Duty of Care Benchmarking Tool

By Cathy A. Enz & Gary M. Thompson

For any organization, "Duty of Care" is the obligation to avoid or diminish any reasonably foreseen harm to customers and employees resulting from exposure to the coronavirus that causes COVID-19. This obligation includes reducing or eliminating the spread of the disease. Standards in the form of protocols, processes, guidelines, and actions are currently being proposed and implemented by governments and organizations to "take care" to prevent infection and harm. Standards of care help to regulate employee behavior by providing clear expectations of behavior and decision-making criteria. Formalizing rules, procedures, standards, processes, and guidelines serve as a compliment to managerial oversight and help companies run smoothly with improved efficiency and coherence in Duty of Care activities.

ABOUT THE AUTHORS

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We designed the Duty of Care Benchmarking Tool to help managers make comparisons with various standards of care as devised by different benchmark sources such as the government, public health professionals, a professional or industry group, or individual businesses at both the corporate or unit levels. Benchmarking is a popular technique used by businesses for identifying, analyzing, measuring, and contrasting comparable activities and processes within a company, within the hospitality industry, across industries, or even across various governmental and health providers[1]. Competitive benchmarking often focuses on measures of performance gathered from third parties to allow for assessing the "best practices" of direct competitors or firms in similar industries. By contrast, process benchmarking compares business processes to the ones used by others or dictated by governments or laws. Process benchmarking like that provided in the Duty of Care Benchmarking Tool facilitates the selection, planning, and delivery of health and well-being during the pandemic. Standards, guidelines, processes, and protocols devised in anticipation of post-COVID-19 reopening and recovery operations can be examined to determine both best practice actions and to compare to a given standard or health guideline for tracking performance and action planning. The tool permits managers to list multiple benchmark sources, providing a snapshot of compliance with the guidelines issued by government, professional associations, industry norms, and parent company policies. Using a rating scale from 1 to 5 managers can compare their actions to those advanced by various benchmark sources. The assessments revealed through benchmarking can be used to conduct internal monitoring and auditing, assure compliance and inform future planning initiatives to change or enhance duty of care initiatives within a specific company, across business units, or for various divisions within multi-branded operations.

The formatted worksheets allow managers to create their own Duty of Care categories, such as cleaning and disinfecting, employee protocols, or guest health concerns. Within a given category, managers can then provide more detailed actions and specific tasks, such as requiring all employees to wear masks, or maintain a six-foot physical distance from others in lunchrooms and back-of-house spaces. In the instructions that follow (also provided in the Excel® tool itself), we describe the steps necessary to conduct a Duty of Care comparison. Although the spreadsheet is designed to be self-explanatory and easy to use, we recommend that users

[1]   Enz, C. (2010) Hospitality Strategic Management: Concepts and Cases. (2nd Edition), Wiley Publishing Company.

start by looking at the tool example as a reference. The goal of the tool is to help hotel and restaurant operators "take care" to prevent risk of infection and harm and to assure health and well-being of employees and guests as they begin post-COVID-19 operations. However, the flexibility of the tool makes it useful for any type of organization, not just hospitality enterprises. The job of benchmarking processes will rest with various individuals depending on the nature and type of organizational design of a given firm. Keeping that in mind, we envision individuals responsible for quality assurance in larger organizations would find this process benchmarking tool useful. General managers, executive committee members, and department heads may find it useful at the unit or property level to assure compliance with corporate guidelines and to make cross-department and function comparisons. Ownership groups and asset managers may find it valuable to assure cross business compliance. Third-party operators with a portfolio of customers, and franchisees might also find the tool of value for making comparisons, determining the gap among operating units, and sharing the value of specific initiatives. Benchmarking is an on-going activity and a continuous process, suggesting a company may continually seek to improve its processes, and over time change its comparison sources as innovators and leaders emerge as best-practice champions.

STEPS IN A DUTY OF CARE ANALYSIS

Four steps are necessary to conducting your Duty of Care Benchmarking Comparisons.

1. **Identify Duty of Care Categories on 'Data Definitions' tab.**

   Using the buttons, you can add, delete, edit, or move any Duty of Care Category you create. You may wish to discuss with others the broad categories you will use to organize your Duty of Care activities.

2. **Identify the Standards Benchmark Sources you will be using to make comparisons on 'Data Definitions' tab.**

   A benchmark source is any organization that provides guidelines, standards, or protocols that you deem important for making comparisons. We recommend you list them from more general to more specific. You can select governmental or industry guidelines, those of your firm, or even

those of competitors. You can list corporate, property level, or departmental guidelines. Take note that your guests might be from a different country, and you may wish to focus on source market governmental guidelines as well as those in your own country. Using the buttons, you can add, delete, edit, or move any benchmark source you create.

