

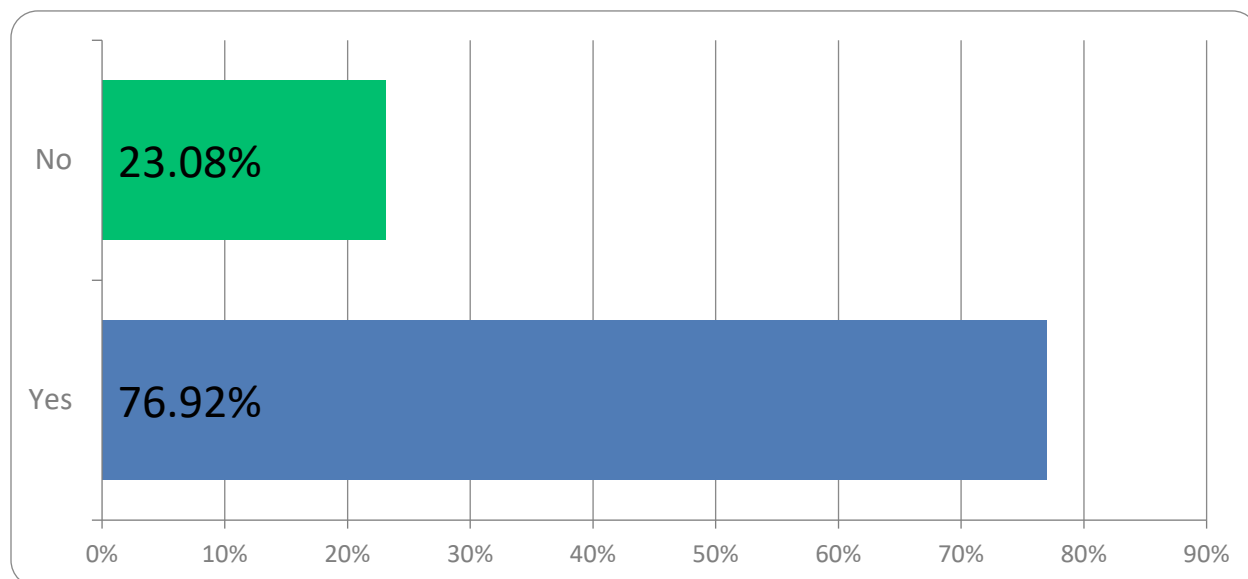
Quality Management Practices in Federal Appellate Clerk's Offices

Survey Results (December 2022)

Background. The below 40-question survey was sent to senior staff at the 13 federal circuit courts concerning their use of performance measurements, quality management practices, and recognized quality management tools and processes available within Lean Six Sigma, as of FY 2023. As part of the confidentiality agreement for participation in the survey, only anonymized and cumulative results from the survey are reported. Overall, the survey had a 100% participation as all 13 circuits responded.

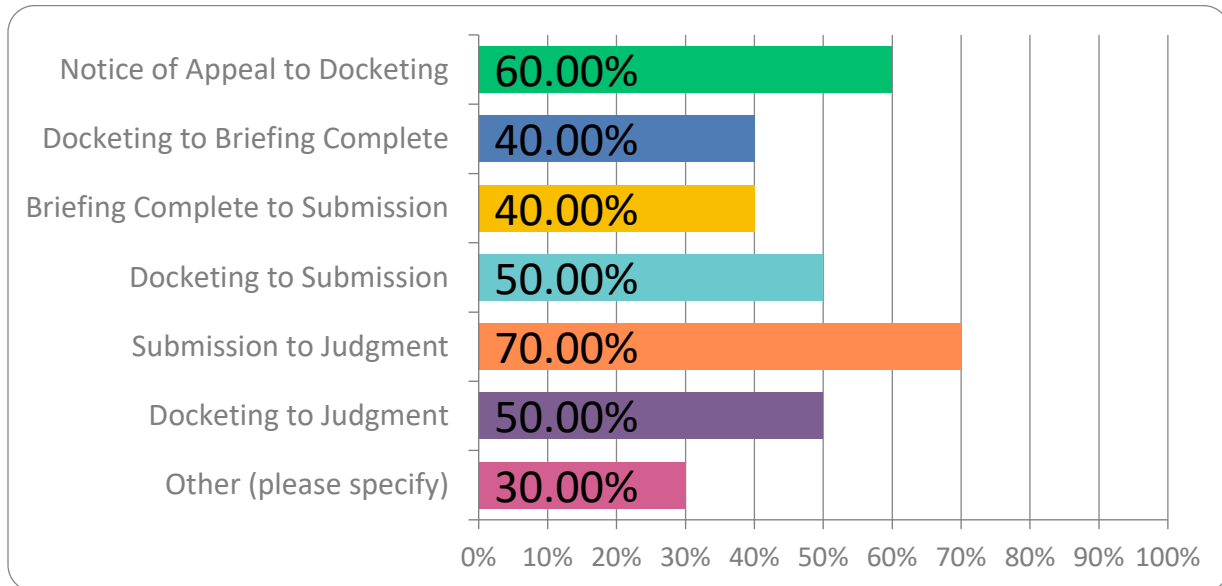
1. Do you currently track processing time intervals for cases?

Definition: Processing time interval(s) means the elapsed time between two milestones in the life of a case (e.g., case opening to briefing completed).



