

**UNION MODERNISATION FUND –
ROUND 2**

**THE FIRST DIVISION ASSOCIATION
(FDA) – DEVELOPING AN
INTEGRATED MEMBERSHIP
SYSTEM AND WEBSITE**

Case Study written by FDA

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The FDA – developing an integrated membership system and website

Background

The FDA is a professional association and union for the UK's senior public servants and professionals, acting as a powerful voice for public services and the people who deliver them. Their membership comprises more than 18,000 senior managers, government policy advisers, diplomats, tax professionals, economists, solicitors, prosecutors and other professionals who work across government and the NHS.

The union prides itself on working in partnership with employers and members to help implement change and improve workplaces and working lives.

Why this project?

The need for a new membership system and website had been recognised by the FDA since 2005 but resources had not been available to invest in them. Meanwhile, the FDA membership database was under severe strain, and FDA members were rarely using the union's website, as they were alienated by its poor presentation, opaque navigation, slowness of loading and propensity for error. Jessica Stark, FDA Head of Communications, explains:

'After ten years of patch fixes, the membership database creaked under the weight of the FDA's growing membership, which had doubled in that time. It was difficult

to work with – staff needed training to get even the most basic information - and it only allowed three staff to use it at the same time. Therefore, the vast majority of staff did not have access to membership information and this generated a number of inefficiencies. Similarly, the old technology tied the membership secretary to highly inefficient and time-consuming processes (such as re-keying elements of member applications and detail updates submitted online, and manually processing information). There was no facility to record a member's history (such as a personal assistance case) or log notes of correspondence. The membership system was not web enabled, and therefore did not allow branch officers outside FDA head office to view who their members were or communicate with them through FDA systems. Members could not seamlessly update their details online. The data in the membership database was not structured to provide the management information we need, so much of these calculations had to be done manually. Nor could it accommodate, through the website, easy communication with or among FDA member groups or committees, networks and forums.

'The content and design of the website did not reflect the FDA brand, the scope of its work nor quality of service. The site was not DDA-compliant (unhelpful for a trade union) and offered members

only limited opportunity for two-way communications. What's more, potential members could not join online without completing a paper direct debit form and posting it. This deficiency lost the FDA new members who, understandably, didn't have the time or patience to apply 'twice'. An integrated FDA membership system and website would resolve these issues and provide a platform to support our modernisation strategy.'

The FDA therefore applied to use Union Modernisation Fund (UMF) backing to develop an integrated membership system and website that would help transform the union's communications and membership services in line with its modernisation strategy. The new and improved technology was intended to provide the union with a tool to support the wider process and cultural changes the FDA is pursuing – 'structuring our service around the member, and offering the highest level of professional service'.

Methodology and outcomes

The new system was designed specifically to provide:

For members:

- an effective, DDA compliant website, which would help in promoting the interests of members to diverse audiences inside and outside the civil service
- a website that allows easy-to-use two-way communication between members and the union, with easily accessible information about how they can get the most out of the FDA –

'which will help members engage with the union and ensure the union is aware of and can represent their interests more effectively'

- the option for members to contribute to their own branch page and keep up to date by visiting their branch area, participate in a branch discussion forum and take part in branch surveys, pay ballots and polls
- the capability for non-members to join the union easily online and manage their own records online, thus having 'a smoother experience in their interactions with the union, as they are used to with other membership organisations and service providers such as banks and charities - this will help the union appeal to and recruit younger workers'
- a more professional service for members calling for assistance, as 'support staff can check their records, update their details and answer questions on the progress of their cases'

For staff and union internal processes:

- the option for the FDA to devolve the handling of membership information from one silo to the organisation as a whole, allowing national officers, support staff and management access to member details and reporting for the first time
- the ability for branch lay officers to use the branch areas on the site to announce news and branch meetings, create email

newsletters, post minutes of meetings, provide a discussion forum, polls and surveys to solicit member views, and allow for simple group email communication from the lay officer to branch members 'It will also allow union officials to conduct electronic pay ballots. This will help provide members with a simple way to influence policy in their immediate areas and assist lay officers in their constructive work with employers to support corporate agendas and improve workplaces. These features have been requested by some lay officers for more than two years, so they will be taken up and best practice can be identified by the Branch Support Action Group committee and disseminated more widely. For branches and branch activists, the features are promoted in *FDAActive*, the branch activist magazine, email newsletters to activists, and through regular rep-training meetings where using the system is featured.'

