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The Process Management Standard

Introduction:

The **process management standard** provides a tool and framework for government managers at all levels to demonstrate that their work units follow a documented best-known practice in primary business areas. It provides an empirical, professionally recognized tool for government managers to demonstrate process capability, and it provides a uniform basis for development of a quality scorecard of key processes throughout an agency. It also provides a method to evaluate and score the maturity of each process, and can be used as an audit standard. This guideline document is intended to inform both government managers and elected representatives why **process certification guidelines** are important for government, and how they are to be used.

Rationale:

Quality in government is provided through efficient and effective delivery of goods and services that meet end-user requirements. Structured problem solving and continuous quality improvement are the two primary means of achieving this end, and both are based on fundamental process management. Public sector managers begin to take the first step toward this end when they define and standardize known best practices. Despite the simplicity of this requirement, the ASQ Government Division has estimated that less than 20 percent of all key business processes in state and local government have defined and stable business processes[1].

The Unique Need:

Government is unique in the quality industry in that the economic reality that confronts almost every other kind of business does not confront government—it will never go out of business as a direct consequence of a lack of delivered quality or competition. Because government does not have a revenue stream associated with a marketplace decision, and because its revenues flow as a direct result of legislative and budgeting action, it does not have a specific, self-correcting economic motivation to grow and improve in the areas of customer satisfaction or efficiency. Said another way, there is no immediate and direct consequence for agencies and offices that fail to provide efficient and effective service. This also makes it difficult for executive managers and elected officials to require corrective action when the presence of quality in government *is invisible*. The primary purpose of these guidelines, then, is to *make the presence of quality in government measureable and auditable*—so the existence of competent management in government branches, programs, bureaus, and departments is completely transparent. Because key processes are fundamental to every office and bureau, no matter how small, this auditable process management standard makes it possible for each manager and supervisor to develop a report card on their management practice. Uniform audits using the standard can be performed across all types of government, and at all levels. The standard follows:

[1] An ASQ survey conducted in 2014 indicated that 14-20 percent of all state agencies know and practice lean quality improvement.

Standard Process and SOP	Measurements	Process Improvement/ Employee Empowerment
0 – Process is not standardized.	0 – Customer requirements are unknown.	0 – No systematic improvement efforts. No employee involvement.
1 – A process flowchart or SOP exists. May not be current or complete.	1 – Some customer requirements have been established, but are often based on dissatisfaction, waste, or error.	1 – A few process improvements—all based on management initiatives.
2 – Process flowchart or SOP exists and is current/complete.	2 – Customer requirements have been established and validated.	2 – A few process improvements based on employee suggestions.
3 – Process flow is regularly updated. Aim is clear and periodic feedback is obtained.	3 – Key process measures exist, and at least one is regularly updated.	3 – A fact-based structure for analysis, and problem solving is in place.
4 – Flowchart or SOP is regularly referenced and is used for training. Regular feedback is provided.	4 – Several key process measures are validated with customer requirements and regularly updated.	4 – The work force participates in continuous improvement and it follows an established problem-solving structure—tools are used.
5 – Flowchart is uniformly used at an auditable standard. It is linked to metrics and continuous improvement efforts.	5 – The process is stable and performing within control limits. Measures are linked to benchmarks.	5 – There is evidence of continuous systematic improvement and measurable, positive results.

Discussion of the Process Certification Matrix:

Organizations using this model must require each manager and supervisor to identify at least one key process within their span of control for certification. Each process must have a defined beginning and end, with a known and defined outcome. Each process should be first ranked by the controlling manager/supervisor, with the scoring validated by independent observers or existing government auditors. Each of the three criteria can be ranked numerically from 0 to 5, and the total score added to reflect all three criteria. It is recommended that the total score be divided by 3 to reflect the three criteria areas, so that an average level of process maturity for each key process is developed. Alternately, the total score can be reflected as a percentage of all 15 points available, so that an overall process might be ranked at 40 percent if it scores in all three categories at Level 2, 60 percent if it scores Level 3 in all three categories, or 80 percent if it scores Level 4 in all three categories.

This guideline is provided as an open-source model of process certification for government that can rapidly be put in use by government agencies with very little upfront investment, and without extensive training. It also aligns well with the ASQ International Team Excellence Award for those who desire further recognition.