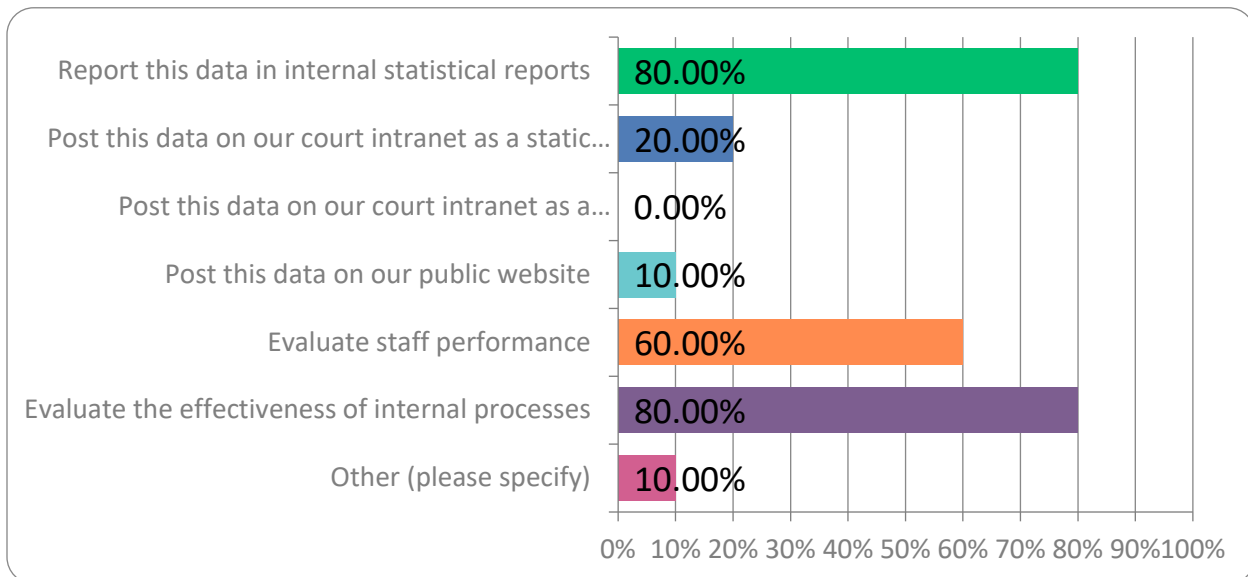
Note: Respondents selecting “No” skipped the Questions 2 – 6.

2. Which of the following processing time intervals do you track? (Select all that apply)



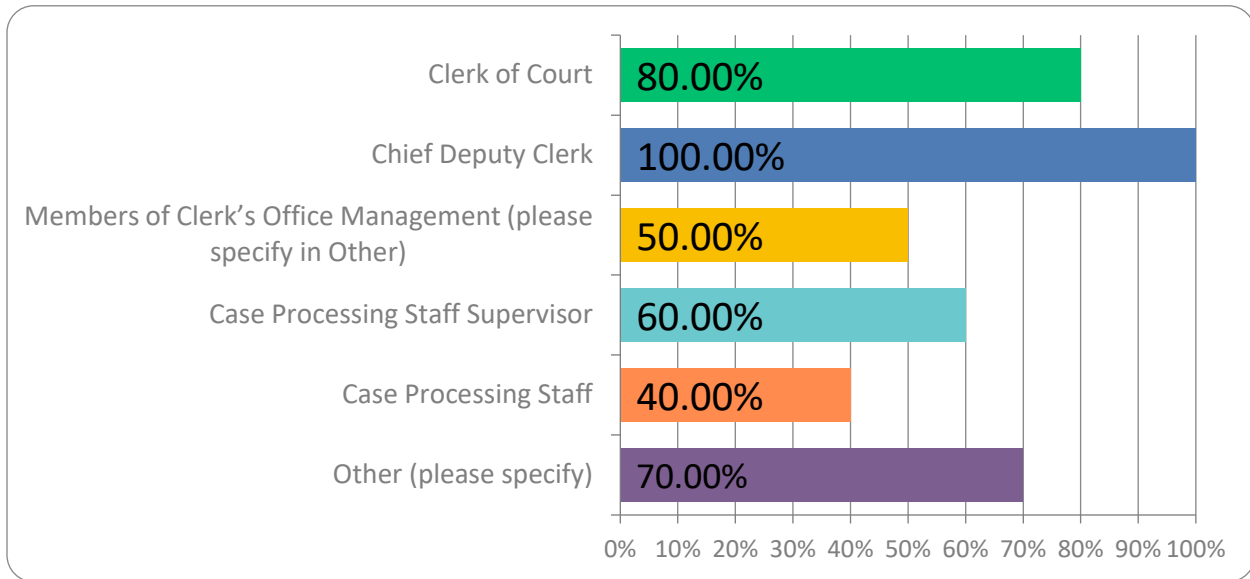
Other Responses: Length of submission and pending time for special panel cases

3. What do you do with the processing time interval data you track? (Select all that apply)



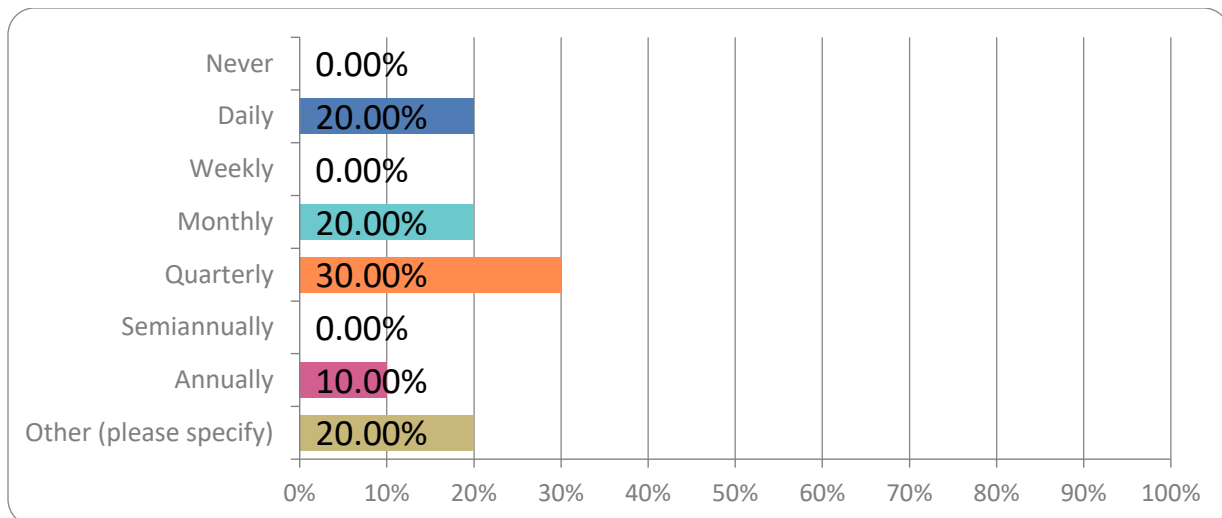
Other Responses: Case managers are required to submit monthly reports of their pending cases.

