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Improved Client Service Model

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Improved Client Service Model
An Interactive Qualifying Project
For the Melbourne Project Site

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Of the

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In Partial Fulfillment of the requirements for the

Degree of Bachelor of Science

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Abstract

Vision Australia (VA), a non-profit, blind services organization, is currently operating under three separate client service models, which are remnants of its recent merger. This project was established to examine archival evidence of the pre-merger organizations, interview VA staff, and consult similar international service organizations to explore solutions to challenges that VA will face in the formation of their new client service model. Analysis of these data has generated a set of recommendations for VA's client service model development team.

Executive Summary

Vision impairment is a large problem in Australia and the number of Australians with vision impairment is growing. For Victoria and New South Wales, the sole provider of blind and low vision services is Vision Australia. Formed by the merger of three organizations in 2004 (the Royal Blind Society, the Royal Victorian Institute for the Blind, and the Vision Australia Foundation), Vision Australia is committed to providing quality services to all of its clients in the two-state area. Although the merger occurred about two years ago, currently only the top level management structure is actually merged. Each of the pre-merger organizations are still operating autonomously, using separate client service models. An internal project conducted before the merger noted that it would be desirable to merge these client service models into one unified model. It is the purpose of this project to offer suggestions to the Vision Australia client service model development team regarding how this might be done.

Prior to or arrival in Australia, many sources were considered in order to provide a better background to the problem. First, we researched general statistics on blindness in Australia to determine the scope of the problem. Next, some research was conducted into the background of Vision Australia itself. Internally available VA documents showed that in 2002, representatives from the three former organizations met in order to determine the viability of the merger. Thus, "Project Nexus" was created, with the purpose of determining the viability of a merger between the three organizations. The documents created by Project Nexus provided a good perspective for the underlying reasons of the merger. Some research was also done prior to the project into the former client service models of the three former organizations. This background was useful in order to prepare for the interviews and site visits of the project.

Research was conducted into some international blind and low vision service organizations in order to get a background on some common service model practices. This material provided possible existing solutions and set the stage for some of the international interviews that were conducted during the project. These organizations included the American Foundation for the Blind, Helen Keller Services for the Blind (US,) the Royal National Institute for the Blind (UK,) Ability Net (UK,) the Royal New Zealand Foundation of the Blind, and the Canadian National Institute for the Blind.

The background research for this project concluded with a look at common problems inherent in client service models and merged organizations. Specific research topics included

post-merger identity, merger strategy, integration of communication technology, social and organizational gaps addressed in service models, and guidelines for creating an effective client service model.

During the project, the team has gathered information through archival evidence, interviews with international blind service organizations and Vision Australia staff, observations of direct service staff, and site visits. The information we gathered gave us valuable insight into Vision Australia's client service models, both before and after the merger. Through our archival research, we learned how each of the pre-merger organizations operated and gained an understanding of each organization's management structure. Our interviews with international organizations revealed several methods for service implementation and helped to provide a basis to Vision Australia. Through our interactions with Vision Australia employees, we gained valuable insight into how services were delivered within each organization and learned about some of the difficulties that each organization had in delivering their services.

Research into client service models and mergers, interviews conducted with international blind service organizations, and interviews conducted with the staff of Vision Australia have provided insight into the greatest challenges faced by the organization as it forms its new client service model. The first set of challenges stem directly from the merger. These challenges include:

- Inconsistent information and communication technology within the organization
- Disparities in client demographics across the three main parent organizations
- Issues with the adoption of a unified corporate identity

The second class of challenges are general issues that are inherent in servicing the merged organization's entire client service base:

- Wide geographic distribution of clientele
- Intake procedures that differ across the three pre-merger organizations
- Varied methods of support for special classes of clients

The primary goal of this project was the production of recommendations to Vision Australia that will assist them in building their new, improved client service model. Our research and analysis have illuminated a number of problem areas, such as communication (both within and without the organization), guidelines for standard service implementation, inconsistent usage of staff and volunteers, and inconsistent organizational hierarchies. Our recommendations as to how to address these issues can be organized into a four step reiterative process:
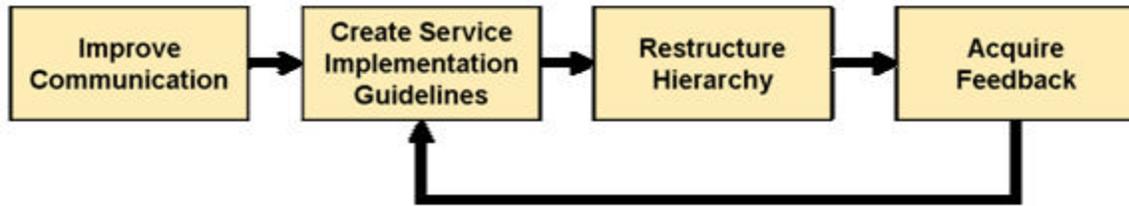
Figure 1: Four Step Process for Service Model Creation

The first step is to improve Vision Australia's inter- and intra-office communication. This step should be first because it will be difficult to propagate any major organizational changes throughout the organization without a sound base of communication. This step includes reconciling technology discrepancies between the three former organizations, resolving terminology differences, and enforcing a unified Vision Australia identity.

Second, it is recommended that Vision Australia create a standard for service implementation. Some steps to accomplish this include the establishment of core services for client classes, the implementation of a standardized core competencies program, the standardization of service staff usage, and the improvement of volunteer coordination.

Third, Vision Australia should restructure its management hierarchy to fit its new client service model. To ensure that the client is the focus of the new client service model, the organization should solidify the role and position of management and then design a hierarchy that fits the client service model guidelines proposed in the previous step.

Finally, Vision Australia should acquire feedback from its employees and clients. Informed by this feedback, the organization may then go back and alter its guidelines as necessary. The process should be repeated as many times as it takes to fully develop the improved client service model.

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Special thanks go out to all the Vision Australia employees whom we interviewed. We are unable to name them in these acknowledgements in order to maintain the confidentiality they were promised, but we appreciate their candor and honesty. We realize that the new client service model will have a massive impact on the organization and that jobs may be affected by the subsequent restructuring. Everyone we spoke with was professional, helpful, and delightful to talk to.

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1 Introduction

Worldwide, there are as many as 124 million people living with vision impairments, which range in severity from partial to total blindness. Some people may be born with vision impairments, while others may undergo vision changes due to any number of reasons. The vision impaired are often faced with many barriers, which can include mobility and accessibility issues that affect their ability to lead a normal life. In the long term, serious vision impairment may hamper an individual's ability to perform tasks that most of the general population takes for granted, like working, learning, or driving. The vision impaired often require training or assistance to help them cope with these problems.

Vision Australia, an organization formed recently by the merger of the Royal Victorian Institute for the Blind, the Royal Blind Society, and the Vision Australia Foundation, offers this assistance to some 5,700 vision impaired individuals in Victoria, New South Wales, and the Australian Capital Territory. At this point, however, only the top-level management of the three organizations has been merged; the three different (and occasionally conflicting) client service models of the pre-merger organizations are still heavily used and relied upon. The existence of these three different client service models contributes to confusion both within the organization and amongst the client base, greatly hindering the ability of Vision Australia to provide effective and efficient services to vision impaired Australians. Ideally, Vision Australia will be able to unify the client service models of the three pre-merger organizations, and be able to offer all their services in a unified and simple fashion.

Currently, 480,300 Australians suffer from low vision, including 50,600 who are totally blind. Over the next twenty years it is predicted that the number of Australians living with vision impairments will increase to approximately 800,000. These citizens will require professional medical treatment and other specialized services so they can live a more normal and functional life. Most people currently receive these services freely from municipally funded organizations. Vision Australia falls squarely into this category. As such, they must be able to provide service to a wide geographic range of clientele. This, combined with the limited mobility of its clients puts Vision Australia in an interesting predicament; they must be able to use the limited resources they have to service a wide range of clientele while simultaneously staying unified as an organization.

Vision Australia has formed an internal project team, including a team manager and paid external consultant, to unify and solidify the organization's client service model. In order to achieve such a model, the organization must reconcile the wants and needs of the clientele with its service capabilities in such a way that clients are most efficiently and effectively served. Accordingly, Vision Australia must investigate three key aspects of the client service model: the services that are most important to the client and the ways in which they are offered, the past, current, and possible future capabilities of the organization, and the guiding principles behind the interaction between Vision Australia and its clients.

The goal of this project is to help Vision Australia identify the factors that need to be considered in developing a new, unified client service model. In order to achieve this goal, the following methods were used:

- Interviews with managers and direct service staff at Vision Australia to learn the essential attributes of their existing client service models, to identify what staff see as the advantages and disadvantages of different models, and to explore what they see as possible alternative approaches;

- A review of the literature on client service models to determine the range of options that are available to Vision Australia, and to identify the tools that exist to evaluate how effective and appropriate these models might be in the Australian context;

- A review of service models used by service organizations elsewhere in Australia and the rest of the world to observe what lessons may be learned from previous experience;

- Identification of key issues and concerns for VA's client service model development team and the production of recommendations about how a client service model might be designed to address said concerns.

This analysis should allow us to shed some light on the key aspects of a good client service model. Based on this knowledge we can create a set of recommendations for VA's client service model development team. Given this solid framework, it is hoped that Vision Australia will be well equipped to form the new model that will best serve its clients and make life easier for Australia's growing blind population.

2 Background

The subject of client service models for the blind is a large one, spanning multiple topic areas. The most relevant to this study were:

- General information on the blind in Australia;
- The history of Vision Australia itself, and of each of its pre-merger entities;
- Vision Australia's international "peers" in the provision of blind services;
- Client service models; and,
- Mergers, and the challenges they pose.

2.1 Blindness and Vision Impairment in Australia

Blindness and vision impairment are serious and growing concerns for Australians according to Taylor *et al*. (2005). Very few studies have been conducted regarding vision impaired Australians and how they deal with their disability; only in the last 10 years have data become available for analysis. After reviewing and statistically analyzing data from two studies, the Melbourne Visual Impairment Project and the Blue Mountains Eye Study, Taylor *et al*. estimated that in 2004, 480,300 Australians had low vision (50,600 were completely blind). It is estimated that by 2024, 799,100 Australians will be living with low vision (87,600 will be totally blind). Of the estimated 480,300 Australians with impaired vision in 2004, 62% of those with low vision and 4% of those with blindness had a correctable vision error. For those Australians without correctable vision errors, the most common cause of low vision is cataracts (37%) and macular degeneration (26%). The most common cause of blindness is age-related macular degeneration.

Vision Australia, an agency formed by a merger of three separate organizations in 2004, is the largest provider of services to the blind and vision impaired in Australia. Though their top-level management has been successfully merged into one unit, the client service departments of the organization have not been changed. Currently, Vision Australia is in the process of re-evaluating their service model, in the hopes of providing better quality service to their clientele. The purpose of this project is to research international organizations that provide services to the blind and vision impaired, present these findings, and suggest the best way to structure a new, improved client service model.

2.2 Vision Australia Background

Vision Australia (VA) provides services to more than 5,700 blind and vision impaired people throughout Victoria, New South Wales and the Australian Capital Territory. The mission of VA is to "Excel in the creation of a community partnership of knowledge, skills and expertise to enrich the participation in life for people who are blind or vision impaired and their families." (Vision Australia 2005) VA accomplishes its mission through a wide range of services, including educational programs, employment services, and technological solutions. VA is a non-profit organization funded through grants and donations from the private sector as well as government grants (approximately 60% of VA's funding comes from private donations). VA employs 800 people and relies upon the support of almost 14,000 volunteers.

2.2.1 The Formation of Vision Australia

Vision Australia itself is a relatively new organization, but the organizations that it is composed of have a long history of service to the vision impaired of Australia. On May 16, 2002, the councils of the Royal Blind Society (RBS), the Vision Australia Foundation (VAF), and Royal Victorian Institute for the Blind (RVIB) met to determine the viability of a merger between their organizations and they determined that a merged organization would better serve the vision impaired community in Australia. Additionally, a merger would end the competition for funding among the parent organizations. During this meeting, a team known as "Project Nexus" was created to handle the proceedings of the merger and to prove that the merger was a viable solution to the members of each of the three organizations. Project Nexus proposed to structure the organization on a national level, with a central board and CEO governing the organization's actions across the states. Furthermore, they developed a number of guidelines for the Client Service Model (which are available in Appendix A). These guidelines outline the general rules that should be followed when delivering services to a client; they ensure that clients receive the services they require and that they are treated with the respect that they deserve. Project Nexus also performed a gap analysis on the services that each of the three parent organizations provided. This gap analysis details several service offered by the parent organizations and points out different methods used for providing these services, but makes no evaluation of the services that are offered or the effectiveness of their implementation.