- a platform for network/forum organisers to announce news and events, provide a discussion forum for debate, post minutes of meetings, polls and surveys to gather opinion and inform the union of member views, and allow for simple group email communication 'This helps discipline-specific groups such as statisticians and lawyers to consider policy in their areas and work more constructively with employers'

Principles behind the specification and designs were considered by

staff at weekly and then monthly meetings:

'Valuable discussions were held about processes, responsibilities and skills which drew differences in approach out into the open and eventual agreement on standards and expectations. At each stage of the project, negotiators were asked to review development of the system to date and provide feedback. A stakeholder representative to advise on FDA negotiators' requirements was also appointed and he coordinated feedback and, along with the head of operations, advised on system roll out. When the system was complete, staff were encouraged to test it for more than a month before it launched in January 2009.'

Staffing

A key decision was taken before the project started to second the union's head of communications to be full-time project manager. The FDA organiser, already a member of the project team, was also seconded full time for four months to cleanse the FDA's data prior to migrating it to the new system.

The membership secretary, who took a lead role in designing the new system, created new processes for adding members to the system, checking weekly reports of changes made by members, staff and branches to ensure the data is in a consistent format, and runs the new financial, membership and management reports. She also created communications to help staff and branch activists use the membership system to update details, and provided telephone

and face-to-face support. When a number of data cleansing tasks needed to be completed prior to the launch of the membership system, extra staff were drafted in to help. An additional resource for membership was also recruited as the new system launched. She was able to help manage the transition to the new system while performing day-to-day membership tasks. **‘This flexibility and willingness to invest was crucial to the project’s success.’**

The FDA’s supplier was chosen for its technology and value for money (but they also proved to be responsive, creative and a true partner in delivering the project). The supplier’s managing director reported to the steering committee each month along with the project manager, so was aware of the bigger picture and the union’s priorities, accountable to the group and available to answer technical and logistical questions that arose. The project manager was in contact with the supplier’s project manager/developer several times a day, which ensured the FDA received just what it needed at the right time. The project manager also worked closely with the supplier to test each piece of development rigorously, which helped to ensure as much as possible that the technology worked as expected. **‘This built confidence among users of the systems who were therefore more forgiving of the occasional, inevitable errors.’**

Part of the project was a thorough cleansing of the FDA’s membership information. The FDA’s organiser was seconded to the project for

four months to review the data on the old database, standardise and correct it, and complete omissions wherever possible. A significant amount of data was improved during this period. The new database displays information more transparently, making it easier to spot holes or omissions.

Prototype personal case system

The FDA helps hundreds of members each year who have a dispute with their employer. All information relating to these ‘personal cases’ has traditionally been held in paper files. The union wanted to use technology to make their service even more efficient, and move in the direction of electronic case management. Therefore, the FDA proposed in its UMF bid to create a simple, cost-effective prototype within the new membership system. This included some facilities for FDA staff to save basic information about personal cases on a member’s record (such as type of dispute, legal costs incurred, outcome of case), as well as notes of phone calls and documents or files associated with the case. The information recorded would also allow the union to have a ready view of case management workload, legal costs and case trends. Once staff used the system, their experience would inform decisions on a more comprehensive technological solution. Says Jessica:

‘Technologically, the prototype personal case system was a minor addition to the membership system; culturally and strategically, the development journey and use of the prototype has provided the union with the prospect of better

working practices and technological solutions that it will want adopt for managing personal cases in the future.’