4. Who is informed of processing time interval data? (Select all that apply)



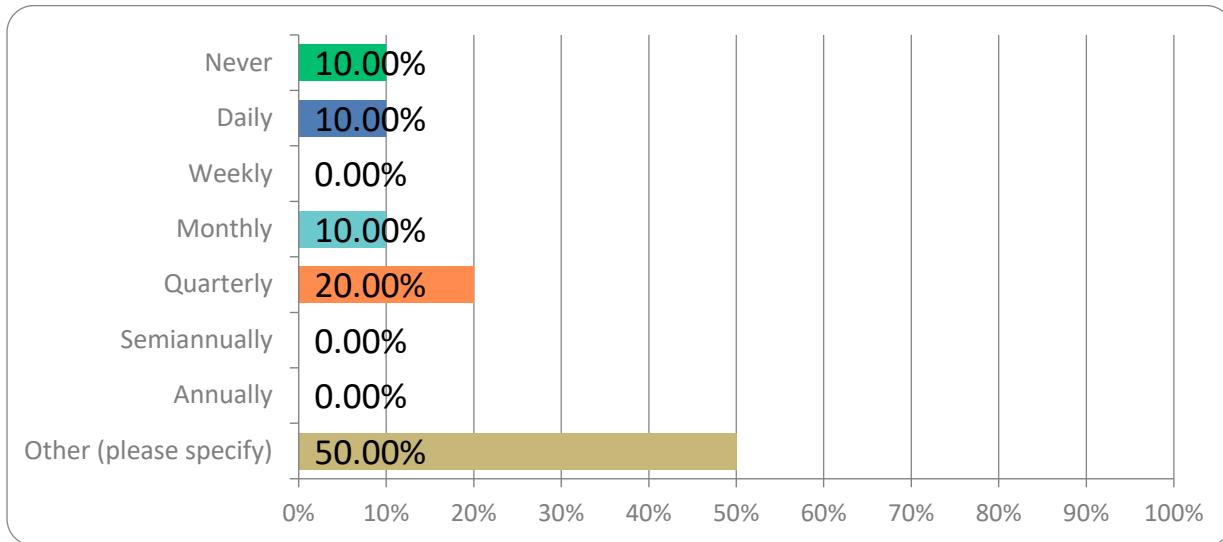
Other Responses: Chief Judge, Judges, Operations Manager, Case Management Attorney, Chief of Operations, Annual Report readers

5. How frequently are processing time intervals reviewed by management?



Other Responses: Ad hoc, particularly if issues are raised in monthly pending case reports; Case Manager Supervisor and Data Quality Analyst review weekly and promptly flag timeliness issues to staff with individual times reported to the Clerk and Chief Deputy Clerk on a semiannual basis.

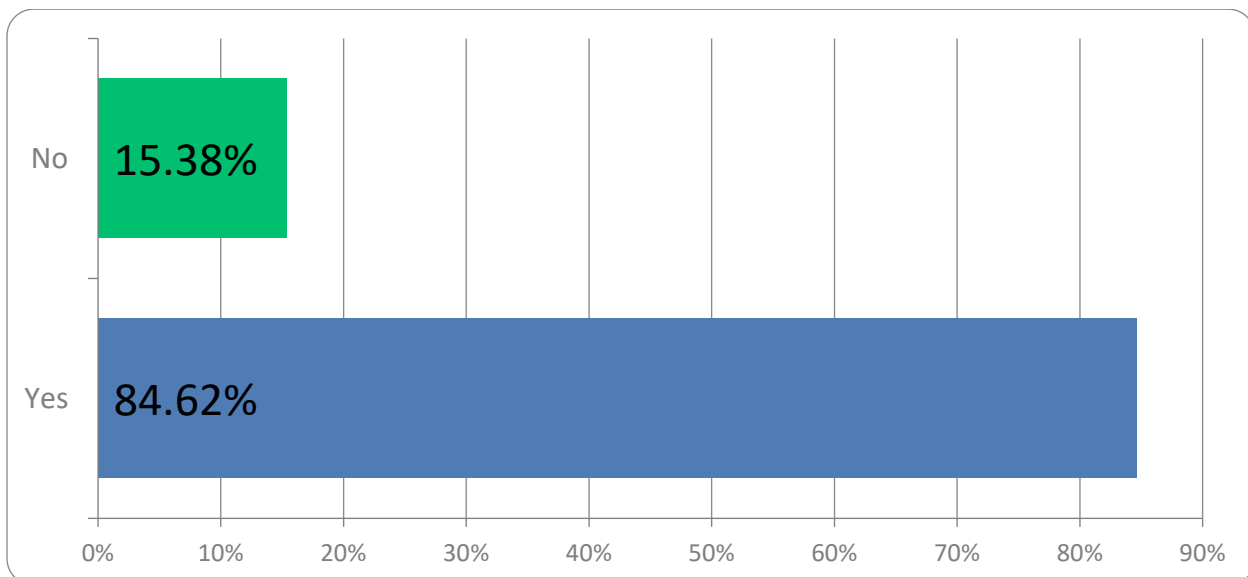
6. How frequently are processing time intervals reviewed with or provided to staff?



Other Responses: Ad hoc or as needed; Timeliness issues are flagged for staff during weekly reviews.