3. **Click on a Duty of Care Category (blue-colored tabs) and enter the number of Covid-19 actions you wish to examine.**

    Each Duty of Care Category will have its own blue-colored tab, where you can enter up to a maximum of 20 specific actions at the top of the sheet.

4. **Enter the Covid-19 actions you wish to examine for the selected Duty of Care Category (blue-colored tabs).**

    The actions are the specific practice, process, standard, protocol, or guideline established within the broad category of care.

5. **Assess each of the Covid-19 actions using the Assessment Rating Scale provided on the 'Data Definitions' tab.**

    Assessment of each action is possible using a rating scale from 1 [= our actions have major weaknesses compared to standards established by the source] to 5 [= our actions substantially exceed those established by the source and constitute best practice]. A score of 3 means our actions meet standards established by the source. Your ratings should reflect your own best judgment. While these ratings are clearly subjective in nature, remember your goal is to facilitate comparison and action planning. You can also note that the action is unmeasured if you have not yet measured your performance against a benchmark source. A not applicable (N/A) option is possible if a standard does not yet exist for you to compare to a benchmark source. Repeat steps 3 through 5 for each Duty of Care Category by moving from one blue tab category to the next to assess each of your listed actions.

SUMMARY RESULTS

Blue-Tabs: The tool converts your rankings into several summary analyses on each of the blue-colored tabs. You are provided an average rating compared to the standards established by each benchmark source. Remember a score of 3.0 means you are meeting the standard established by the source. You are also given the percentage of actions that are above and below the benchmark standard, color-coded to reveal above standard or high scores (green) and below standard or low scores (red) and middle scores (yellow). The percentage of actions unmeasured and those that are not applicable for comparison by a given benchmark source are also provided.

Summary Results – Green Tab: The green 'Summary Results' tab allows you to review the ratings for each duty of care category by each benchmark source. The summary of average rating allows you to determine and discuss why a given category of care is strong, weak, or unmeasured, and how you rate by each benchmark source. For example, you may be strong in employee protocols by department standards, but weaker on these actions when compared to brand standards. A visual representation of this information is provided on the tab titled "Chart -Summary".

Summary – Unmeasured, Below and At or Above Standard– Tabs: Three green colored tabs provide you with color-coded summaries that allow you to drill down to determine where you stand. Unmeasured actions are a sign that you need to move forward measuring your performance compared to the standards, while actions below benchmark source standards signals the need to make improvements. Finally, your summary of at standard or above standard reveals an opportunity for promoting or reinforcing a comparative advantage or benefit provided by your organization. This analysis allows you the potential for "bragging rights" as you have exceeded expectations of valued sources. Celebrating and motivating your staff on your success is an opportunity to engage others in appreciating and recognizing your efforts. Following each of these summary tabs you will find a tab with a chart of the information ('Chart-Unmeasured', 'Chart -Below Std', and ('Chart -At or Above Std') for easy visual examination of the results.

Detailed Results Tab: The last green tab on the spreadsheet allows you to explore in detail the rating of actions by category of care and benchmark source. Using the pull-down menus provided in column F in yellow, you can select the information captured in the spreadsheets to allow for action planning. Ratings are color-coded on this tab and all actions are listed.

FINAL THOUGHTS

Comparisons are critical to taking care of your employees and guests in accordance with recognized standards. Beyond this purpose, sharing in meetings with department managers and staff will allow your entire team to be engaged in assuring the workplace is safe. Reducing fear and anxiety about the coronavirus can help reduce stress and burnout. A benchmark tool can be one of many ways you can help empower workers, allay fears, and demonstrate you care about their well-being. By sharing your comparisons and discussing your standards, more employees can be drawn into the process and encouraged to think proactively about sustaining a healthy workplace. Since day-to-day decisions that shape the future of the company are often made by lower level managers and staff, this tool is a simple and easy way to help engage them in building resilience and managing new and uncertain situations. Keep in mind that this tool is not a quick fix to a complex and uncertain pandemic, nor does it assure that a company will respond appropriately to enforcing standards and detecting offenses to established protocols. The tool is one of many ways in which an organization can monitor, compare, adjust, and correct practices as we learn more about COVID-19. One final caution, given the rate of change occurring in the environment as the coronavirus spreads, be mindful that the longevity and appropriateness of the standards may require frequent revision. Benchmarking is a little like shooting at a moving target. While the firm is shooting, the target is moving. Nevertheless, the Duty of Care Benchmarking Tool is designed not just to help you stay in compliance with evolving public health standards, but to create a high standard for the entire industry as a foundation for customer and employee trust that will benefit the entire travel industry and assure a safe "new normal". ■

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