Since launch, every new personal case has been entered onto the system, exceeding the FDA’s objectives and providing the FDA with indicators on case loads and numbers. Phone calls of relevance were also recorded onto the system. Negotiators used the system’s facility to save email and files into a case but discovered the prototype technology was not as simple as required in a busy trade union. ‘As planned, this prompted staff to consider and agree what kind of technological solution they *would* find easy to use for this purpose, and buy in to implementing such a solution in the future. The FDA deliberately set ambitious targets for use of the personal casework prototype to ensure staff put the system through its paces to reveal what they *really* needed in a personal casework system. This approach delivered. The FDA discovered that most information important to a personal case is sent and received by email. Therefore, the union realised it would need an efficient way to categorise and store email and attachments in order to move to full electronic case management. The FDA project manager discussed this with Simon Parry from Prospect, who used UMF funding to address this problem in UMF Round 1. He kindly presented his finished product at an FDA staff meeting and the FDA is considering pursuing a similar solution when resources permit.’

Ensuring buy in

The FDA knew that the changes would involve a significant change in the way staff worked, and it would not be successful unless they wanted to make the journey. So it was key to persuade them of the logic – and the benefits – of making the change, and involve them every step of the way.

When designing the project, therefore, the FDA identified key stakeholders among lay officers and staff and involved them throughout the process. This approach ensured not only that the new systems were built to serve their needs and gave them ownership of the final product, but also made for better project management. The web workshops, for example, were the brainchild of lay member stakeholders, who helped to devise and facilitate the initial sessions. FDA branch and section reps who attended the workshops helped to design the tools available in their community areas (such as the ability to email their members easily from the website) and were heavily engaged in setting up their communities. Similarly, staff who were to use the membership database and personal case prototype were instrumental in designing the systems and were regularly given the opportunity to provide feedback on each stage of development. This consultative approach ensured that stakeholders received what they needed, that expectations were managed and that everyone was pleased with the final product.

The union consulted and communicated widely with members throughout the project, which ensured a high profile for the new systems and their fitness for

purpose. A programme of regular communications about the project asked members for their views at each stage, from specification through to pilot, usability testing, launch and via a follow up survey. Similarly, at pilot stage, external audiences such as the TUC and members of the media were invited to provide feedback. The usability test among members was perhaps the wisest move as their constructive feedback enabled the FDA to improve the website immeasurably before launch.

Some staff were able to embrace the new technology more than others. Staff were invited to speak frankly about their experiences with the new processes in all staff meetings, and this was followed up by one-to-one conversations between staff and their managers. Managers then tried to alleviate any anxieties around the new technology and address needs around skills, support or training. In practice barriers to working in a new way were as individual as the staff members themselves. The steady, individual approach which was adopted has been successful in helping to embed the new system and processes.

Training

Implementation of the integrated membership system and website was accompanied by three days of training for key staff on using the website, by C2's training manager. C2 provided all FDA staff with unlimited telephone support and training to complete the tasks required of them using the system, such as how to record information on new personal cases, log phone

calls and save documents and emails into the member's record. The head of business development trained support staff and officers on entering personal case information and working with members. The membership secretary helped to test the system thoroughly to ensure it that it worked effectively. After her own training, she in turn trained FDA staff on how to use the system, search for members, update their details and run simple reports.

The training was rolled out both to support staff and union full-time officers together so that they get into the habit of working with the system and understand how they can use it to share information and work more closely together. The training incorporated new processes so that:

- when a member contacts the FDA, support staff call up the member's record on the new system, verify the membership status, confirm or update their details as appropriate, and determine the appropriate person to refer them to if applicable
- support staff and officers log all correspondence into the member record to allow the monitoring and tracking of personal cases, and provide a more professional service
- support staff and officers can see the result of logging in the information, and discuss how having that information can help them keep track of cases and correspondence
- at weekly officer meetings, feedback is sought on the new processes by the head of business development.