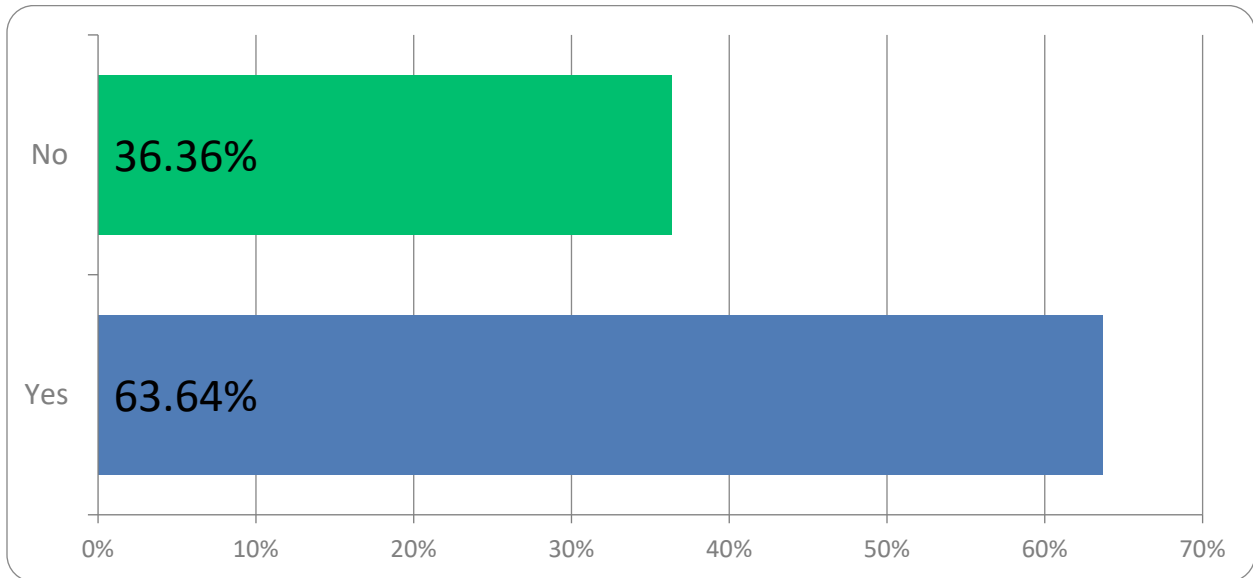
7. Do you have any processing time performance standards in place?

Definition: Processing time performance standards means there is an established maximum time frame in which a document must be processed (e.g., cases must be opened within 5 days of receipt).

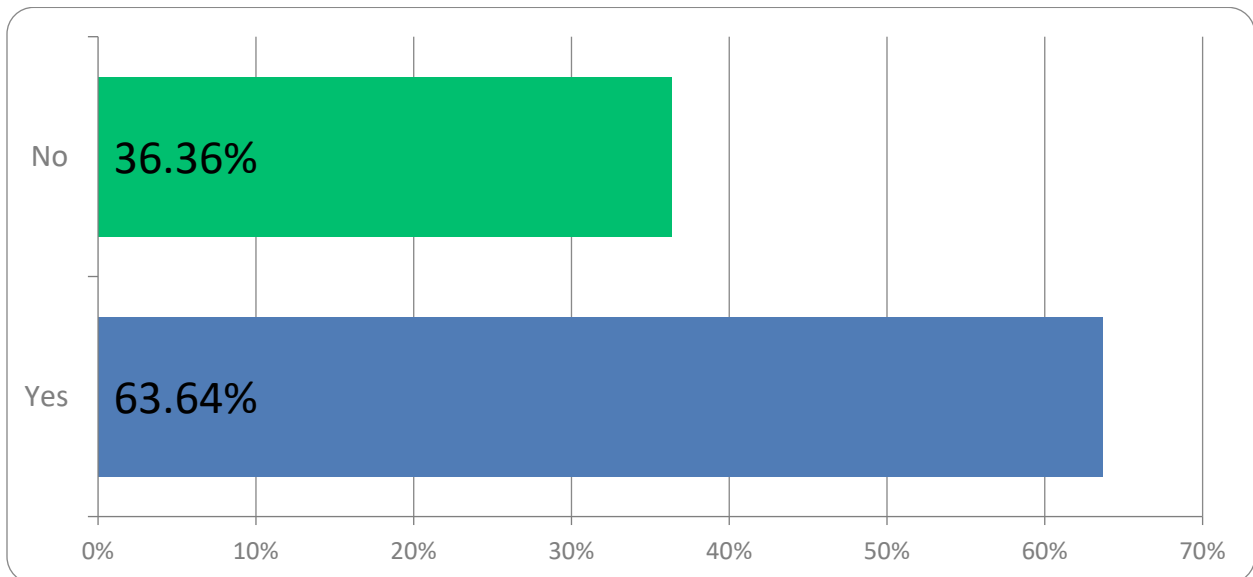


Note: Respondents selecting “No” skipped Questions 8 – 9.

