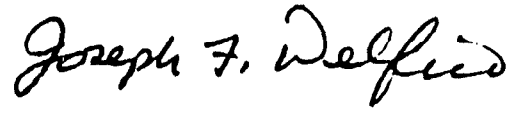
We do not think this section of the report is outside the scope of our review. Our objective was to evaluate SSA's study methodology. Clearly, the recent legislation affects SSA's methodology for monitoring its phone service. The legislation requires SSA to restore phone access to over 800 field offices. Currently, SSA does not measure the quality of phone service provided by its field offices. To have a comprehensive measure of the quality of its phone service, SSA needs to devise a measurement strategy that examines the performance of these offices.

With regard to costs, we agree that it will likely be more expensive for SSA to monitor phone service provided from so many locations. However, we believe that monitoring is needed to help assure that Social Security provides quality service to the public.

As arranged with your office, unless you publicly announce its contents earlier, we plan no further distribution of this report until 30 days from its issue date. At that time, we will send copies to other congressional committees and members, the Commissioner of Social Security, and other interested parties. We also will make copies available to others upon request.

If you have any questions about this report, please call me on (202) 275-6193. Other major contributors are listed in appendix II.

Sincerely yours,



Joseph F. Delfico
Director, Income Security Issues

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Abbreviations

GSA	General Services Administration
SSA	Social Security Administration
TSC	teleservice center
TSR	teleservice representative
VA	Department of Veterans Affairs

Telephone Assessment Methodology

We reviewed SSA's study instructions and other documents and discussed the study methodology and results with SSA officials. We also reviewed SSA's operating instructions for its teleservice representatives to follow when responding to the public's questions over the 800 number and instructions for reviewers and their training. Finally, we observed how SSA accuracy reviewers—employees who evaluate the accuracy of information provided over the 800 number system—implemented SSA's accuracy study design.

We participated with SSA accuracy reviewers in assessing the accuracy of responses to live calls placed to SSA's Metro West teleservice center in Baltimore. We monitored calls for 8 days in February 1990. We chose Metro West because it is the largest of SSA's 37 telephone service answering facilities, employing 460 TSRs and handling more than 13 percent of the nation's calls.

To assist us in this effort, we contracted with three former SSA employees who had an average of 10 years' experience at the supervisory level at SSA TSCs. They listened jointly with SSA reviewers to 188 telephone calls involving 260 separate issues or questions. Two of the three contractors listened concurrently with one of the two SSA reviewers on each of the monitored calls. After finishing monitoring calls each day, each reviewer independently documented his/her judgment on the accuracy and completeness of the TSRs' responses to the public's questions.

After the joint monitoring was complete, we compared the SSA reviewers' and our contractors' evaluations of the responses to each of the 260 issues or questions asked during the 188 phone calls. Next, we attempted to resolve differences among reviewers and assess the reliability of the reviewers' decisions by comparing the reviewers' documentation on each call against SSA operating instructions and manuals. When our contractors disagreed with each other, we first arrived at a consensus between them. We reviewed all the calls monitored to ensure that the review criteria were consistently applied for the contractor decisions and compared our position with SSA's position. After we discussed with SSA those calls on which we disagreed, we determined our final position on the accuracy and completeness of each response.

Because we evaluated responses to a limited number of calls, our study results do not reflect how accurately SSA provides information to the public over its 800 telephone service nationally, regionally, or even at the Metro West facility on the days monitored.

Major Contributors to This Report

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