The boards of each organization unanimously accepted Project Nexus' proposal for the merger during their board meetings in June 2003. After this vote, the merger pended on the vote

of the members of each organization, which occurred in July 2004; the vote succeeded and the merger was approved. In September 2005 the merged organization began operating under a single management structure and under its new name of Vision Australia.

2.2.2 The Vision Australia Foundation

The Vision Australia Foundation provided services to the blind and vision impaired throughout Victoria and parts of New South Wales since their founding in 1895. VAF's vision was "to help people make the most of their remaining sight, to continue living independently, safely and confidently in their own homes and to go on leading happy and fulfilling lives." VAF was world-renowned for their expertise in assisting individuals who have lost or are losing their vision as a result of ageing. (Vision Australia Foundation 2004)

2.2.3 The Royal Victorian Institute for the Blind

Up until the merger, the Royal Victorian Institute for the Blind (RVIB) had been the leading provider of services to the blind and vision impaired in Victoria since 1866. RVIB's vision was "To be the leading provider of services, resources and information which enable people who are blind or vision impaired to maximise their independence and quality of life." (Royal Victorian Institute for the Blind 2004).

2.2.4 The Royal Blind Society

The last of the three merged entities was the Royal Blind Society (RBS), which provided services to approximately 1,600 individuals throughout New South Wales and the ACT. RBS' mission was "To use our specialist knowledge and skills to achieve equity and access for people who are blind or vision impaired." (Royal Blind Society 2005)

2.2.5 The Current State of Vision Australia

The current VA organization continues to offer all the services that were offered by the previous organizations (which can be viewed in Appendix B), as was promised during the merger. However, Vision Australia has yet to unify their service model, so client services are offered almost exactly as they were before the merger. This means that locations have not begun to offer the services of the other merged organizations (G. Craig & M. Littlepage, conference call, 0131-06). As the services of the original three organizations are merged into one service model, "there is no intention to decrease services. The only possible affect to services for

country/regional areas of NSW and Victoria will be an increase in range and access to services."(Project Nexus 2004).

2.3 International Organizations for the Blind

In order to gain a better perspective on the problem of building a better client service model, it is necessary to explore the structure more well established international organizations. There are some valuable lessons to be learned from the way that these organizations operate.

2.3.1 The American Foundation for the Blind

The American Foundation for the Blind (AFB) is one of the leading organizations for the blind in the United States. The priorities of the AFB include, "broadening access to technology; elevating the quality of information and tools for the professionals who serve people with vision loss; and promoting independent and healthy living for people with vision loss by providing them and their families with relevant and timely resources" (AFB 2006.)

One of the primary strategies that the AFB uses in order to accomplish this goal is to maintain a strong presence in Washington DC. To this end, they maintain a Public Policy Center in Washington DC, and make available a host of literature on advocacy, so that anyone can effectively lobby for government programs that meet the needs of the blind and vision impaired. One recent example of their contributions: the *Ophthalmology Times* (2005) reported that the AFB Technology and Employment Center at Huntington, West Virginia received $1 million in federal funding in order to research accessibility technologies. Also, the *Health Reference Center Academic* (2005) reported that the U.S. Office of Personnel Management recently drafted a proposal that would make it easier for employees with disabilities to get jobs in the federal government.

Other services that the AFB provides include support for the professionals that help the blind and vision impaired and the promotion of technological advances that provide for better accessibility. It also sponsors several events and awards in order to promote awareness about blindness and low vision. Although many of these services do not directly impact single clients, the AFB makes a point to promote the welfare of the entire blind community.

2.3.2 Helen Keller Services for the Blind

Helen Keller Services for the Blind (HKSB) was founded in 1893 and specializes in blindness rehabilitation (HKSB 2006). The mission of HKSB is "to help individuals of all ages

and degrees of blindness to live as independently as possible within their own communities…
Basic rehabilitation services, such as training in safe travel and daily living skills, are provided to
approximately 2,000 clients in the New York metropolitan area each year. In addition, we
annually screen close to 25,000 youngsters for eye disorders that will lead to permanent vision
impairment if not detected and treated early in a child's life" (2006). To this end, HKSB offers
many specific services in the area of rehabilitation, in such critical areas as children's education,
Orientation and Mobility, and even job training and placement. *Mothering* magazine (2000)
praised HKSB's services for children, stating that "The blind children have become more
independent, while the sighted students have learned to value diversity."

In order to provide these services, HKSB relies on centralized programs. Their facilities
include low vision clinics, senior centers, children's learning centers, rehabilitation centers, and
their national headquarters in Sands Point, New York (HKSB 2006). Due to the specialized
nature of these facilities, HKSB is able to offer a wide range of services. The weak spot of such
a model is that it requires clients with already limited mobility to travel to centrally located
facilities. This service model differs from some of Vision Australia's current services, which
place emphasis on domiciliary services. Due to the wide geographic range of VA's clients, this
centralized model would require adaptation for use in Australia.

2.3.3 British Services for the Blind

The Royal National Institute for the Blind (RNIB) is a British organization that serves the
blind and vision impaired. The RNIB is the leading charity for the blind in the UK (RNIB 2006),
with the goal of helping its members with "practical solutions to everyday challenges." It also
aims "to bring an end to preventable sight loss in the UK by 2020." RNIB deals with a very
large client base, "offering information, support and advice to over two million people with sight
problems" (2006.)

One of the most valuable lessons to be taken from the RNIB is its organizational
structure. RNIB is a membership-based organization, which permits both dispersal of
information to its members and also empowerment of its members, as it allows them to influence
the actions of the organization.

Another British organization with a unique approach to providing services to the blind
and vision impaired is Ability Net. Ability Net is dedicated specifically to "bringing the benefits
of computer technology to adults and children with disabilities" (Ability Net 2006) A few

examples of services provided by Ability Net include website designs and audits for better accessibility, specialty computer hardware, and also courses and workshops. All of these considerations should be important to Vision Australia as well in order to properly accommodate its clientele.

2.3.4 Royal New Zealand Foundation of the Blind

The Royal New Zealand Foundation of the Blind (RNZFB) is the sole provider of low vision and blind services in New Zealand. This "monopoly" provides the RNZFB with both a great deal of freedom and a great responsibility. Since Vision Australia is now the sole provider of low vision and blind services in the states of Victoria and New South Wales, they are now in a similar position. RNZFB has approximately 11,500 members, and membership is growing by about 1,200 people per year (RNZFB 2006.)

One innovation of the RNZFB that allows them to better service clients in rural areas far from central facilities is the "community committee." These committees consist of volunteers in the communities, and offer training for volunteers to provide some services to those unable to travel to a central location.

2.3.5 The Canadian National Institute for the Blind

The Canadian National Institute for the Blind (CNIB) is another international organization that serves the blind and vision impaired. The CNIB is a leading organization worldwide in "rehabilitation, research to prevent blindness, and library services for blind, vision impaired and deaf-blind individuals." The CNIB currently has 105,000 clients across Canada and this number is expected to double by 2015. Their services are diverse and designed to meet the three major client groups: children, the elderly, and working-age adults. One of the most unique and successful features of the CNIB is their open referral policy. The open referral policy allows any Canadian, regardless of age, access to CNIB's services without any extra costs or a direct referral from a doctor (CNIB 2006).

2.3.6 International Organization Analysis

The following chart outlines the primary differences between the service models of the international organizations that were just discussed:

Organization	Unique Service
The American Foundation for the Blind	Runs advocacy programs that are geared towards making improvements for the Vision Impaired as a community rather than on an individual basis.
Helen Keller Services for the Blind	Offers a number of client services *only* in the metropolitan New York area, at one centralized site.
British Services for the Blind	The membership system allows the vision impaired to access information and offers them the ability to influence the organization as a whole.
Ability Net	Provides current technological services including website designs and audits for better accessibility, specialty computer hardware, and courses and workshops.
The Canadian National Institute for the Blind	Has an open referral policy allowing clients access to services without requiring a doctor (regardless of age or any other factor).

Table 1: International Blind Service Organizations Gap Analysis

Each of the above service organizations had one aspect of their service model stand out in comparison to the others. The basic services offered by each organization were the same – accessibility training, special programs for children and the elderly, etc. – but each organization employed a different method or stressed a different part of client services in order to better provide for their clients.

2.4 Complications Inherent in Mergers

Organizations may decide to merge with each other for any number of reasons, but the decision to do so must not be taken lightly. In an article regarding the challenges that organizations face in mergers, Stahl states that for corporate mergers, current literature suggests a failure rate that ranges from 50 to 70 percent (2004). He goes on to postulate that this high failure rate can be attributed not to poor strategic fit, but rather to poor execution on the part of the merging organizations, which is treatable, if not completely avoidable. To create a fully functional and "gestalt" organization, wherein the whole is greater than the sum of its parts, the author urges organizations not to fall into the traps of insensitive management, lack of trust, power struggles, or what he calls a "leadership vacuum following the [merger]". It is his belief that "[i]nstead of melting everyone together, a leader must capitalize on the cultural differences between employees and try to diminish the psychological distances between them." Specifically,

he cites his reaction to a situation in which the employees of two recently merged companies still identified themselves as employees of their respective previous organizations; he recommended that the organization completely restructure itself to build a new business model that was truly different from that of any of its predecessors, with a distinct, unifying mission. This advice, while severe, broke down the residual loyalties that many employees still harbored for their former organizations and contributed to a solidarity that was previously unseen.

As Young states in a similar paper, the identity of any given organization is integral to its direction (2001). Especially in non-profit organizations, the author stresses that in order to make important structural and strategic decisions; the entirety of the organization must know what is "central, distinctive, and enduring." Of the four types of nonprofit organizations that the author delineates, Vision Australia fits best into the category of "Social Purpose Organizations." The author urges such organizations to stress their overall social motivating force in their mission statement. This is important especially after a merger, when social norms and expectations may be disjoint, and this will ultimately affect the productivity of the organization. Additionally, as Perras points out, socially motivated organizations are normally founded by very charismatic people who may be overzealous about their own vision for an organization's operations (2003). When confronted with a merged identity, these individuals may deem it necessary to champion their ideas over others without properly evaluating the advantages of all possible solutions.

To overcome the social and operational gaps inherent in mergers, La Piana suggests that organizations create a four-pronged approach that addresses mission, flexibility, leadership, and growth (1998). In each of these aspects, however, the author urges organizations to "not only embrace change, but [to] anticipate or even create it." Similar to Stahl's approach, this calls for a radical restructuring and monumental shift of identity rather than a simple joining of two ventures. La Piana goes on to say that this reorganization should be based (at least partly) on the self-interest of employees that are affected. Addressing legitimate concerns of employees, as the author indicates, prevents self-interests from becoming deep-seated reservations.

A more material challenge that merged organizations face is the integration of communication and technology in the newly merged identity. Larsen, in a 2005 presentation, outlined the difficulties that most organizations encounter in a merger process, first stating that the problem is very pervasive: "nearly 75% of all companies have reported problems in integrating their information systems." He goes on to say that while the actual methods used to solve these problems vary based on the idiosyncrasies of the individual organizations, they can

be determined through specialized analysis and adherence to some IT integration standards. The standards which he references are from the Boston Consulting Group, and they suggest a model that follows six "golden rules":

1. *Choose from programs and services that already exist within the organizations*
2. *Identify "clusters" of technological applications that perform similar tasks or generate similar data*
3. *Select methods according to a rigorous process*
4. *Look for "nuggets", which are isolated processes or technologies that perform an essential task*
5. *Balance the speed of integration with the selection of quality technologies*
6. *After the services are implemented, monitor them closely*

These guidelines can be generalized to any process, and for our purposes in this project, they can be extended to govern the services offered by Vision Australia.

2.5 Client Service Models

Client service models vary in size, scope, structure, and implementation according to the needs and abilities of each organization, and as such, they are highly specialized. Generalizations can be made, however, to abstractly determine if certain methods work more effectively than others on a regular basis. In order to achieve an improved service model, we must understand the constituent parts that an ideal service model should have. According to a study by Garschhammer *et al.* (2001), the client service model must facilitate the interactions between the service provider and the consumer. In an ideal world, a client service model would specify both every possibility for these interactions and the best reaction that the provider could take in response. In lieu of trying to understand every eventuality, a well-built client service model separates groups of interactions into classes and specifies the most common processes that these classes undergo, in the hopes that some standard operating procedure can be written for the majority of client interactions that is mutually beneficial to the consumer and the provider.

Furthermore, Garschhammer *et al*. (2001) makes a distinction between the *user* and *customer*. Accordingly, the customer takes a passive role, and uses the service only after being prompted to by a salesman. Conversely, the user takes an active role, and seeks out the service and pursues it under his or her own power. Due to the range of physical mobility of Vision

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Australia's clientele, our ideal client service model must grow to accommodate both customers and users.