8. Are your processing time performance standards documented and available to staff?



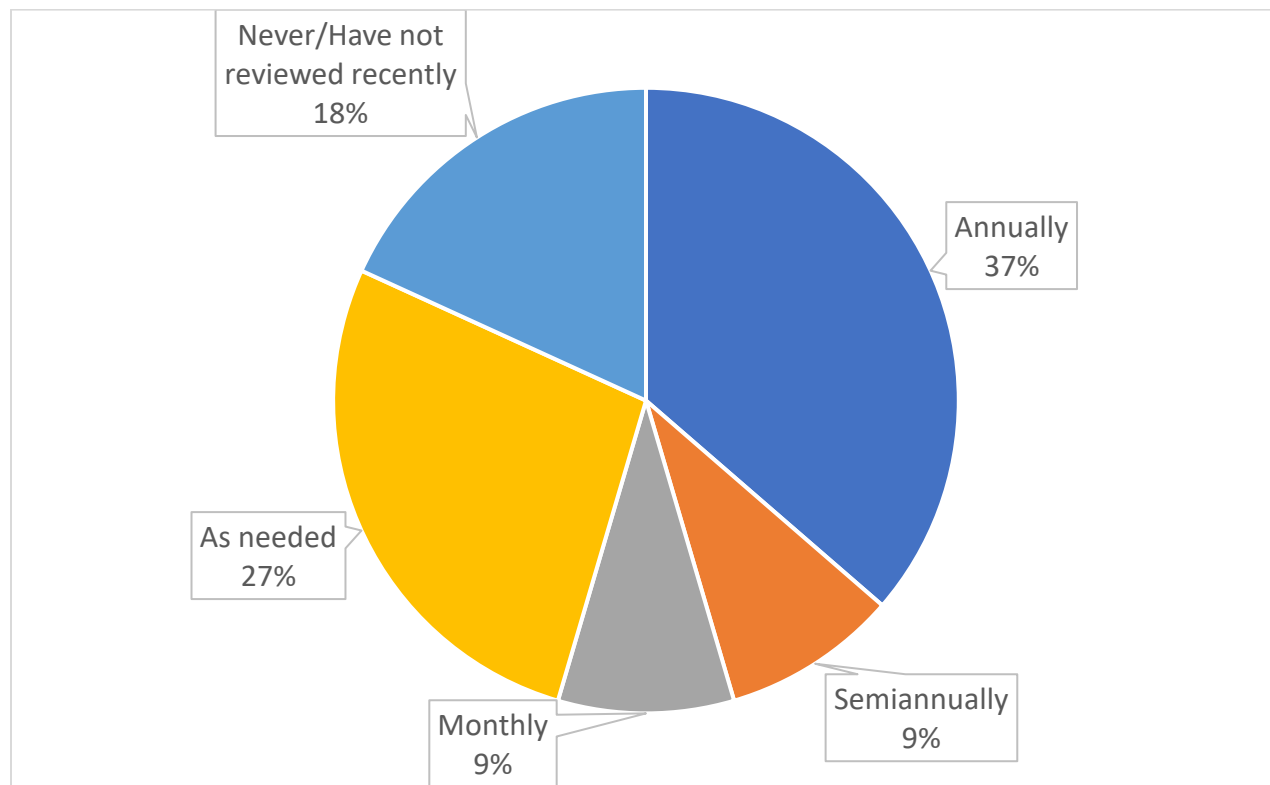
9. Do your processing time performance standards change based on either the case or document type (e.g., new cases must be opened within 3 days, motions must be processed within 5 days)?



10. Please describe your processing time performance standards.

- Cases opened within 5 days, orders entered within 24 hours, unrepresented documents are docketed within 48 hours.
- As soon as possible, no set number of days.
- New cases must be opened with 2 business days of receipt, filings must be reviewed within 2 days of submission. Second or successive habeas petitions are prioritized.
- Nonemergency district cases within 7 days of assignment; other cases within 2 days of receipt; emergency cases the same day. Case screening within 5 days business days. Filings in argued or calendared cases the same day. Chambers orders and judgements the same day. Staff attorney orders within 24 hours. Clerk orders within 48 hours. Filings quality reviewed within 24 hours, with briefs/appendices screened within 2 days.
- New cases within 5 days of receipt.
- New cases within 24 hours of receipt. Filings quality reviewed within 24 hours of receipt.
- Tasks are sorted into 8 priority categories, with the first 5 categories requiring processing within 24 hours of receipt.
- Each filing type is assigned a priority category, and each category has a specific time standard.
- Most documents must be processed within 3 days, except that precedential opinions must be processed the next day and documents in emergency matters must be processed upon receipt.
- New cases are opened within 24 hours. Motions and court directions are processed the same day.

11. How frequently are your processing time performance standards reviewed or updated?

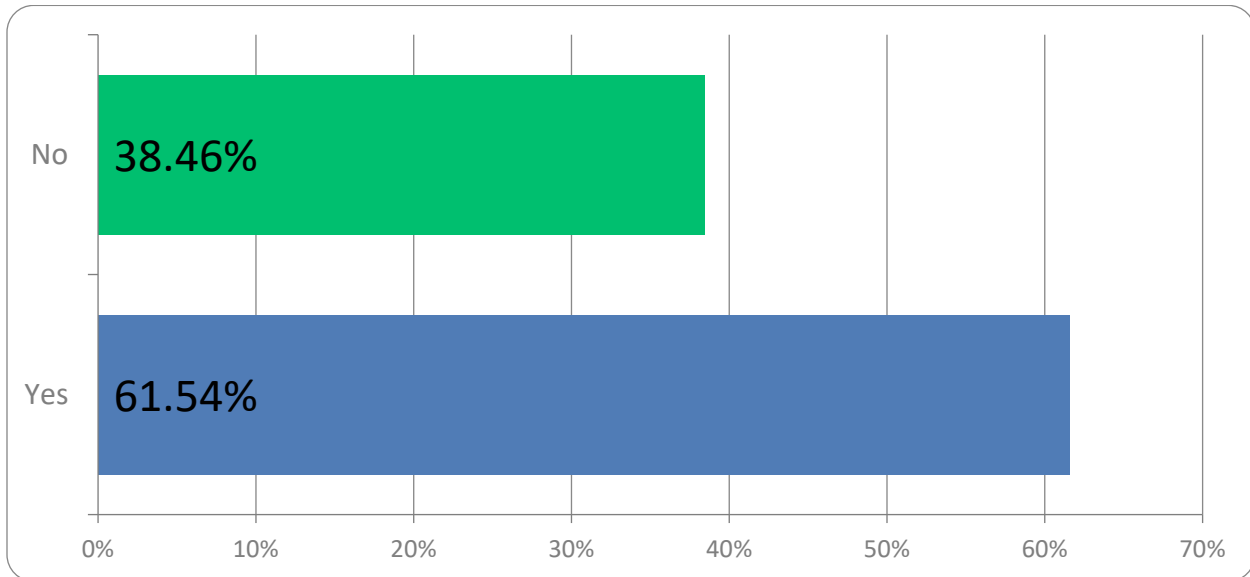


12. How did (or do) you determine how to set your processing time performance standards?

- Senior management determined the appropriate standard in consultation with staff.
- Evaluation of caseload and staff numbers
- Unknown/The standards predate the respondent's time with the court
- Review of the workload for staff and requirements for each task
- External directive
- Historical performance
- Based on the needs of the court balanced with the speed and accuracy of higher staff performers
- Collaboration within management with staff input
- Case manager work volume

