ICANN | ccNSO

Comments on CIP-CCG ToR

7 December 2023

The ccNSO Council and Guideline Review Committee (GRC) welcomes this opportunity to comment on the Continuous Improvement Program Community Coordination Group (CIP-CCG) Terms of Reference (ToR) proposal. We also want to express our appreciation for initiating the discussion in light of the Board's decision to revisit deferring the various Bylaw required Organizational Reviews to allow the community and ICANN to make substantial progress on the "Pilot Holistic Review" and Continuous Improvement Program.

With respect to the proposal itself, the ccNSO Council and GRC have some concerns around:

1. Current status of continuous improvement programs and projects across the various SOs/ACs and constituencies.
2. Developing a shared understanding of continuous improvement and continuous improvement framework.
3. Purpose, scope and composition of the CIP-CCG.
4. Feedback gathering process & Role of SO/AC Chairs

1. Continuous Improvement programs and projects across the SOs and ACs

The ccNSO, its Working Groups and Committees have developed a number of practices and approaches that can be considered as elements of Continuous Improvement. For example, the GRC was tasked in 2014 to review the ccNSO Governance documents (Guidelines) whether they reflect working practices and methods, assess potential gaps, and based on this analysis propose changes to the current guidelines to Council. Since 2014 the GRC has proposed various updates and new Governance documents – including the role of the ccNSO as Decisional Participant Guideline and the update of the Rules of the ccNSO. Other ccNSO working groups have introduced standard practices – such as the Meetings Programme Committee (MPC) has standardized community feedback on ccNSO sessions during ICANN meetings to improve the quality of their work.

The ccNSO Council and GRC have recently started focusing on continuous improvement as a systemic approach to improve the ccNSO processes, procedures and services. The latest iteration of this discussion was the Open Space session at the Hamburg meeting (ICANN78).

It is unclear to us whether other SOs and ACs have (internal) standing working groups, committees or programs related to continuous improvement and assume the groups do not have a similar overview. We therefore support that as a first step, an inventory of the current level of (continuous) improvement practices across the various SOs and ACs needs to be available, to provide a baseline for the community to start their discussions on the approaches already in use. It will also help to understand, before starting to develop a framework, whether there is any commonality in approaches and hence reduce the effort to find a common practice.

2. Shared understanding of continuous improvement and continuous improvement framework

In exploring the various aspects of continuous improvement, the GRC has noted that the high-level concept of "continuous improvement" and "continuous improvement framework" is used interchangeably. It is our understanding that a framework is intended to provide a structure for process improvement projects and guidelines around the tools that can support each part of an improvement process. It is also our understanding at a high-level that these frameworks are fairly straightforward and are used across a wide range of industries – from health care to software development – to improve "business" processes. Examples of these approaches are the PDSA/PDCA cycle (Annex A) and "Model for Improvement" (Annex B), which is an evolved version of the PDSA/PDCA cycle.

We note that at the core of each and every one of these models is the need to define the "business process" to be improved. We also note that in terms of ICANN, these processes are intra and inter SO/ACs (an example of inter SO/AC process is the approval action process, an example of a ccNSO intra process is the planning of ccNSO meeting sessions). As these processes vary across SOs/ACs we again want to stress the need for taking stock first.

3. Purpose, scope and composition of the CIP-CCG

The ccNSO Council and GRC raise the following concerns with the CIP-CCG:

a. Purpose & Scope
b. Composition

Purpose & Scope

The ccNSO Council and GRC believe, as stated above under 1. and 2. that taking stock of what is already done in the area of continuous improvement should be the first step. Taking into account the proposed composition (see below) and under the assumption that various groups are using different models as a continuous improvement framework, we believe there is a risk that progress in the area of continuous improvement per participating organization will be determined by the progress of the work of the CIP-CCG.

Composition

Based on the proposal, the CIP-CCG would comprise of 22 members, each from one of the 22 identified groups. The ccNSO Council is concerned that such a large group will not be able to deliver in accordance with the proposed scope of activities and timeline due to the weight of its size and the added complexity of consulting 22 groups.

Although we understand that the CIP-CCG is already in its formative stage, we believe that this CCG would be effective if two members for each of the 7 SO/ACs were appointed.

4. Feedback gathering process & Role of SO/AC Chairs

We appreciate that the community needs to make progress on implementation of ATRT3 recommendations, however the ccNSO Council and GRC do question why the route of the SO/AC Chairs roundtable was chosen to introduce the proposal on CIP-CCG ToR, initially with a turn around time for comment of 4 weeks, having the imminent AGM as the preferred deadline. Introducing the CIP-CCG ToR through a public comment period and agreeing with those terms first, before a call for appointments, as was done with the Holistic Review ToR, would have been the expected steps for such a broad community expected participation, with the added values of bottom up process, transparency and easiness to consolidate feedback.

The ccNSO Council and GRC also note that in the proposal, again there is a central role for the SO/AC chairs. We appreciate that the SO/AC chairs are the point of contact, however, they are not mandated to make the decisions as envisioned.

On behalf of the ccNSO Council and Guideline Review Committee
Alejandra Reynoso Sean Copeland

Annex A - PDSA/PDCA Model

Plan

Establish objectives and processes required to deliver the desired results
Plan: Recognize an opportunity and plan a change.

Do

Carry out the objectives from the previous step.
Do: Test the change. Carry out a small-scale study.