In another study by Garschhammer *et al*. (2001), published in the *Journal of Communication and Networks*, the authors use a generic based service model, dubbed the MNM service model[1], to establish a set of guidelines for constructing a service model. The authors break down the requirements for a service model thusly:

- Service Definition: each service that is provided by an organization must be broken down and defined in general terms to provide a common understanding of the scope and implementation of each service

- Integration of Dependencies: services must then be subjected to testing via simulations of real-world applications to determine functionality and flaws

- Separation of Service and Implementation: by separating the abstract service definition from the service implementation, we are better able to write geographically distinct service implementations

- Management as Part of the Service Model: since services require not only implementation, but also support, we must include the management of that support in the service model

- Consideration of the Service Life Cycle: the client service model should take all phases of a service's lifetime into account, to enable consistent support

Additionally, Garschhammer *et al*. (2001) propose two different views with which the client service model should be evaluated. First, they suggest that the model be evaluated from the "service view", where interactions between the provider and customer side are examined, then the "realization view", where options within the provider are identified. By optimizing both the "service view" and the "realization view", a service model can be made that best suits the organization and its client base.

Recently, as Taylor (2005) points out, service organizations (both for- and non-profit), have been working towards the integration of technology into their client service models, specifically on their front-end, or client-side operations. He goes on to discourage the complete release of the human-to-human interaction from the client service front-end, instead stressing the fact that even though people who work with technology may be one of the most important parts

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[1] This model is named after the Munich Network Management Team, of the University of Munich, Germany, whose efforts to create a standardized service model culminated in the paper that is referenced above.

of the organization, it is their humanity and not their ability to manipulate electronics that is most beneficial. Rayport, Jaworski, and Kyung (2005) propose that organizations take an audit to decompose their client services into their critical parts and then to reassemble them in a way that is most beneficial and comprehensible to the end-user. They point to successes such as that of Borders and REI, whose computer kiosks have helped generate a great deal of consumer traffic and income by using their enormous data storage and retrieval resources to outperform any human being in their niche performance area. This high performance can be attributed to a composition they identify as "separate, relate, and integrate"; in the "separate" phase, individual services are optimized to perform on their own, in the "relate" phase, these services are connected at their common operating points, and finally at the "integrate" phase, each individual service is catalogued and organized such that the end-user's experience is most improved.

3 Methodology

The main goal of this project is to aid Vision Australia[2] in their endeavor to restructure their client service model.   To this end, our primary deliverable is a set of guidelines and recommendations for Vision Australia's client service model development team to utilize. These recommendations may be applied to Vision Australia's three currently separated service models, to unify them.   In this way, the client service model can be designed to first meet the needs of the client (vision impaired Australians) and then the service provider (Vision Australia.) Our research on current client service models established a background for what tradeoffs may be necessary to achieve the most effective model.

The following objectives were used to fulfill this goal:

- We identified and characterized the service models currently used by various international blindness service organizations.
- We reviewed the literature on commercial client service models.
- We compared and contrasted the client service models of the three pre-merger organizations with the current Vision Australia service model and those of international service organizations.

To accomplish these objectives, we used the following data gathering strategies:

- We researched archival data on the client service models of RVIB, VAF, and RBS to ascertain how each of those organizations handled clients before becoming integrated into Vision Australia.
- We contacted members of similar service organizations to determine how client services are handled internationally.
- We interviewed pertinent employees of Vision Australia to discover internal opinions on the advantages and disadvantages of existing and potential future client service models.

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[2] We worked from March 10th, 2006 to May 2nd, 2006 to provide an external and worldly perspective to an internally appointed project team, headed by a project manager.

TASK	WEEK							
	PQP	1	2	3	4	5	6	7
Prepare for Interviews								
Research Archival VA info								
Interviews with Intl. Blind Org.								
Interviews with VA Employees								
Develop Service Model Suggestions								

Table 2: Timeline of the Project

3.1 Archival Research

One of the greatest challenges Vision Australia faces in crafting a comprehensive client service model is the reconciliation of the three separate client service models that they are currently using, which are remnants of the three pre-merger client service organizations. Many employees are accustomed to their old (pre-merger) methods of operation, and may find it difficult to accommodate new or different methods. In order to make the process as efficient as possible and provide the best possible transition for the customers, we have suggested key aspects of existing client service models that Vision Australia could incorporate into their revised service model.

Research into such organizations as the American Foundation for the Blind, the Royal National Institute for the Blind (UK), and the Canadian National Institute for the Blind helped formed our opinions as to how an effective client service model should be designed and implemented. Combined with our interview results, our research into these international organizations gave us a good basis for the recommendations we have given to Vision Australia.

In order to understand the working models of the pre-merger organizations, we started by reading relevant internal documentation, which included annual reports, demographic information, company newsletters, descriptions of services offered, and documentation of organizational procedures. Our evaluation of these documents was

based on both the feasibility of several service models and their perceived[3] effectiveness. We received these archival documents from a number of sources – through the company intranet, printed documents, and electronic documents we requested from various organizational contacts.

In addition to the internal research into Vision Australia's client service model documentation, we located and analyzed general literature about mergers and client service models. This information allowed us to understand the business concepts at work in a more general sense, so that we could apply current best practices from organizations other than those that service the blind. The vast majority of our research into these sources was completed before we arrived in Australia.

Another important benefit of our archival research was its added guidance in shaping the objectives of our interviews. Our perspective on the composition of a good client service model and the background of the interviewee's organization allowed us to make more informed and useful queries. In turn, this helped us to make better evaluations of the various client service models that we encountered.

3.2 Interviews

In order to further understand client service models, including those of blind service organizations similar to Vision Australia, we conducted a series of interviews. First, we interviewed a number of representatives from other blind service organizations. These organizations – The Royal National Institute for the Blind, the Royal New Zealand Foundation of the Blind, and the Canadian National Institute of the Blind – are briefly described in Section 2.3, along with two other organizations that we were unable to contact.

Our sponsors were able to suggest a short list of Vision Australia employees at various locations that would be of value to interview. We contacted each of these people and were able to arrange interviews with most. Some that were not available for interviews were able to provide us with some useful information electronically. We interviewed employees from each of the pre-merger organizations, including the current client services manager and several employees who worked directly with clients.

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[3] The "perceived effectiveness" of various parts of a service model was determined by the professional opinions of service organization employees, which were found through interviews with Vision Australia staff and contacts at other international blind service organizations. These interviews are addressed in section 3.2.

Through an aggregation of our interviews within Vision Australia, we gained insight into the distribution of the following information:

- Which organization employees worked for before the merger;
- The interviewee's place in the former client service model structure;
- The interviewee's perspective on the strengths and weaknesses of the current client service model vs. their pre-merger one; and,
- General perceptions on the merger and how things have changed post-merger.

Additionally, these interviews gave us insight into several other aspects of the organization, such as the employees' perception of the client's level of satisfaction, the geographic range of the clientele, and the employees' individual job satisfaction levels. Due to the fact that much of this information is highly sensitive, confidentiality was a serious concern during interviews. In an effort to minimize the effects of confidentiality concerns, all interviewees were given the option to view drafts of reports that contained information gathered from their interviews to ensure that they are aware of the inclusion of any possibly sensitive information.

These interviews ranged from 30 minutes to over an hour, depending on the job of the person interviewed and the depth of information we wished to obtain. One to two team members conducted each interview session, and the interviewee was informed that all information would be held in confidence. We opted not to record interviews but to take written notes instead, because we felt that many people might be uncomfortable with having such sensitive information recorded.

Through analyzing these interviews, were we able to determine some of the most common employee opinions. Challenges and solutions to these challenges that various employees mentioned became the focus of our analysis.

3.3 Formation of Client Service Model Suggestions

As a final deliverable, we have developed a set of guidelines for Vision Australia to follow in revising their current client service model. These guidelines are provided in the framework of a four step iterative process, which will outline the steps that Vision Australia should take.

Many of these recommendations draw upon the "six golden rules" architecture set forth by the Boston Consulting Group, and they will give Vision Australia perspective on

which services are to be implemented and on what scale. Our solutions have come from our background research and from analysis of our interviews with Vision Australia personnel. We have chosen to focus on the areas of the greatest concern, as voiced by these sources. Certain recommendations have been deemed out of the scope of our project, such as specifics pertaining to implementation.

4 Data

The project team has gathered information from archival evidence, interviews with international blindness service organizations and managers of the pre-merger Vision Australia organizations, observations of direct service staff, and site visits.

4.1 Archival Research

Documentation of the organizational structure of both the pre- and post-merger incarnations of Vision Australia is essential to understanding the consequences that the merger has had not only on the client service model, but also the organization as a whole. This information, which includes organizational charts, demographic and financial data, and results of internal projects (i.e., Project Nexus and the subsequent VA Strategic Plan), was made available through a number of different methods and has clarified some of the difficulties Vision Australia is facing.

The figures in Appendix D: Organizational Charts illustrate the differences between the hierarchies of the client service departments of the pre-merger organizations, both regional and central. Also included is a tentative chart for the client service model formation team, which is slated to become the top level of the new client service department.

The merger of the three client service organizations has had logistical consequences other than the simple need for hierarchical restructuring. Each of the three organizations had their own distinct client demographic and their own methods for funding the services they offered. These differences are a product of several factors, including geographic spread of the clientele, cultural diversity of the clientele, and slight disparities between the three organizations' mission statements. The tables located in Appendix E: Client Demographics elaborate upon the demographic diversity of clientele between the pre-merger organizations.

Project Nexus was created to handle the proceedings of the merger and to prove that the merger was a viable option for the members of each of the three organizations. This project proposed to structure the organization on a national level, with a central board and CEO governing the organization's actions across the states. Furthermore, it

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developed a number of guidelines for the Client Service Model (which are available in Appendix A: Quality Standards for Client Services). These guidelines outline the general rules that should be followed when delivering services to a client; they ensure that clients receive the services they require and that they are treated with the respect that they deserve. Project Nexus also performed a gap analysis on the services that each of the three parent organizations provided. This gap analysis details many services offered by the parent organizations, and points out different methods used for providing these services, but makes no evaluation of the services that are offered or the efficacy of their implementation. This analysis portrayed a more unified client service model than what truly existed; it failed to identify differences in how similar services were offered between the pre-merger entities.

The boards of each organization unanimously accepted Project Nexus' proposal for the merger during their board meetings in June 2003. Subsequently, in July 2004, a vote of the members of each organization approved the merger in its entirety. In September 2005, the merged organization began operating under a single management structure and under its new name of Vision Australia.

Vision Australia's strategic plan for the next two years was solidified in a comprehensive document, written in early 2006, that describes the organization's overall vision and mission and elaborates upon how it intends to achieve its goals. Knowing the organization's strategic plan is essential in understanding the framework for this IQP. Suggestions made by this project should not directly conflict with the strategic plan, nor should a suggestion be an item already covered in the strategic plan.

As stated in the plan, "Vision Australia is a living partnership between people who are blind, vision impaired or sighted. We are united by our vision that in the future people with blindness or vision impairment in Australia will access and fully participate in every part of life they choose" (VA 2006.) This is followed by their organizational mission statement: "Vision Australia will achieve this through creating a community partnership of knowledge, skills and expertise to enrich the participation in life for people who are blind or vision impaired and their families. We will ensure that the community recognises their capabilities and contributions."

The vision and mission statements are accompanied by a set of 6 main goals. These goals are:

- *Build a strong national organisation*

- *Refine and deliver good services*

- *Make information fully accessible and usable*

- *Advocate to break down barriers*

- *Establish and grow Vision Australia within the community*

- *Expand the quality, quantity and reach of our services (2006)*

The project will focus on two of these key points: the refinement of services and the expansion of the quality, quantity, and reach of the services.

The expansion of the organization will lead to a larger client base, and this must be accounted for in the client service model. As stated in the strategic plan, "The aging population means the demand for blindness and low vision services is going to increase. We must ensure that we can respond to an increase in demand. We need to provide more and better services to more people and from more locations so that our services are easier to access" (2006). Therefore, suggestions made by this project must be scalable, and keep in mind that services offered will need to be delivered to a greater number of clients over a large geographic range.

Following the statement of goals and a section on planning and the allocation of resources, the plan discusses the organization's key initiatives for the next few years. The relevant initiatives that the organization has set forth for the months leading up to June 2006 include these goals for the new client services model:

- *Provide an individualised, affordable array of services*

- *Approve matching staff structure*

- *Review assistive technology equipment and implement outcomes*

- *Identify client management information system (2006).*

These guidelines are essential to the project, as they offer a framework for the final deliverable and the expectations that Vision Australia has for the future of their client services.

4.2 Interviews

A broad range of interviews were conducted for this project and provided information that went beyond what was learned through archival data from the pre-

merger organizations. All interviews conducted were held in confidence, so as to allow the interviewees to speak more freely.