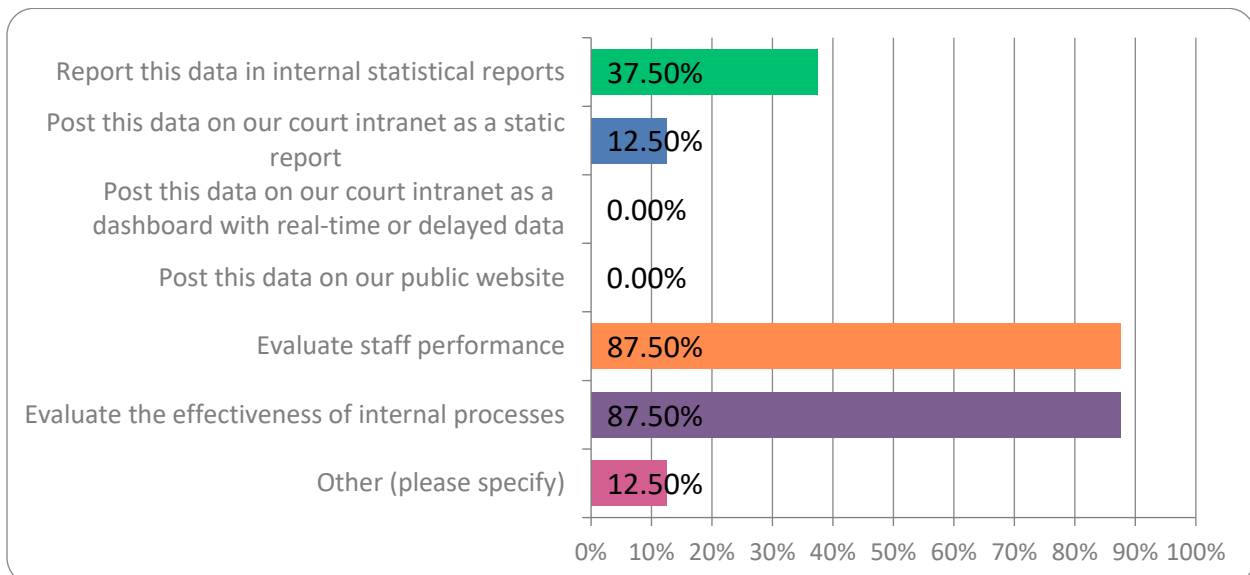
13. Do you currently track case processing accuracy by case processing staff?

Definition: Processing accuracy means a measurement, such as a percent, of actions performed correctly or incorrectly during a given period.



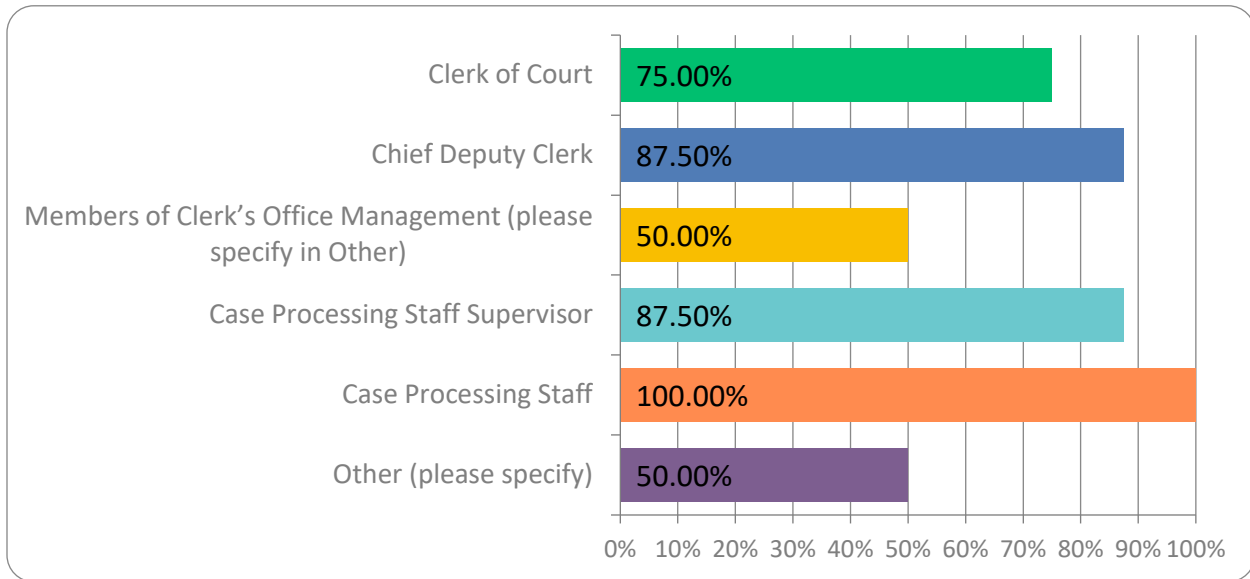
Note: Respondents selecting “No” skipped the Questions 14 – 17.