During implementation of the new website, the internal project manager, with the endorsement of the project steering group, directed staff in communications, organisation, operations and lay officers to create content for their areas of the new website. They were then trained on how to use the site and to update their areas as needed. Lay officers are responsible for updating their own branch areas, liaising with communications and C2 training support as necessary. Ongoing monitoring happens either on an ad-hoc basis (for committees and forums) or at regular meetings where website and communications issues are discussed, such as weekly communications meetings, branch activist meetings and network and committee meetings. All staff can now upload and disseminate information through the website.

Additional benefits

- Staff have been empowered to take responsibility for the whole process of providing information to their constituencies, and provides a better understanding of the work of the FDA to all union staff.
- The website is promoted, and used, as first port of call for all information and communications with the union. This saves printing, postage and paper costs and contributes to the FDA's aim to become more environmentally friendly.
- Communications work better across media, offering links to the website from email alerts and a comments webpage for feedback on issues covered in the magazine. **'This virtuous circle of communication should provide a sense of community and demonstrate that members have a voice and are being listened to. Members can see other members' comments, and add their own.'**
- More than 20 online communities are now running on the website, with more in development. These communities are restricted to members of a given branch, section, network or committee and offer information such as meeting dates and minutes, contact information, news and discussion boards. Some more advanced areas offer blogs, surveys and polls. Half of these communities are run by branch or section 'web reps' – a new role which has arisen directly as a result of the project. Web reps get together every four to six months as part of the 'web group' - a forum established during the project in which web reps share ideas and best practice, train on using the website and discuss how to use their areas to communicate better with their branch or section members.
- Other online community areas include those for specific interest groups or union democratic structures such as the Executive Committee, branch reps, various executive sub-committees, the

Statisticians and Economists' Forum and networks for women and disabled members. These communities have connected and facilitated business between geographically dispersed groups and have made participation in the union's democratic structures simpler, easier and more efficient.

'Membership of the FDA equality networks in particular has increased as a result of organisational efforts to reinvigorate them and the web presence for these communities has supported and facilitated this growth.'

- The union can now conduct electronic pay ballots through the website, which is 'much more efficient than paper-based balloting'.
- New members can now join online quickly and easily using their debit card. 'This has become the most popular method of joining the FDA and more than 600 have become members in the seven months since the service launched in March 2009, almost double the FDA's objective of around 310. What's more, almost a quarter of all FDA members have updated their contact details online in the year since launch. Paper-based responses declined by 40%, exceeding the hopes of the FDA and saving significant time and resource. In fact, the number of returned publications (the measuring stick by which the union monitored the quality of its contact data) dropped by more than 50%, far exceeding the FDA's objective of 10%.'
- The FDA also aimed for the new database to provide more accurate reporting for management, 'which the system does exceptionally - the union can now retrieve and analyse data from the system with a level of confidence that was previously inconceivable. Not only are basic reports accessible to all staff who want to run them at the click of a button, but the sophistication of the new database has allowed the union to generate much more detailed and useful reporting. In addition to the benefits of having better information on which to make decisions, the union can detect holes or inconsistencies in its data and take steps to address them, which will contribute to even better reporting going forward.'
- The union modernised its processes even more than it had envisaged at the start of the project when it moved to paperless direct debit transactions (now a requirement for offering online joining). The FDA worked closely with its bank to ensure the FDA had the technology, communications and administrative processes to accept direct debit payments online using the banks' recommended best practices. As part of this preparation stage, the FDA renewed all of its processes for adding, updating, billing and cancelling memberships and completely modernised its administration. 'This has transformed the membership department.'

Jessica is enthusiastic about the outcomes:

'As expected, nowhere is the impact of the UMF project more evident than in the FDA's membership department, which has been transformed by the new database. The role of the membership secretary has been transformed. The changes save about 45% of her time, which can instead be devoted to timely input of records, more useful data analysis for strategic planning purposes and more proactive member-relation and member-satisfaction activities, providing continual improvement as we better gauge how we can best serve members (through quantitative research, focus groups and phone surveys). Even more than envisaged, the new system has allowed the membership department to thoroughly modernise its processes and this has generated improvements in efficiency, data quality and management information. The membership database is now used by staff across the union (who have called it 'fantastic' for its ease of use and wealth of information). Embedding these new processes will take discipline, persuasion and regular monitoring and encouragement to become habitual, but we believe this challenge will be offset by the fact that the key stakeholders have asked for these features, are eager to use the website in this way and in some cases have experience of completing similar tasks so are aware of what it entails. The skills they have developed are expected to remain in the union, and new staff will be trained by other staff members to undertake tasks they

must perform using the new system as part of their training at the start of the job.'