4.2.1 International Organizations

One of the main goals of this project was to investigate various client service models of similar international organizations, in order to apply cogent best practices to Vision Australia's new client service model. The three organizations from which data was received were the Royal New Zealand Foundation of the Blind, the Royal National Institute for the Blind and the Canadian National Institute for the Blind. The data gathered from each organization was very diverse, partially because of the differences in geographic locations.

An interview with a divisional manager at The Royal New Zealand Foundation of the Blind provided an example of a client service model heavily reliant on community volunteers to provide services. This system has strengths and weaknesses, as some of the community committees can be superb while others can be below average. The RNZFB has a singular model of service delivery – they focus primarily on providing centralized services and rely on communities to deliver regional services. They are also the only provider of services to the blind throughout the entirety of New Zealand, which eliminates competition for funding and any need for the consideration of a merger.

The Royal National Institute for the Blind (RNIB) offers support and assistance to over two million vision impaired clients throughout the UK. The RNIB offers a wide range of services to their clients, including low vision services, rehabilitation, counseling, education, employment services, and a number of other services; the exact availability and implementation of services. Additionally, many of the services offered by RNIB are distributed on a strictly centralized basis and are unavailable to clients that are unable to travel to an RNIB site offering that service. Most of RNIB's services, including its domiciliary services, are offered by a series of specialists rather than one generally trained service staff member. For other services, like their telephone helpline, callers will speak to a staff member with general training, and will only be forwarded to a specialist if they require assistance that the employee who took the call is unable to offer. Like most other organizations, this service model was not developed at one time by a series of

staff and consultants (as Vision Australia's will be), but instead developed piecemeal over years of service provision.

RNIB reports that it has undergone a number of "mergers", but each of these occurred with much smaller local and regional charity organizations that were essentially engulfed by the RNIB. In the for-profit sector, they would most likely have been called acquisitions rather than mergers. These "merged" organizations continue to operate in their previous facilities with their previous staff structure, but under the RNIB name. In a sense, the only change is the ability to operate with the additional resources provided by the larger national organization. The vision impaired community benefits because redundancies are eliminated while essential services are maintained. Recently, the RNIB considered a merger with a larger organization, but the other organization backed down over concerns of the loss of its brand name and senior staff.

4.2.2 Vision Australia Employee Interviews

Previous general managers, mid-level managers and a number of direct service staff were interviewed as part of our project. Virtually all of the middle managers and direct service staff had similar views on the current client service model and what changes should be made. They reiterated a few key points:

- There are mixed perspectives on how management should function in the new organization.
- Middle management is uncertain about their future.
- Direct service staff are uncertain about how they will deliver services in the future.
- Funding has been affected in several ways by the merger.
- Employees are generally unaware of how the other pre-merger organizations functioned.
- It is doubtful that a single client service model will go into effect for entire organization; many parts of the model must be regionalized to accommodate the communities that VA services.

Almost all of the middle managers are concerned that when the new client service model is implemented, their positions may be downsized or potentially cut. As both RVIB and VAF serviced clients in Victoria, they each operated a number of offices that

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offer services to the same regions; how these offices will operate after client services unification has yet to be determined. The previous VAF and RVIB organizations each had a single manager in charge of the regional offices; this situation will probably require restructuring as final stages of the merger are completed.

Direct service staff are currently operating under their pre-merger organizations' service models. Several of the employees were defensive during the interviews, citing concerns that their jobs may change or be eliminated as a consequence of the service model restructuring. This was particularly evident in the inconsistent methodologies for service implementation between the three pre-merger organizations – in the ex-VAF, Optometrists offered a centralized service in their low-vision clinics, while ex-RVIB offices offered low-vision services in the home through Orthoptists. The merger has left Orthoptists in Victoria worrying that they may be faced with different responsibilities after the merger.

The merger has also affected funding in a number of different ways. There have been indications from employees in the old RBS business unit that private donations have decreased as a result of the decision to leave the word "Royal" out of the name of the new organization. Reportedly, many older donators still feel a strong connection to the Queen and saw this as an affront to this connection. Employees from the old RVIB and VAF have reported no change in private donations. Private donations aside, nearly all interviewees have suggested that the merger has enabled Vision Australia to acquire additional funding from the government, as it is now a national organization. One mid-level manager reported that a number of requests for funding that were previously denied by their pre-merger organization have since been granted by the new Vision Australia management group; other mid-level managers have stated that their funding has remained unchanged.

Currently, the service staff have very little knowledge about how the other pre-merger organizations operated. Mid-level managers have more knowledge, but not even the general managers could fully explain the nuances of the other pre-merger organization's service models. This lack of knowledge about how other organizations operate has created a barrier to the formation of a unified client service model and a number of managers and direct service staff have stated that they doubt the separate service models can be unified.

4.3 Site Visits

Members of the project team visited several Vision Australia facilities to observe services available at each site and analyze the differences between the delivery of those services. The project team found that the Vision Australia facilities continue to operate under their former organization's client service model and there are discrepancies between both the services offered and the way the services are provided at each site. [Insert info about RBS non-existence in paper]

4.3.1 Boronia

Boronia was the headquarters of the Eastern Regional Division of the former RVIB. Employed there are two Early Childhood educators, a Visiting Teacher, an Orthoptist, an Occupational Therapist, two Orientation and Mobility instructors, a service coordinator, and an office administrator. This staff is managed by Maree Littlepage, the Eastern Division Regional Manager. The Boronia site offers all of the non-centralized services of the former RVIB and these services are typically provided in the client's own home by a specialist or number of specialists, as appropriate. When new clients are referred to the Boronia office or any other regional RVIB facility, they are given an initial intake interview to determine their needs and eligibility for services. This information is used to who will develop an individual service plan for the client, which contains the vision impairment(s) that prompted the referral, the service or services to address the problems, and the ultimate goal of the service. When the initial goal is achieved, an evaluation is done and if necessary, further services are offered.

4.3.2 Kooyong

The facility at Kooyong is a former VAF facility and in addition to housing most of the administrative and management offices for Vision Australia, it also provides a very broad range of services. The most prominent of these services are the Low-Vision Clinics. The clinics operate in partnership with the College of Optometry and generally yield excellent results. Through the clinics, clients are also introduced to the various other services that Vision Australia provides.

The Kooyong facility also includes a radio station, a library of books on tape, and a multitude of phone services for clients. The majority of these services are run by

volunteers. The Kooyong facility is unique in that it has 2,500 active volunteers who help out by reading the daily newspaper on the radio, coordinating conference calls of interest groups, running daily activities, and performing administrative tasks.

4.3.3 Mitcham

The Vision Australia facility in Mitcham is a former VAF site that offers all of the former regionally distributed VAF services. The Mitcham site staffs a range of employees, including an office administrator, an Orthoptist, two Occupational Therapists, an Orientation and Mobility specialist, two welfare workers, a volunteer coordinator, a day program worker, and a team leader.

Mitcham, unlike former RVIB sites, does not have a service coordinator position. Instead, the staff shares the intake and referral responsibilities; *sharing* these duties means that the direct service providers are required to spend time away from their jobs to interview new referrals. This causes long waiting lists for certain specialist services, such as the Orthoptic service. Several staff in Mitcham expressed feelings of discontent with the administrative work that prevented them from providing services to clients.

Another point of tension that arose during interviews with direct service staff in Mitcham was an agreement between VAF and the Victorian College of Optometry that requires Optometrists to prescribe magnifiers to clients, rather than Orthoptists; an Orthoptist must first receive permission from a manager and consult with an Optometrist before they can prescribe a magnifier to a client. This sharply contrasts with the position of Orthoptists who work at ex-RVIB facilities.

Mitcham receives the support of a large number of volunteers – approximately 400 a year. These volunteers work under the guidance of a volunteer coordinator. Most only volunteer a few times a year to help with fundraising projects, such as holiday gift wrapping. There are also about 60 volunteers who volunteer on a weekly basis, some even multiple times a week. These volunteers handle a wide range of tasks including assistance with day programs, peer support groups, and office administration.

One employee at Mitcham spoke fondly about the "companion visiting" program, in which volunteers to visit clients in their homes. These visits serve to provide the client with companionship, but no professional vision impairment services are provided. Unfortunately, this program is currently being phased out due to a lack of funding.

4.3.4 Burwood

The Burwood site currently houses the Vision Australia School for the Blind, formerly the RVIB School. This site and the Training, Technology, and Equipment center were the only two centralized services offered by the former RVIB. The majority of the students enrolled in the school are in primary students and the school concentrates on integrating as many of them into the public school system as early as they are able to. The curriculum for students in the primary grades is similar to that of a typical primary school, but it contains an added focus on training designed to prepare students for integration (Braille skills, Orientation and Mobility training, etc.). The school aims, above all, to be flexible to every student's individual needs. Students who stay in the school after the traditional primary years often have disabilities (other than their vision impairment) which prevent them from being integrated into the public schools. These students are trained in real world survival skills, such as banking, the use of public transport, and reading survival skills. The school also offers a Support Skills Program every Friday for students in the country who are unable to attend the school. These students are able to learn Braille skills and receive Orientation and Mobility training without having to travel to Burwood. Additionally, a number of students pursue a dual enrollment at a public school and the VA School for the Blind; they are able to take regular classes in the public school system and supplement them with courses in Braille and Orientation at the School for the Blind.

One of the most interesting programs at the School is their Reverse Integration Process, where fully sighted children from nearby public schools attend classes at Burwood with vision impaired pupils. This gives the sighted and vision impaired students a chance to interact and prepares the vision impaired students to learn in a larger class size than they are traditionally exposed to. The program also expands the capacity of the school and permits the procurement of additional funding.

Due to the centralized nature of the VA School for the Blind, a large number of students that would benefit from attending the school are unable to do so. The school is unable to provide transportation, making it necessary for the students to be driven to school, use public transportation (which is often not feasible due to mobility concerns), or take a taxi (which can be very expensive). The old RVIB School *did* offer on-site housing up until the mid 1970s, for students that lived too far away from the school. This

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program was ended when the Australian government decided to cease funding on the program, citing fears of institutionalization. They believed that the vision impaired needed to be immersed with society rather than cordoned off in their own school. Although several overnight Support Skills Programs are offered, the depth of service is less than that of any school with a boarding program.

4.4 Client Feedback

Some feedback was taken directly from Vision Australia's clients. This information was useful in order to establish the clients' perception of the most important parts of a client service model.

4.4.1 Client Representative Council

The client representative council is a client-run body with the purpose of providing constructive feedback to Vision Australia. The council is a crucial part of client feedback and will be important to Vision Australia's new client service model. Integrating the council into the model will permit the clients to provide the organization with more feedback about the services they receive. This could allow Vision Australia to speedily resolve any problems the clients might be having with the services they are provided.

5 Analysis

Research into client service models and mergers, interviews conducted with international blind service organizations, and interviews conducted with the staff of Vision Australia have provided insight into the challenges faced by the organization as it forms its new client service model.

The first set of challenges stem directly from the merger. These challenges include:

- Inconsistencies in information and communication technology within the organization
- Variations in client demographics across the three parent organizations
- Issues with the adoption of a unified corporate identity

The second class of challenges are the general problems that are inherent in servicing the merged organization's entire client base:

- Wide geographic distribution of the clientele
- Intake procedures that differ among the constituent business units
- Varied support for client classes

The suggestions offered by this project address each of these challenges with at least one possible solution, and list the strengths and weaknesses of each approach.

5.1 Inconsistent Information Technology

Technology has become an integral part of many modern organizations, and even slight inconsistencies in the normal operations of some technologies can lead to severe communication problems. Information technology presents a large problem for merged organizations, as conflicting email and phone systems are notoriously difficult to coordinate. Additionally, Vision Australia has inherited several different inventories of assistive equipment that the three pre-merger organizations sold to clients under sundry pricing structures.

Since the ability to send messages inside an organization quickly and securely is a basic need for most organizations, email systems have recently become an essential

means of communication. Vision Australia is no exception. In our series of interviews, many employees (both management and direct service staff) reported problems with their email. Many messages would be sent but not received and others would arrive in duplicate or triplicate. The project team even encountered several difficulties in our limited time working in the organization – learning the hard way that the simple addition of ".au" to a visionaustralia.org email address may result in non-delivery, depending on which pre-merger organization the employee worked for.

Verbal communication is especially important in an organization which not only services but also employs a vast number of people with vision impairment; when a face-to-face meeting is not feasible, the telephone becomes the preferred method of communication. Internally, Vision Australia's phone systems function very well despite the merger. With external communications such as the corporate hotline (1300 VISION), however, managers have reported switchboard problems – clients that call this number are not always routed to the nearest service site. This can lead to an unequal distribution of service. Some sites may be overworked, while others end up slighted.

Each of the three pre-merger organizations offered various sets of assistive equipment for clients with low or no vision and all of these were offered at various prices due to different sources of funding that allowed the organizations to offer them. The merger has resulted in a mass of mixed inventory and pricing structures. It is important that Vision Australia consolidate their inventory and set their pricing plan. Many factors, including inconsistent government funding, liquidation costs and obsolescence will make this a very difficult task.