14. What do you do with the processing accuracy data you track? (Select all that apply)



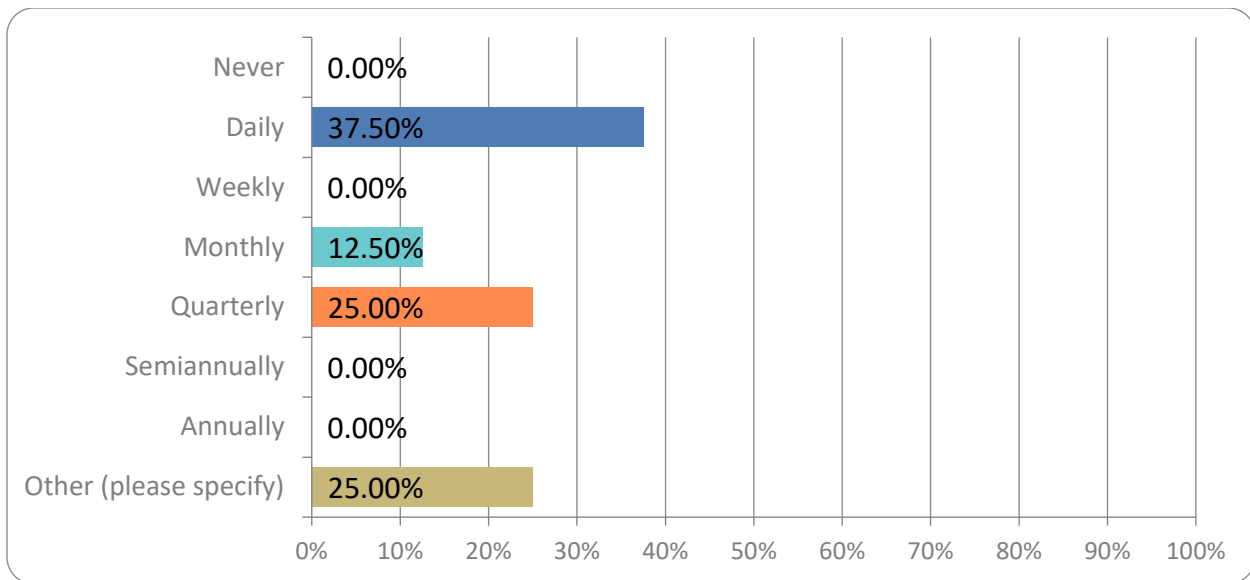
Other Responses: Review with staff

15. Who is informed of processing accuracy data? (Select all that apply)



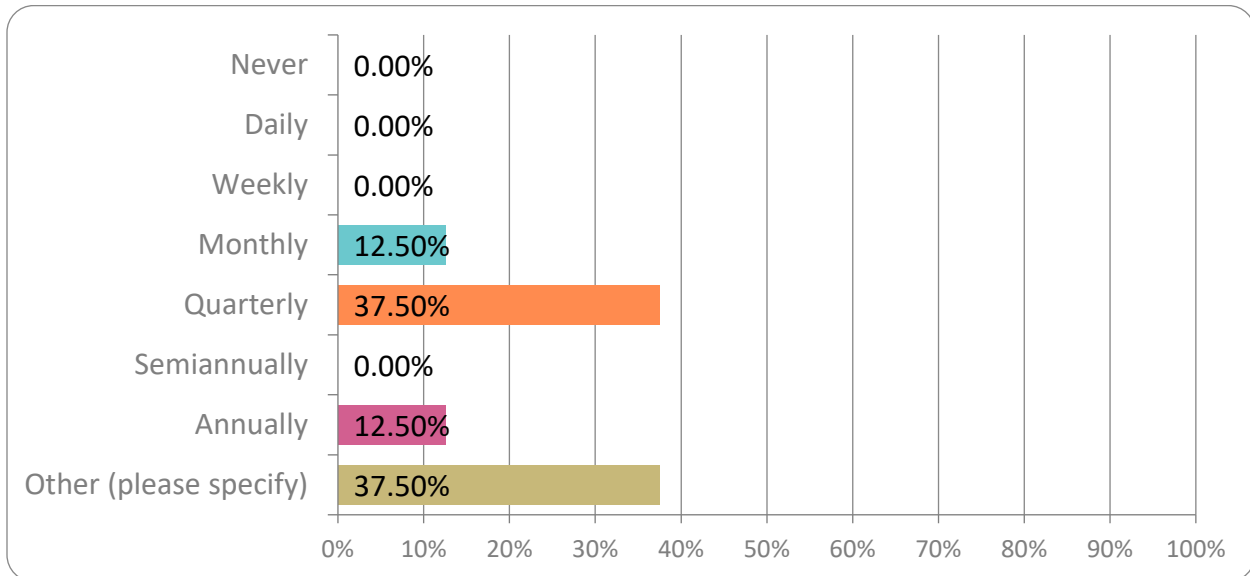
Other Responses: Operations Manager, Case Management Supervising Attorney, Chief of Operations, Clerk's Office Management, Quality Management Supervisor, Court Services Manager

16. How frequently is processing accuracy data reviewed by management?



Other Responses: Ad hoc; In conjunction with performance evaluations; Aggregate data is reviewed when the data indicates a procedural issue

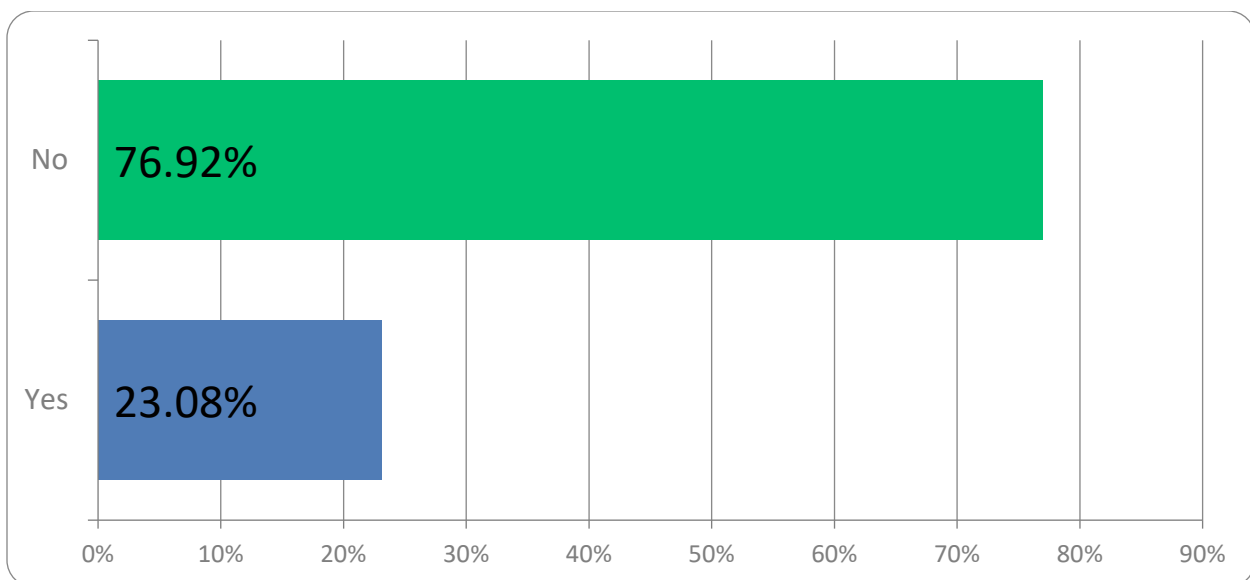
17. How frequently is processing accuracy data reviewed with or provided to staff?