Lessons learned

- **Managing change** - getting staff to change processes on how they interact with members and record information on personal cases has been 'challenging'. Therefore, extra training, and a longer timeline have been allocated for these processes to bed in. Operations conducted one-to-one meetings with staff to identify barriers and find solutions. This work will continue in the short and medium term while the FDA plans its move to full electronic case management.
- **Anticipating future developments** - the FDA believes that the new website and database will suit its needs for at least two years after launch without further extensive development. However, a small amount of funding will be budgeted each year to develop the system in line with member, staff and activist feedback, or to support employers in their communications with members. 'Further development on the database could include additional fields for case management information, ideally leading to a more robust and dedicated case management system to improve our case tracking and servicing even further over the next few years once the benefits from the

embryonic system envisaged above has been evaluated.'

- **Testing DDA compliance** - the FDA aimed to get confirmation of its DDA compliance from an organisation such as the RNIB. However, after some consideration, the union decided that if it were to invest in accessibility testing by an outside organisation, it should ensure the site is tested by those with a variety of disabilities, not just visual impairment. It aims to pursue this in the near future.
- **Listening to members** - the FDA's UMF bid included plans for its main discussion board to host a set piece discussion involving at least 25 different members on a theme determined by the FDA. However, once the system was launched, it became clear that members wanted instead to use the discussion forum to ask questions of the union or other members, and a number of interesting discussions have arisen organically - a much preferable outcome. The website's main discussion forum was described as 'lively' by the TUC communications awards judges and hosts comments, questions and discussion among FDA members.
- **Allowing enough time and resources for... consultation and specification** - the time needed for consultation and software specification proved almost four times longer than planned. 'This was time well spent. The resulting specification was particularly detailed, which made software development and configuration more straightforward than expected. Meanwhile, creative scheduling and use of contingency ensured the project stayed on schedule.'
- **... data migration and data cleansing** - unexpectedly, the tasks of migrating data from the old to the new system and cleansing the data were deeply intertwined and were much more time-consuming than expected, requiring additional staff.
- **modernisation** - the union's membership administration 'has never been more effective than it is now', but it has had to invest more time and resource to achieve this than originally envisaged. 'Although time has been saved in some ways, the new system has placed additional burdens on the membership department, such as mastering the reporting tools and the extra processes needed to meet paperless direct debit requirements. During the transition to the new database, these tasks dominated the job of the membership secretary to such a degree that the FDA was compelled to hire an additional staff member. It has been decided to keep that new staff member, and devote one and a half people to the membership function instead of just one for the time being.'
- **... getting reporting right** - a completely new system required the FDA to design and build the reports from scratch. 'This was time-consuming and difficult, although has ultimately delivered more flexibility and

accuracy than she ever had before.'

- **... moving to paperless direct debit** - moving to paperless direct debit required fundamental changes to the FDA's processes and membership technology. 'This new departure posed a significant learning curve for FDA staff and the supplier. The result was months of testing, refining, and re-testing. If the FDA were to do this again, it would have allotted more time and ensured a more detailed understanding of the paperless direct debit requirements and processes to inform the initial specification.'
- **Avoiding the dangers of discussion forums** - while the FDA's online discussion forums have not caused any difficulties for the union, management is aware that they pose risks and precautions are being taken. For instance, union staff closely monitor the discussion boards and can take action if necessary, as can some lay members who have accepted responsibility for their community forums. A website forum code of conduct is posted prominently on each board.