5.2 Varied Client Demographics

As a result of the merger, Vision Australia has become the sole provider of blind and vision impaired services in the states of Victoria and New South Wales. Now VA is charged with the responsibility of providing services to a full range of blind and vision impaired clients rather than a limited demographic group. Prior to the merger, the three parent organizations each serviced their own distinct clientele – VAF provided service to primarily elderly clients, and RVIB offered services to many children and young adults, while RBS provided service to the entire age spectrum. Additionally, RVIB was

estimated to have by far the largest number of legally blind clients at over 70%. VAF and RBS, by comparison, were estimated to have fewer than 25% legally blind clients.

One of the greatest challenges facing Vision Australia in the months leading up to June 2006 (the deadline for the formation of the new client service model) will be the adjustment of its regional facilities so that they are able to provide services to a wider range of demographic groups. Meeting this challenge will improve the organization's overall efficiency by allowing services to be offered from any facility rather than just the one that offered the service prior to the merger.

5.3 Vision Australia Identity

La Piana suggested a radical identity shift following a merger, with the purpose of overcoming social and organizational gaps (1998). Vision Australia has already created an identity, including a new name and logo, but this new identity has yet to be completely embraced by its employees and volunteers. Many still regard themselves as "ex-RVIB," "ex-VAF," or "ex-RBS" despite wearing a name badge that reads "Vision Australia."

The first issue that should be addressed in this radical identity shift is the unification of terminology so that employees can speak openly about services using a common language. Currently, there exist many terminology inconsistencies that must be identified and remedied. The scope of these terminology differences is so broad that our project cannot identify and correct every single one, but a few key differences have been identified. Terminology differences, such as these, may not have a readily apparent effect on the way services are offered, but with the establishment of a standard set of definitions will improve communication and thus allow for better internal organization.

In some cases, two services may be named similarly, but the application differs across the old organization lines. One example of this is the case of the "Orthoptist", a vision specialist in VA whose job description changes immensely depending on which facility the Orthoptist is employed. In general, Orthoptists study and treat defective eye coordination through non-surgical methods. Orthoptists at former VAF facilities assess and refer clients to an Optometrist in the Kooyong office for any necessary prescription, according to an agreement with the Victorian School for Optometry. In contrast, ex-RVIB facilities do not have Optometrists on staff and Orthoptists assess clients and make prescriptions on their own.

Alternatively, services across organizations may have completely different names even though they provide the same type of service for the client. For example, assistive technology equipment was available through all three of the pre-merger organizations, but similar equipment was provided under a different name, and sometimes through a different department of the organization. RVIB marketed trademarked equipment (products of international blind assistive equipment manufacturers VisTech and VisEquip) primarily in a central showroom and partially through their branch offices, but RBS and VAF both placed their equipment distribution under their low vision departments, so clients had to be referred by a specialist in that clinic in order to purchase equipment.

Also vital to Vision Australia's internal identity is the specific way in which services are offered. Many organizations look for the "best practices" of their pre-merger identities. By eliminating redundancies in services and concentrating on methods that work more effectively than others, the organization is strengthened. During our interview process, it was suggested by some managers that elimination of services may not be very feasible, since almost every service that Vision Australia offers is critical and the way in which it is offered has evolved over time to fit the client demographics and the geographic area in which it is offered. While this may be true, interviews with lower-level management and service staff have revealed that some offices are already working on best practices documents to establish their own service implementations as superior to others. Even though research shows the "best practices" process to be painful and intensive, it will be a necessary part of the new service model creation.

After the organizational identity has been worked out amongst the management and the service staff, the clients should be made completely aware of the merger and all of the ramifications that it entails. The organization that they have become accustomed to receiving services from is going to change, and the degree to which it does may vary depending on any number of influences. Large quantities of resources have already been put into this task.

Branding of the offices still remains an issue[4], but steps have been taken to reinforce the new Vision Australia Identity. For example, most brochures containing the

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[4] Most notably, the St. Kilda Road office is a stone building with "Royal Victorian Institute for the Blind" emblazoned in metal above their entrance and the Burwood School retains its wrought-iron gates with "RVIB" prominently featured.

logo of any of the three parent organizations have been shredded or otherwise disposed of and new pamphlets with the Vision Australia logo have been printed and distributed. Moreover, interviews with service staff have shown that community service programs like "Carols by Candlelight" have publicized the new organization very well, and that because of the consolidation of resources, advertising is more prominent than ever.

Clients should also be aware that mergers are an opportunity for sweeping changes to be made within and without the organization. They are given an opportunity, through focus groups and interviews to incorporate some of the changes that they have wanted to see in the organization. To address this issue, the Client Representative Council and the Consumer Advisory Body have been formed.

5.4 Geographic Distribution of the Clientele

The wide geographic distribution of Vision Australia's clientele makes it difficult to provide equal service to clients living far from Vision Australia facilities. This problem is particularly important post-merger, as the organization must now adequately provide services to clients across two states. It is essential for Vision Australia's new service model to use its combined resources to best deliver these services.

5.4.1 Centralized Services

Some services offered by Vision Australia are provided at centralized locations because it does not make sense either financially or logistically to offer them in the regional offices. Examples of such services include the Low Vision Clinic in Kooyong and the School for the Blind in Burwood. Clients may only receive these services if they are able to travel to the facilities. In some cases, the organization is able to provide transportation to the facilities, but often such provisions are limited. For instance, the School for the Blind hires taxis to transport students to the school, but only if they live within a 20 kilometer radius. Potential students living outside this range may not be able to attend the school if they cannot find alternative transportation.

Since centralized services like these are accessible to a relatively small percentage of Vision Australia's client base, the existence of centralized services may be a factor contributing to inequity in the current client service model. There are two ways to rectify this problem. The first is to decentralize the services by providing instructions for these services to be offered at every regional facility, and the second, less intensive option, is to

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offer the services at a few locations throughout the two-state area, thus keeping the service centered, but expanding its reach. Both approaches have their benefits and drawbacks, and the choice must be evaluated on a case-by-case basis.

5.4.2 Domiciliary Services

Although domiciliary services are currently available to most clients living far from Vision Australia's regional facilities, the current model leaves much to be desired. Sending a staff member to a client's distant home is costly to the organization, both in travel costs and employee travel time. Furthermore, there is typically a long delay between the client's communication of a need and the ability of a specialist to provide service to address that need. As a consequence, domiciliary visits to remote clients are usually more infrequent, hampering the ability of the organization to provide them equal services.

A common practice for providing services to clients in rural areas is to send out a single specialist as an assessor. This person may then determine which specialists are necessary to meet the client's needs. The details of this procedure differ across the three parent organizations, but the referral process inevitably takes time, and typically delays the date that the client finally receives the needed service.

5.4.3 Core Competencies

In many cases, the staff member who performs the initial assessment can provide some core services that can be implemented by any person with the correct basic training. These simple services could satisfy some of the client's needs right away, without the need to squander time and resources on sending in a specialist. The act of providing these basic services is sometimes called "multi-skilling" or "core competencies" and various forms of this discipline existed in two of the three pre-merger organizations.

Employees of the former VAF were given a minimum level of training, so if a distant client needed a range of services, one staff member would be able to provide at least basic support in each area. Based on that person's recommendations, a specialist might be sent at a later date if necessary. Former RVIB employees used a similar program, where staff members in different positions share basic information about their professions with their colleagues, to ensure that each employee has a basic level of knowledge of services that the organization offered. Former RBS employees did not have

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any practices similar to "core competencies." These "core competencies" helped in much the same way as the VAF "multi-skilling" program.

Ideally, every employee would have a complete knowledge of every discipline within the organization so that one person could adequately provide all the services that a client would need. Realistically, this model is not feasible. Instead, the best approach might be to continue programs such as "core competencies" and "multi-skilling" on an organization-wide level. The creation of a standardized program promoting general skills would be effective in reducing the amount of specialist staff necessary for domiciliary service.

5.4.4 Community Based Services

Several organizations, like the Royal New Zealand Foundation of the Blind, have instituted community service centers that are run by volunteers to coordinate client services. These community committees partially rectify the problems associated with geographic distance by creating qualified service volunteers directly in the communities of the client. The drawback to the community committee system in New Zealand (as described by one manager) was that some communities tend to have excellent programs, while others are often inadequate. This leads to the same inequality of services that the community committee system is designed to fix.

The former VAF had a volunteer-based community system as well, known as the "companion visiting" program. This program coordinated volunteers to visit clients in their homes, which served to provide the client with companionship, but no actual clinical services. This program is currently being phased out due to a lack of funding.

5.5 Intake Procedures

The client intake procedures of the three former organizations differ. RVIB facilities typically have a staff member known as the service coordinator, whose responsibility it is to handle intake and referrals. VAF facilities have no service coordinator. Instead, VAF staff alternate performing intake procedures, forcing the specialists to perform that administrative work on top of their normal duties. One former VAF manager said that VAF employees have requested dedicated intake workers many times, but their suggestions have not been acted upon. The formation of the merged client service model is a good opportunity to standardize and streamline intake

procedures, and it should be a goal of the client service model project team to accomplish this.

5.6 Special Classes of Clients

In the creation of the new service model, VA will need to take into account a vast demographic spectrum of clients. Certain special classes require more intensive services that are related to their vision impairment, but are not strictly vision services. These services were all handled differently by the three pre-merger organizations.

5.6.1 Low Income Clients

Technology for blind and low vision clients is constantly improving, but this technology is not without cost. Clients that cannot afford this technology are at a great disadvantage and may not be able to obtain simple technology that could make their lives easier and more independent. Currently, clients receiving services originating from ex-RVIB facilities have several options available to help offset these costs. Government funding and private donations compose most of the funding. Workplace modifications and funding for children in government funded schools is available as well. Also, RVIB had a loan program which was designed to help its clients finance needed technologies, but the program was suspended at the time of the merger. Despite these sources, as one former RVIB manager told us, there wasn't always enough funding to cover all of the technologies that a client might need.

Archival evidence shows that RBS of New South Wales receives significantly less funding from its state government, and as a result its clients received less government support for personal technology.

As Vision Australia evaluates its client service model in the months leading up to June 2006, it is important that the organization follow a unified strategy for acquiring funding. The organization should consider such tactics as appealing to potential donors, effective lobbying to obtain government funding (especially in New South Wales), and the possible reintroduction of the client loan program that the former RVIB used. It is improbable that funding can be found to cover every possible technological aid for all clients, but providing each client a guarantee of at least some funding for their needs would markedly increase client satisfaction.

5.6.2 CALD Clients

Vision Australia's client service model should be able to handle a clientele that speaks many different languages and represents multiple cultures. Currently, the former VAF facility at Kooyong has quite a bit of information available to its clients in many languages. Additionally, several of the telephone services and telelink groups organized by ex-VAF employees are specifically tailored to clients with varied cultural backgrounds.

Several services remain inaccessible, however, including the library service and the radio station. Providing access to these services might prove very difficult, and the organization will need to evaluate how best to allocate its resources toward improving services for culturally and linguistically diverse clients.

5.6.3 Deaf-Blind Clients

Clients whom are both vision and hearing impaired require an extensive set of services. These clients typically need assistance simply to get through their day. Because of their extremely limited mobility, centralized services are impractical. Currently, the services offered to these clients vary from location to location, and no single protocol exists for dealing with deaf-blind clients. Most of these clients are handled on a case-by-case basis. It might benefit Vision Australia to consider a unified approach toward the deaf-blind population in its new client service model.

6 Recommendations

The primary goal of this project is to make recommendations to Vision Australia that will assist them in building their new, improved client service model. Our research and analysis have illuminated a number of problem areas, such as communication (both within and without the organization), guidelines for standard service implementation, inconsistent usage of staff and volunteers, and inconsistent organizational hierarchies. Our recommendations as to how to address these issues can be organized into a four step reiterative process:
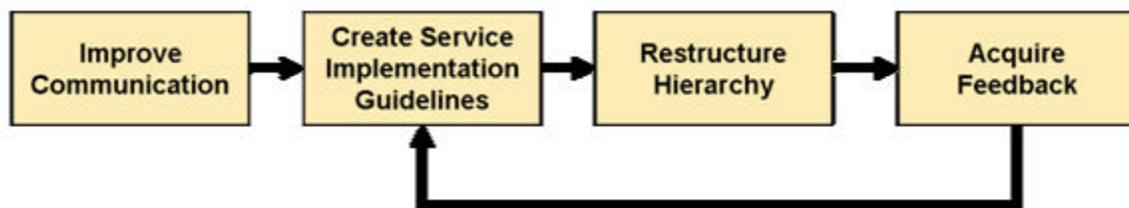
Figure 2: Four Step Process for Service Model Creation

6.1 Improve Communication

Communication is an integral part of any organization, but perhaps more so in one that has recently been formed by a merger. As our research has shown, it is the first and often most difficult step for any newly merged organization and many complications inherent in integration that are initially assumed to be irreconcilable are solved after only a simple conversation.