Check/Study

During the check phase, the data and results gathered from the do phase are evaluated. Data is compared to the expected outcomes to see any similarities and differences. The testing process is also evaluated to see if there were any changes from the original test created during the planning phase. If the data is placed in a chart, it can make it easier to see any trends if the plan–do–check–act cycle is conducted multiple times. This helps to see what changes work better than others and if said changes can be improved as well.
Check: Review the test, analyze the results, and identify what you've learned.

Act

Also called "adjust", this act phase is where a process is improved. Records from the "do" and "check" phases help identify issues with the process. These issues may include problems, non-conformities, opportunities for improvement, inefficiencies, and other issues that result in outcomes that are less-than-optimal. Root causes of such issues are investigated, found, and eliminated by modifying the process. Risk is re-evaluated. At the end of the actions in this phase, the process has better instructions, standards, or goals. Planning for the next cycle.
can proceed with a better baseline. Work in the next phase should not create a recurrence of the identified issues; if it does, then the action was not effective.

Act: Take action based on what you learned in the study step. If the change does not work, go through the cycle again with a different plan. If you were successful, incorporate what you learned from the test into wider changes. Use what you learned to plan new improvements, beginning the cycle again.

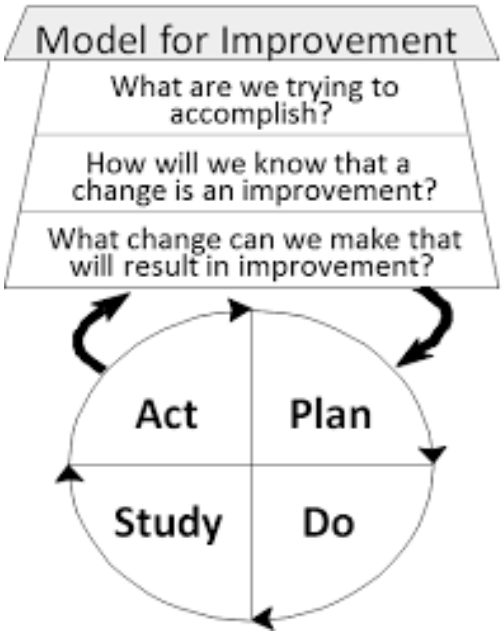
WHEN TO USE THE PDCA CYCLE?

Use the PDCA cycle when:

- Starting a new improvement project
- Developing a new or improved design of a process, product, or service
- Defining a repetitive work process
- Planning data collection and analysis in order to verify and prioritize problems or root causes
- Implementing any change
- Working toward continuous improvement

Annex B Model for Improvement

The Model for Improvement[1] is a simple yet powerful framework for accelerating improvement. The model is compatible with any change models that organizations may already be using and can help to accelerate improvement.



Template for Model for Improvement

To structure improvement efforts consistently, organized along a framework, it is advised to use a template throughout the organization for continual improvement of all processes, services, working methods etc. Note that every aspect (to the extent they have clear boundaries) could be subject to continuous improvement efforts.

Template for documenting improvement

The Template[2] for documenting interventions using the Model of Improvement as framework. This template is based on the Plan-Do-Study-Act or Plan-Do-Check-Act (PDSA/PDCA) tool to plan and document your progress with tests of change. In addition to the PDSA/PDCA questions, preliminary, fundamental considerations are added to the PDSA/PDCA cycle (The questions 1, 2 and 3).

[1] For background information on that model see: https://www.murrayphn.org.au/wp-content/uploads/2019/06/Cancer-Screening-QI-Toolkit-14-Model-for-Improvement.pdf

[2] Source: https://www.cms.gov/medicare/provider-enrollment-and-certification/qapi/downloads/pdsacycledebedits.pdf

Template for documenting improvement

1. What are we trying to accomplish (aim)? State your goals with respect to process, service,
2. How will we know that change is an improvement (measures)? Describe the measurable outcome(s) you want to see
3. What change can we make that will result in an improvement? **Define the processes currently in place; use process mapping or flow charting** **Identify opportunities for improvement that exist** (look for causes of problems that have occurred or identify potential problems before they occur). Identify: ● Points where breakdowns occur ● "Work-a-rounds" that have been developed ● Variation that occurs ● Duplicate or unnecessary steps **Decide what you will change in the process; determine your intervention based on your analysis** ● Identify better ways to do things that address the root causes of the problem ● Learn what has worked at other organizations (copy) ● Review the best available evidence for what works (literature, studies, experts, guidelines) ● Remember that solution doesn't have to be perfect the first time

Plan - What change are you testing with the PDSA/PDCA cycle(s)? (see above) - What do you predict will happen and why? - Who will be involved in this PDSA/PDCA? (e.g., staff, volunteers, other stakeholders?). - Plan a small test of change. - How long will the change take to implement? - What resources will they need? - What data needs to be collected?	**List your action steps, predictions (results of improvement), the person(s) responsible, and the timeline.**
Do - Carry out the test on a small scale. Document observations, including any problems and unexpected findings. - Collect data you identified as needed during the "plan" stage.	**Describe what actually happened when you ran the test.**
Study/Check/Monitor - Study and analyze the data. Determine if the change resulted in the expected outcome. - Were there implementation lessons? - Summarize what was learned. Look for: unintended consequences, surprises, successes, and failures.	**Describe the measured results (using data gathering method described in the "Plan" phase) and how the results compare to the predictions (described in the "Plan" phase).**
Act - Based on what was learned from the test: Adapt – modify the changes and repeat the PDSA cycle. - Adopt – consider expanding the changes. - Abandon – change your approach and repeat the PDSA cycle.	**Describe what modifications to the plan will be made for the next cycle from what you learned.**