Wise moves

- **Management commitment** - the FDA's project benefited from the high profile support of the FDA management team and Executive Committee. 'Managers and senior lay officers, including the union's President, were closely involved in the project from the start,

playing roles on the project steering committee, serving as stakeholder representatives, helping to drive and manage operational change and - especially - in providing the required resources. The success of the project is due in no small part to their commitment and willingness to invest their time.'

- **Formal project management** - the union took a formal approach to project management, which helped to keep the project on track. A brief project report was distributed prior to each steering group, along with the agenda and the minutes of the previous meeting. The report was accompanied by an updated project plan during the development stage, and an updated monitoring and evaluation matrix during the monitoring and evaluation stage. An updated risk matrix was also distributed and risks were re-evaluated at each meeting, and reprioritised as necessary. The President of the union chaired the steering meetings and ensured they were run professionally and efficiently.
- **Starting afresh** - implementing new processes required for paperless direct debit prompted the FDA to review and overhaul all its membership processes relating to finance, joining and cancellations. 'At the beginning of March 2009, these new processes were implemented and membership now operates with a structure and level of efficiency not achieved before.'

Membership believes that the new processes will save more time, and provide a better service to members, as financial data will be more up to date and less analysis of financial reconciliations will be required.'

- **Continuity** - for the three years from bid to completion there was continuity in the personnel in key roles, 'which helped to ensure the project ran smoothly'. Although the project manager took maternity leave during the project, arrangements were made for her to facilitate much of the monitoring and evaluation from home, with the assistance of office-based staff. Similarly crucial, supplier contacts were consistent from bid (sales) through to project completion, 'which ensured a good working relationship and made the development process more efficient'.

Looking ahead

The focus of the project has turned to the future: in particular, further embedding and building on the new processes the project has implemented, and improving the systems still further in line with ongoing staff and member feedback. At their final meeting at the end of the project, the UMF Steering Group considered guidelines for new arrangements to oversee monitoring and evaluation, and further development of the systems to ensure they continue to be operationally and strategically fit for purpose.

'After a year of using the system, the union now has a better grasp

than ever before on the standard processes required to conduct personal cases to the highest standards, and the cultural and technological path they will want to follow. Once resources allow, the union is likely to pursue comprehensive electronic case management and all the modernisation that entails.

Culturally, staff have accepted the new system and have made an impressive effort to absorb it into to their day-to-day working practices. Similarly, use of the system has helped to underpin our processes for obtaining legal advice and monitoring our expenditure commitments in this area. These processes are likely to be refined further.'

Conclusion

The FDA met – and in many cases exceeded - all its objectives for the website, with some small exceptions where the union chose more meaningful indicators or approaches in the light of experience. Says Jessica:

'When the FDA commenced its UMF project to build an integrated membership system and website in April 2008, the union's existing website was considered an embarrassment and its outdated, creaky membership database was in intensive care. Seventeen months later, the new website is the union's key communications platform and won high commendation at the TUC Communications Awards. The new facility has generated enthusiasm among FDA management and staff, who work to keep it fresh and relevant. FDA managers

encourage staff to consider the news value to their day-to-day work and to liaise with communications to draw up a short news piece for the website homepage. This has created a change in culture where silos between operations and communications have been eroded, and helped all staff to feel that the freshness of the site is their responsibility. It has also delivered on a communications objective to demonstrate the considerable and varied work the union undertakes on behalf of members.

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‘The new membership system is robust and easy-to-use, providing wider, but appropriate, access to membership data around the union. Membership administration has been transformed. The FDA now has a much better understanding of the processes, working practices and technological solutions it needs for full electronic personal case management. This project was designed to contribute to a significant and lasting transformational change in how members and the FDA interact with each other and how the union manages its member service and support, helping to revolutionise the FDA’s internal processes and culture. The journey was not always smooth, and there were a few surprises along the way, but through careful planning, good governance, wise resource allocation and close cooperation with its key supplier and members, the FDA has made its UMF project a success.’

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