6.1.1 Facilitate Communication Regionally and Laterally

In order to successfully permit integration, two forms of communication must be emphasized – communication within each region, and communication across the various disciplines. These two types of communication may be referred to as regional communication and lateral communication. The following chart shows how such a distinction might be visualized:
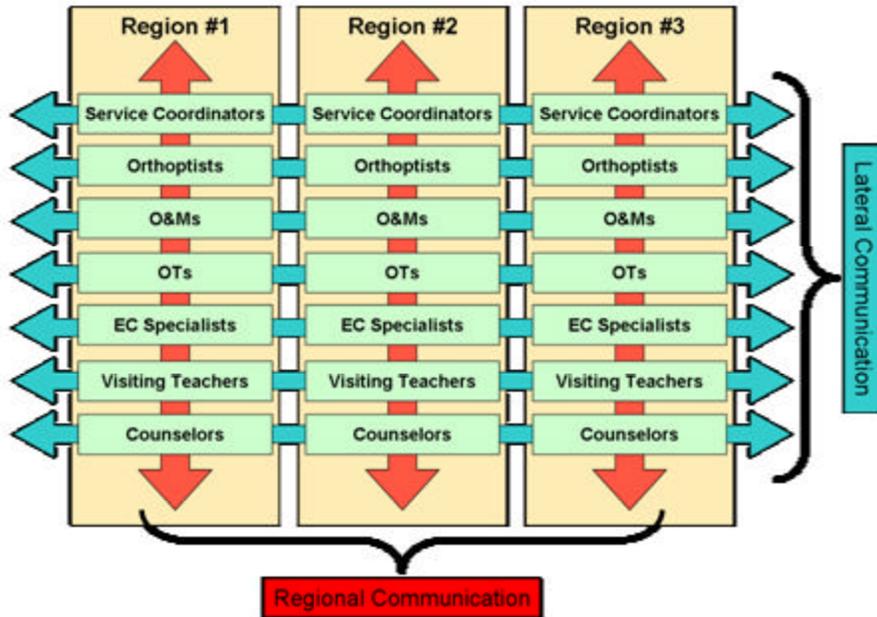
Figure 3: Regional vs. Lateral Communication

Figure 2 illustrates three generic regions. The red vertical arrows represent communication within the regions, and the blue lateral arrows represent communication across the various disciplines. Please note that figure 2 is not intended to represent the full range of specialists that might be necessary within the regions. Other important disciplines include volunteer coordinators and social workers, for example. Also note that this model should be generalized over any number of regions (not just three), as is deemed appropriate by the client service model development team.

An important strength of this model that should not be overlooked is the fact that each region should have at least one employee in each discipline. This is important in order to better provide equity of service to clients in all geographic regions. To this end, offices in similar regions of Victoria may need to be merged (Early Childhood Specialists and Visiting Teachers were not a part of the old VAF business unit). Apart from providing the full range of specialists in one regional office, such a provision will also induce communication between the two former Victorian business units (because they will most likely be working in the same office.)

Ideally, the employees within each of the regions would be given the opportunity to meet as a whole to discuss developments in the region. This is especially important for clients that require multiple types of services, because members of a similar region can

discuss creating multidisciplinary teams to address these issues. The frequency of these meetings may be determined by each region, but as we learned through several of our interviews with both managers and service staff, a good guideline is that they should occur on a monthly basis. Most offices already have regular meetings that serve their purpose adequately for the time being, but they may need to be restructured (at least in Victoria) as reorganizations occur due to the new client service model.

To facilitate lateral communication, similar types of service staff across the organization should meet at least quarterly to discuss best practices and career development[5]. Before the merger, this lateral communication occurred only sporadically. For example, specialists that worked at former VAF offices would meet approximately twice a year. Very seldom would specialists from one former organization communicate with specialists from another former organization. Open forums and email correspondence can permit communication between these extensive meetings, but a leadership and accountability structure should be established to solidify this method of communication. This will ensure that the meetings will remain productive and frequent enough for the service staff. The details of the structuring of the disciplinary teams may be up to the management, but they should ultimately be run by specialists in their respective fields to relieve tension and facilitate open dialogue[6].

See sections 2.4 and 2.5 for background on service models and complications inherent in mergers.

6.1.2 Reconcile Information Technology Inconsistencies

Phone and email systems need to be integrated and optimized to allow effective communication. Problems like lopsided referral allocation (through 1300 VISION) and non-delivery of emails are a detriment to productivity[7]. The key in this case is consistency – this is not only important for the sake of compatibility, but also so that staff can perform at any office without having to learn the idiosyncrasies of a new system.

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[5] Through interviews with members of the old VAF business unit, it was established that biannual meetings are perceived as not frequent enough by the specialists. Specialists in the old RBS unit, who met quarterly, were satisfied with the frequency of their meetings.

[6] Once again referencing the old VAF business unit- specialists were not content with the fact that general managers were assigned to run their meetings, as they were not able to focus the discussions correctly. Specialists in the old RBS and RVIB business units reported no such tensions.

[7] The problems encountered with the 1300 VISION number are explained in our Data and Analysis Section 5.1

Communication infrastructures that can be altered without alerting the staff of a change (like the phone referral misallocation) are simple fixes and should be implemented as soon as possible. Larger, more widespread changes, like the standardization of software used on all Vision Australia computers, are necessary, but they require much more time and resources. As such, they should be extensively planned and carried out by a team of IT professionals. External consultants may be necessary to accommodate initial training on new software.

See section 2.4 for background on complications inherent in mergers and section and section 5.1 for data on inconsistent technology.

6.1.3 Resolve Terminology Differences Across the Organization

With improved communication comes an understanding of the slight differences in terminologies used by the three pre-merger organizations. These differences in terminologies need to be clearly defined and a common set of terms should be defined. This common terminology should be as explicit and simple as possible and distributed around the organization so that every employee can speak using common dialogue. One thing should be taken into consideration – if one type of service has been described using two or more different terms in the pre-merger organizations, it would be wise to create one new, distinct term for that service. This will be difficult in the short term, but it will help to alleviate confusion in the long run.

See Section 2.4 for background on complications inherent in mergers, 4.2.2 for a summary of the findings of the Vision Australia employee interviews, 4.3 for a summary of the findings of the site visits, 5.3 for an analysis of Vision Australia's identity crisis, and 5.4.3 for an analysis of core competencies.

6.1.4 Reinforce the New Vision Australia Identity

Once terminology differences have been resolved, the singular Vision Australia identity should be reinforced. This is a difficult process to enumerate, but one relatively simple step can be taken to ensure that employees identify themselves as part of a new, singular organization – any signs, posters, brochures, or pamphlets (external or internal) that include the names of the old organizations should be removed and replaced with reproductions that bear the Vision Australia logo. Many employees have commented on the length of time that the organization has been merged without any visible changes. By

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simply changing the branding in and around the office, employees will align themselves with the Vision Australia identity. This is consistent with Young (as addressed in section 2.4), who asserted that an organization with employees who still identify themselves as a part of their respective pre-merger organizations should be restructured so that the merged organization is truly different than any of its pre-merger incarnations.

See section 2.5 for some background on client service models, 4.2.2 for a summary of the findings of the Vision Australia employee interviews, 4.3 for a summary of the findings of the site visits, 5.3 for an analysis of Vision Australia's identity crisis, and 5.4.3 for an analysis of core competencies.

6.2 Create Clear Guidelines for Service Implementation

Many organizations formulate their client service models over time, rather than trying to create one solid definition at the outset. Vision Australia does not have this luxury, as their three parent organizations will continue to operate under their own service models unless some guidelines for service implementation are agreed upon and enacted. The new guidelines need not be a completely radical change from the traditional service implementation methods, but they should be solidly defined to eliminate ambiguity.

6.2.1 Implement an Organization-wide Core Competency Program

In order to improve efficiency and create a standard for basic employee knowledge, Vision Australia should implement a standardized core competencies program. This program would provide a minimum level of training in all the services that Vision Australia has to offer, and allow any of the direct service staff to help any given client beyond the basic definition of their profession. Core competencies are especially important in the regional offices, where the geographic spread of the clientele is a key concern – the ability for one service staff member to perform a wide array of services and refer the client to another specialist, if necessary, is invaluable.

The main concern in the implementation of core competencies is the level to which service staff should be trained in services that are not part of their profession. If a service involves special training or education (e.g., prescribing magnifiers), it could be hugely detrimental to the client if performed improperly. Therefore, the core competencies program should only include services that could be offered by any given

individual (e.g., marking stoves and other objects with tactile markers). There is a fine line between these two types of services, but if the core competency program is to be successful, that line must be defined by a set of trained professionals.

See section 2.5 for some background on client service models, 4.3 for a summary of the findings of the site visits, 5.3 for an analysis of Vision Australia's identity crisis, and 5.4.3 for an analysis of core competencies.

6.2.2 Standardize Usage of Service Staff

One of the greatest obstacles that must be overcome in creating a unified service model is the standardization of positions within the organization. All direct service staff should provide the same services to clients throughout the entire organization. If, for example, a client currently sees an Orthoptist at an ex-RVIB facility, he or she will not receive the same type of service if he or she had seen an Orthoptist at an ex-VAF facility. The concept of equity of services is one that has been stressed over many interviews with service staff and managers; all were adamant that the quality of service provision should not vary depending upon the facility at which the client is serviced. It is fundamental for equity of services that all of the service staff be able to provide similar services, even if the methodology of those services differs slightly according to geography.

Committees with representation from each of the three former organizations should be formed, with the express purpose of creating a standardized job description for each of the specialists that Vision Australia employs. Some points that need to be addressed include:

- The primary duties of this position
- Training or skills that are required for this position
- Services that employees with this position best suited to provide
- Services that employees with this position not authorized to provide

This standardization faces an organization-wide challenge: similar specialists across the three former organizations are currently receiving different amounts of pay for what are essentially the same positions. As a result of the job standardization processes, parity of pay will have to be enforced.

Some of the disciplines face their own individual standardization challenges. For instance, Orthoptists working in former VAF facilities may not prescribe magnifiers to

clients directly due to a standing agreement with the Victorian School of Optometry. Also, in the old VAF business unit, direct service staff was required to perform a number of tasks that would be more appropriate for another kind of employee. Two responsibilities stand out as especially inappropriate – initial intake and referrals of clients was distributed amongst the service staff (rather than a central administrator) and each service staff member was required to make a monthly promotional visit to an eye care specialist (this would be better suited to a marketing specialist). Concerns such as these will need to be addressed before the standardization can be put into practice.

See section 2.5 for some background on client service models, 4.3 for a summary of the findings of the site visits, 5.3 for an analysis of Vision Australia's identity crisis, and 5.4 for an analysis of geographic distribution of the clientele, 5.5 for an analysis of intake procedures, and 5.6 for an analysis of special classes of clients.

6.2.3 Improve Volunteer Coordination

With more than 13,000 volunteers working in various offices and communities, the old Vision Australia Foundation had the strongest volunteer program out of the three pre-merger organizations (RVIB, by contrast, had no formally coordinated volunteer program). The services that the volunteers provided for the old VAF ranged from seasonal fund-raising to semi-full time work like reading newspapers and other periodicals for Vision Australia Radio. While the old RVIB and RBS business units may not have provided the same opportunities for volunteers that VAF had (e.g., the radio station), there are many other ways that volunteers can assist Vision Australia:

- Small administrative tasks (e.g., sending out newsletters)
- Transporting clients from their homes to clinics and events
- Help out with day programs and other coordinated activities

A review of the utilization of volunteers within Vision Australia is recommended to reconcile the differences of the roles of volunteers between the old business units. VAF had a well-established framework for the roles of volunteers, complete with a team of full-time staff that coordinated their activities. Expanding upon this framework would be extremely useful in the review of the roles of volunteers. They will be invaluable for not only the activities they are involved in, but also for their community involvement. As

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the volunteer program expands, the volunteer base will boost publicity for the organization.

See section 2.5 for some background on client service models, 4.3 for a summary of the findings of the site visits, and 5.4.4 for an analysis of community based services.

6.2.4 Define Standard Care for Client Classes

In order to create a thorough, well-structured service model, client classes must be established (e.g., child vs. working-age, low-vision vs. total blindness, etc.). Clients can be placed in any number of these classes (e.g., a client can be in the elderly, low-vision, and CALD classes simultaneously). The client service model should use these classes as a foundation; different classes typically require a certain set of services and the model should list these common services under each class. Then, when a client comes in, a set of potential services can be efficiently identified through the classes that the client belongs to. This system is already partially in place, in the intake and referral processes of the old business units, but standardizing it will ultimately permit more consistent service.

See section 2.5 for some background on client service models, and section 5.6 for an analysis of special classes of clients.

6.3 Define and Implement Streamlined Structure

Following the establishment of the direct service implementation guidelines of Vision Australia's new client service model, the management of the client services division should be restructured. This new management structure should streamline administration in the organization and in turn reduce the time to service delivery on the client side.

6.3.1 Solidify Role and Position of Management

In order to create a management hierarchy that fits the chosen client service model, the organization should fully evaluate the role of its managers. To this end, some issues that will need to be addressed include:

- Goals that the management should accomplish
- Optimum number of managers to accomplish these goals
- Types of managers that are necessary to fill each of the required roles

- Communication with employees and other managers

As these concerns are addressed, it will become easier to create an efficient management hierarchy.

See section 2.5 for some background on client service models, and 4.2.2 for a summary of the findings of the Vision Australia employee interviews.

6.3.2 Design Hierarchy to fit Service Implementation Guidelines

The management restructuring that accompanies the new client service model should be built upon the guidelines for service implementation. As this client service model is being built totally around the needs of the client, the management structure should only be established after the direct needs of the client have been met. The final hierarchy that the organization decides on should have the following attributes of a good management hierarchy:

- Intuitive – The model should be easy to understand.
- Comprehensive – The structure should meet all of the organization's needs.
- Efficient – Complications and waste should be totally removed.
- Robust – The organization should be able to function in the absence of any one employee.

See section 2.4 for background on complications inherent in mergers, 2.5 for some background on client service models, and 4.2.2 for a summary of the findings of the Vision Australia employee interviews.

6.4 Acquire and Implement Feedback

The fourth step of this process, as with any continually improving process, is to gain feedback on the effectiveness of the changes that have been made and apply this feedback to some sort of improvement. It is imperative that Vision Australia continue to evaluate client and employee satisfaction.

6.4.1 Client Representative Council

Vision Australia currently has a well-defined and an extremely well organized resource for client feedback – the Client Representative Council. It is important, however, that Vision Australia look for pointed and cogent feedback regarding the client

service model. It may be apropos for a member of the client service model development team to formulate specific areas for the CRC to focus their comments.

See section 2.3.3 for some background on British services for the blind, 2.4 for background on complications inherent in mergers, 2.5 for some background on client service models, and 4.4.1 for some findings regarding the client representative council.

6.4.2 Employee Feedback

The client service model is centered around the needs of the client, but it also affects many Vision Australia employees. As such, the model needs to reflect the employees' needs – it should permit both personal and professional development. While accurate employee opinions may be difficult to find, La Piana (1998) urges that restructuring of any organization should be based (at least partly) on the self-interest of employees that are affected. Addressing legitimate concerns of employees, as the author indicates, prevents self-interests from becoming deep-seated reservations.

A set number of employees are involved in the client service model development team, but it is also necessary for VA to collect feedback from its employees after the new service model has been implemented. For the sake of expediency, organization, and confidentiality, this can be accomplished through a random survey. Alternatively, if it is decided that confidentiality is not a serious concern, a set of focus groups and site visits can be run much like the ones that Sharon Muldoon and Brendan Lilywhite are currently running.

See section 4.2.2 for the findings of the employee interviews, 4.3 for a summary of the findings of the site visits, 2.4 for background on complications inherent in mergers, and 2.5 for some background on client service models.

7 Appendix A: Quality Standards for Client Services

Standard	Description
Service Access	Clients seeking a service have access to a service on the basis of relative need and available resources
Individual Needs	Clients receive a service that is designed to meet in the least restrictive way his or her individual needs and personal goals.
Information and Consultation	Clients have the opportunity to participate as fully as possible in making decisions about the events and activities of his or her daily life, in relation to the service he or she receives.
Privacy, Dignity and Confidentiality	Clients have the right to privacy, dignity and confidentiality in all aspects of his or her life this is recognized and respected.
Valued Status	Clients are provided with the opportunity to develop and maintain skills and to participate in activities that enable him or her to achieve valued roles in the community.
Complaints and disputes	Clients are encouraged to raise and have resolved without fear of retribution, any complaints or disputes he or she may have regarding the agency or service.
Service Management	The agency adopts quality management systems and practices that optimize outcomes for clients.
Staff Recruitment, Employment and Training	The agency employs (or trains) staff with relevant skills and competencies to deliver services to clients.
Protection of Human Rights and Freedom from Abuse	The agency acts to prevent abuse and neglect and to uphold the legal and human rights of clients.

8 Appendix B: Comparison Chart of Pre-Merger Organizations

	Vision Australia Foundation	Royal Victorian Institute For The Blind	Royal Blind Society
Number of Active Clients	3,122	1,018	1,616
Number of Employees (Volunteers)	313 (13,000)	210	270 (1200)
Funding	**83%** Government **13%** Private **4%** Sales Revenue	**43%** Government **46%** Private **3%** Sales Revenue **6%** Proceeds from Assets Sold	**20%** Government **80%** Private
Independent Living Services	Low Vision Services Activities of daily living Orientation & Mobility Counseling services Information and advice Specialized Equipment Training Support networks/ groups Leisure and recreation options Group programs	Low Vision Services Activities of daily living Orientation & Mobility Counseling services Information and advice Specialized Equipment Training Support networks/ groups Leisure and recreation options Group programs	Low Vision Services Activities of daily living Orientation & Mobility Counseling services Information and advice Specialized Equipment Training Support networks/groups Leisure and recreation options Group programs
Children's Services	**X**	Early Intervention Programs School Age Programs and Support Programs RVIB College	Early Intervention Programs School Age Programs and Support Programs

Education & Training	Braille Computer/Adaptive Technology software Business Skills B & VI Educational Products	Braille Computer/Adaptive Technology software Business Skills **RVIB College** **RVIB Enterprise**	Braille Computer/Adaptive Technology software B & VI Educational Products
Equipment Services	Adaptive Technology Low Tech Advice Web Branding Web Testing	Adaptive Technology Low Tech Advice Web Branding	Adaptive Technology Low Tech Advice Web Branding Web Testing
Employment Services	**X**	Vocational Assessment Career Planning Education Consultancy Job Search Assistance **RVIB Enterprise**	Vocational Assessment Career Planning Education Consultancy Job Search Assistance
Information and Recreational Access	Accessible Information Audio Description Talking Newspapers Planned Activity Programs **RPH Print Radio**	Talking Newspapers	Accessible Information Commercial Talking Books Audio Description Talking Newspapers
National Information and Library Service	Library Services	Library Services	Library Services

Elderly Services	Nursing Home Services Independent Living Units Personal care Home care Nutritional support Social support Home maintenance Shopping Assistance Transport Assistance	X	X
Telephone Support Programs	Commonwealth Care Telelink Groups Tele-Learning Tele-Contacting	X	X
Veterans Services	Access to respite Home Maintenance Domestic Assistance	X	X

9 Appendix C: Interview Questions

9.1 General Interview Questions

1. Which organization did you work for before the merger?
2. What was your position pre-merger?
    a. Has it changed post-merger? If so, how?
    b. Did you interact directly with the client? If so, how?
3. With respect to client services, what parts of your job did you like best?
4. With respect to client services, what parts of your job did you like the least?
    a. Do have any suggestions as to how to improve the issues?
5. How much do you know about services offered by Vision Australia?
6. What do you feel is the most important service offered by Vision Australia?
7. How do you feel Vision Australia differs from (*Previous Organization*)?
8. What benefits have you directly seen from the merger?
    a. Do you think the merger was good for the organization? Why?
    b. How has the merger negatively impacted the organization?

9.2 International Organization Interview Questions

1. Could you tell us the:
    a. Number of facilities your organization has?
    b. Number of clients your organization has?
    c. Number and type of Employees/Volunteers your organization has?
2. Can you describe your client service model?
    a. Do you know how your client service model was developed?
    b. How do you measure the effectiveness of your services?
3. What is the process that you use for acquiring new clients?
4. How do you deal with the geographic distribution of your clients?
5. How do you deal with low-income clients?
6. How do you deal with clients that need to be offered multiple services?
    a. Do you use one general professional or multiple specialized employees?
7. Has your organization ever been a part of or ever considered a merger?
    a. If yes:

    i. How successful was the merger?

    ii. How were the logistics of the merger handled?

    iii. Were any services eliminated, or downsized?

  b. If considered but never implemented, why?

10 Appendix D: Organizational Charts

North (Heidelberg)	South(Oakleigh)	East (Boronia)	West (St. Kilda Rd.)

Direct Service Providers
- **Early Childhood Educators (2)**
- **Visiting Teachers (1-2)**
- **Orthoptic (1)**
- **Occupational Therapists (1)**
- **Orientation and Mobility Instructors (2)**
- **Service Coordinators (1 or more)**
- **Office Administrators (1)**
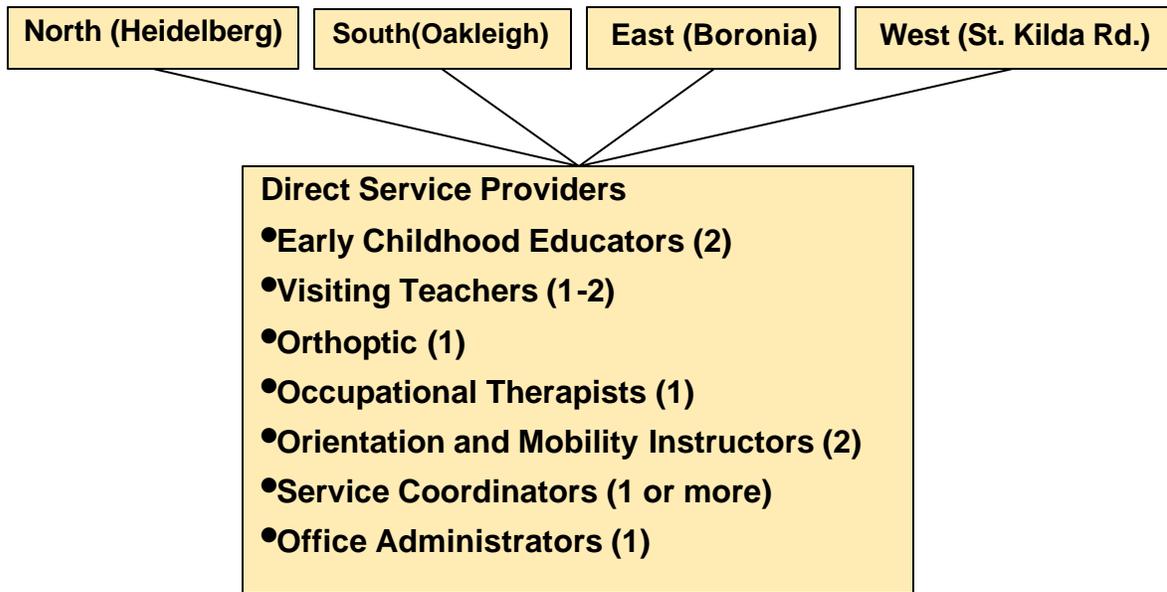
Figure 4: Pre-Merger Regional Structure (RVIB)

School / Education Services

Training, Technology, and Employment

Manager/Principal

Deputy Principal

Assessment Service

Feelix Library

Manager

Adaptive Technology

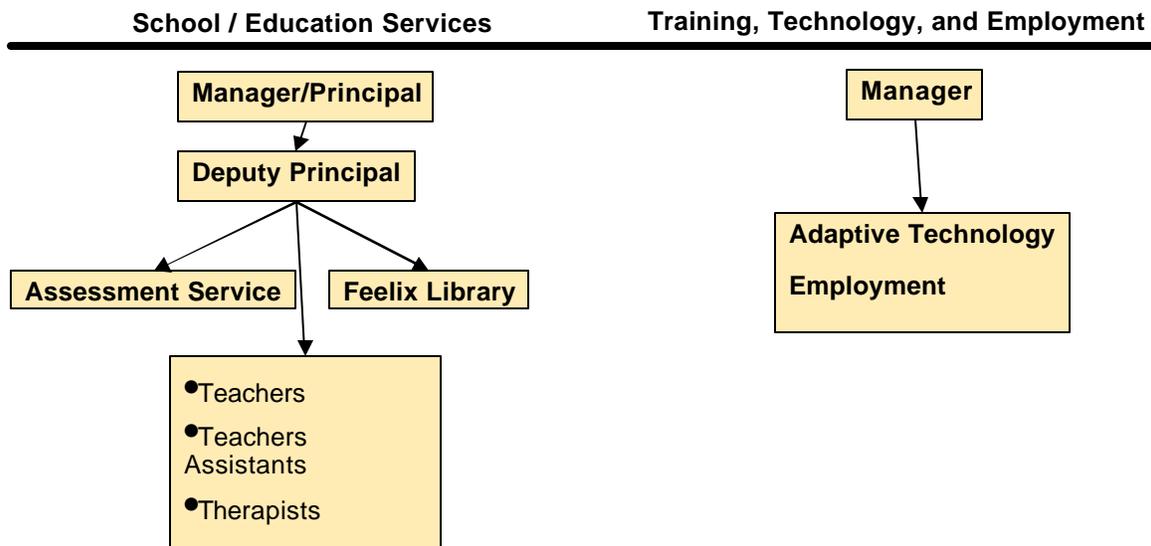**Employment**

- Teachers
- Teachers Assistants
- Therapists

Figure 5: Pre-Merger Centralized Structure (RVIB)
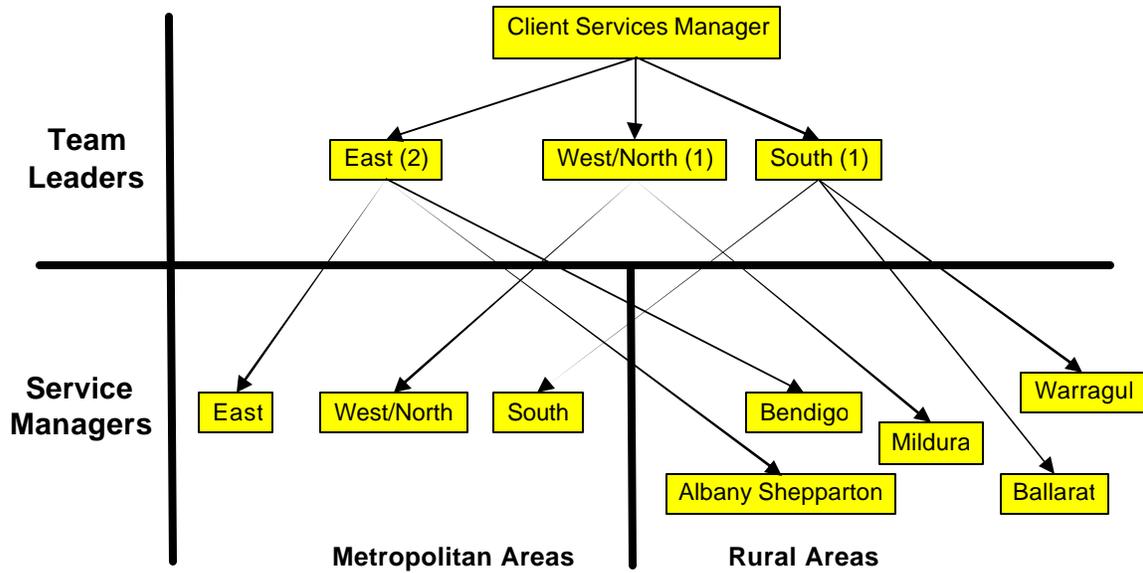
Figure 6: Pre-Merger Regional Structure (VAF)
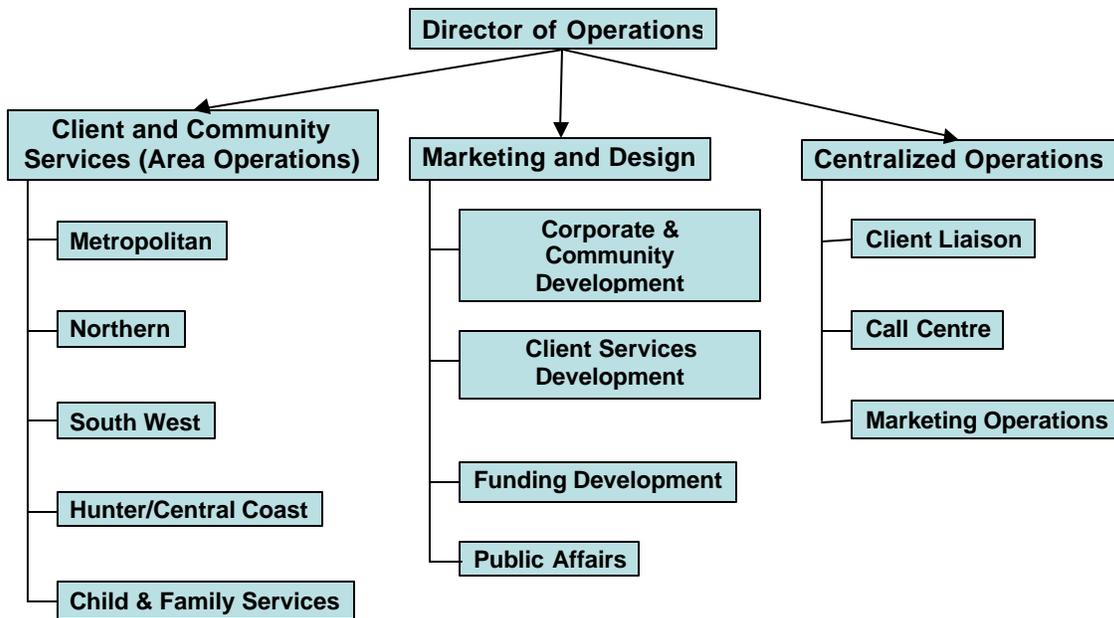
Figure 7: Pre-Merger Structure (RBS)

```
                 ┌──────────────┐          ┌──────────────────┐
                 │  Marketing   │          │  Client Services │
                 └──────────────┘          └──────────────────┘
                  /          \              /            \
      ┌─────────────────┐  ┌┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┐  ┌──────────────────┐
      │   Marketing/    │  ┊  NSW Operation ┊  │  Client Services │
      │   Fundraising   │  └┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┘  │      (VIC)       │
      │   (NSW/VIC)     │         │            └──────────────────┘
      └─────────────────┘  ┌──────────────────┐
                           │ Services Marketing│
                           └──────────────────┘
                                    │
                           ┌──────────────────┐
                           │ Hunter/Central Area│
                           └──────────────────┘
                                    │
                           ┌──────────────────┐
                           │ Metropolitan Area │
                           └──────────────────┘
                                    │
                           ┌──────────────────┐
                           │  Northern Area   │
                           └──────────────────┘
                                    │
                           ┌──────────────────┐
                           │ South West Area  │
                           └──────────────────┘
```

Figure 8: Interim Structure (RBS)

```
                        ┌──────────────────┐
                        │ General Manager  │
                        └──────────────────┘
                 /                 │                 \
┌────────────────────────┐ ┌──────────────────┐ ┌────────────────────────┐
│Operations Manager      │ │ Business Manager │ │Operations Manager (NSW)│
│       (Victoria)       │ │                  │ │                        │
└────────────────────────┘ └──────────────────┘ └────────────────────────┘
          ┊                        ┊                        ┊
┌──────────────────────────────────────────────────────────────────────┐
│                             *Unknown*                                 │
└──────────────────────────────────────────────────────────────────────┘
```
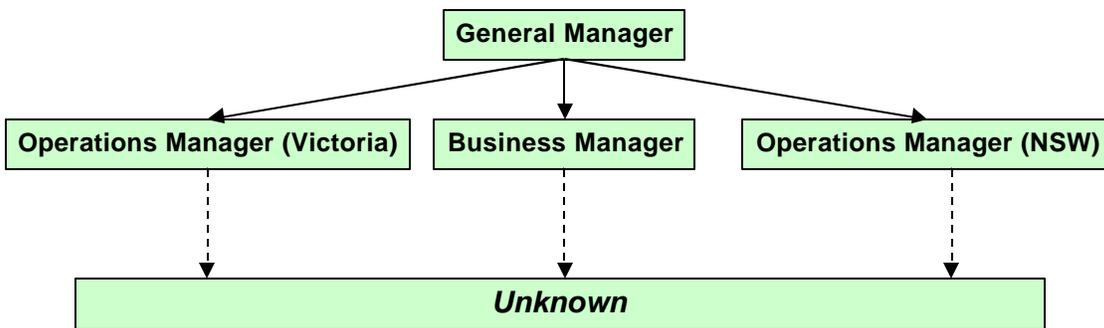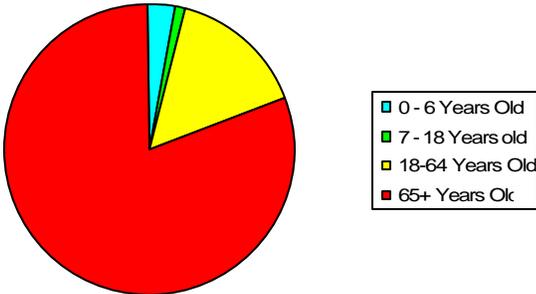
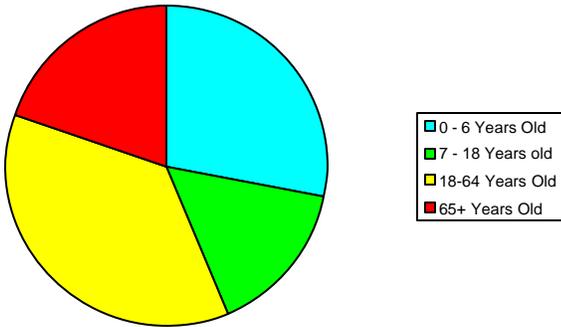**Figure 9: Proposed Structure for the new Client Services Division of Vision Australia**

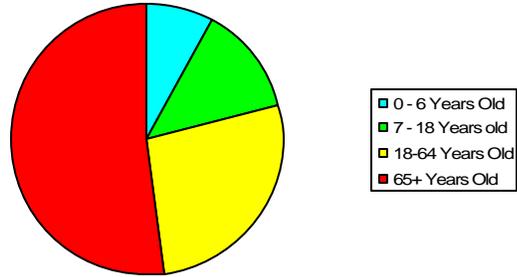# 11 Appendix E: Client Demographics

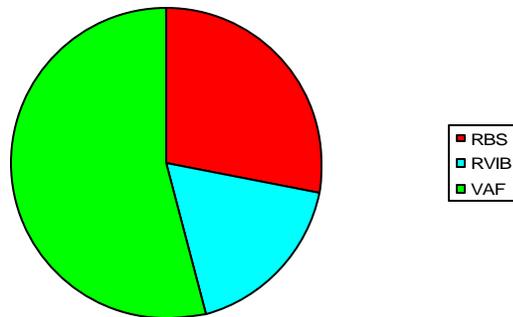## 11.1 Pre-Merger Client Demographics

VAF

Legend:
- 0 - 6 Years Old
- 7 - 18 Years old
- 18-64 Years Old
- 65+ Years Old

RVIB

Legend:
- 0 - 6 Years Old
- 7 - 18 Years old
- 18-64 Years Old
- 65+ Years Old

RBS

Legend:
- 0 - 6 Years Old
- 7 - 18 Years old
- 18-64 Years Old
- 65+ Years Old

11.2 Post-Merger Client Demographics

Ex-Organization

Legend:
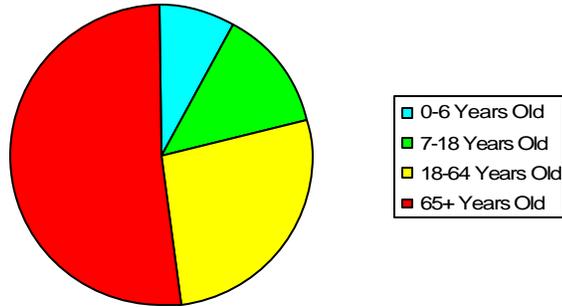- RBS
- RVIB
- VAF

Vision Australia

Legend:
- 0-6 Years Old
- 7-18 Years Old
- 18-64 Years Old
- 65+ Years Old

Victoria

Legend:
- 0-6 Years Old
- 7-18 Years Old
- 18-64 Years Old
- 65+ Years Old

NSW/ACT

Legend:
- 0-6 Years Old
- 7-18 Years Old
- 18-64 Years Old
- 65+ Years Old
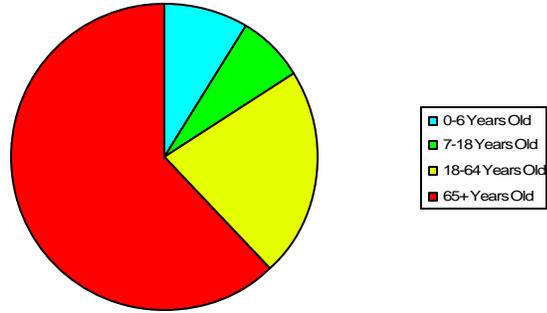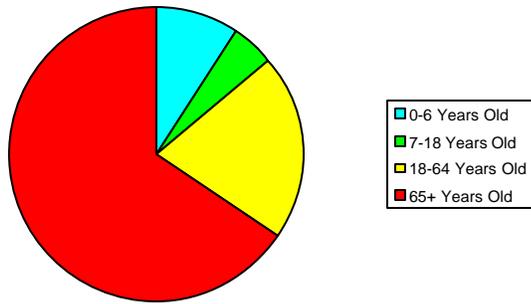
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