Other Responses: When issues are flagged during daily review; Work is audited two weeks a year and then shared with the individual staff member; As needed; Annual evaluations.

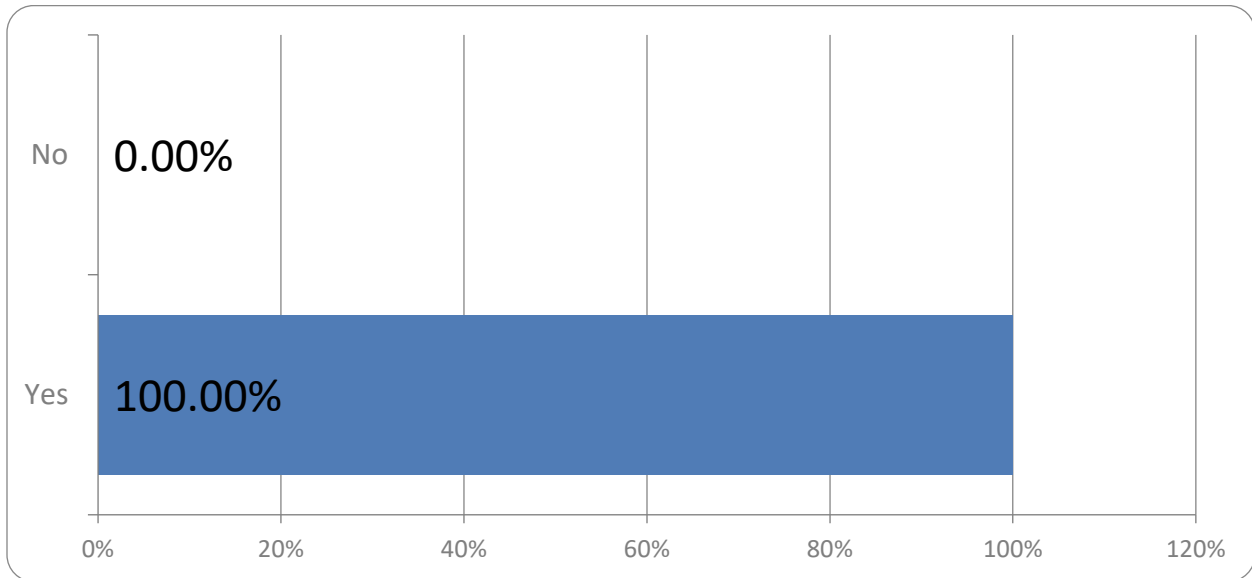
18. Do you have minimum accuracy requirements for case processing staff?

Definition: Minimum accuracy requirements means the minimum percentage of correctly performed work needed to meet minimum performance standards (e.g., at least 85% of case processing activity by a clerk must be performed correctly).

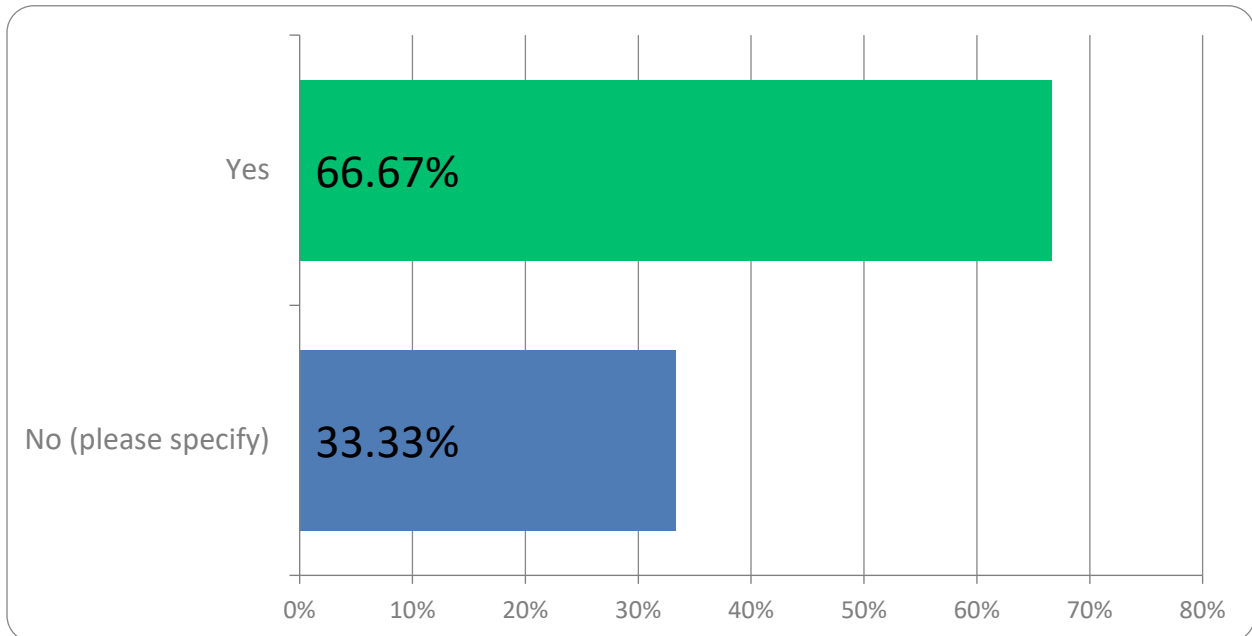


Note: Respondents selecting “No” skipped the Questions 19 – 21.

19. Are your minimum accuracy requirements documented and available to staff?



20. Do all case processing staff have the same minimum accuracy requirements?

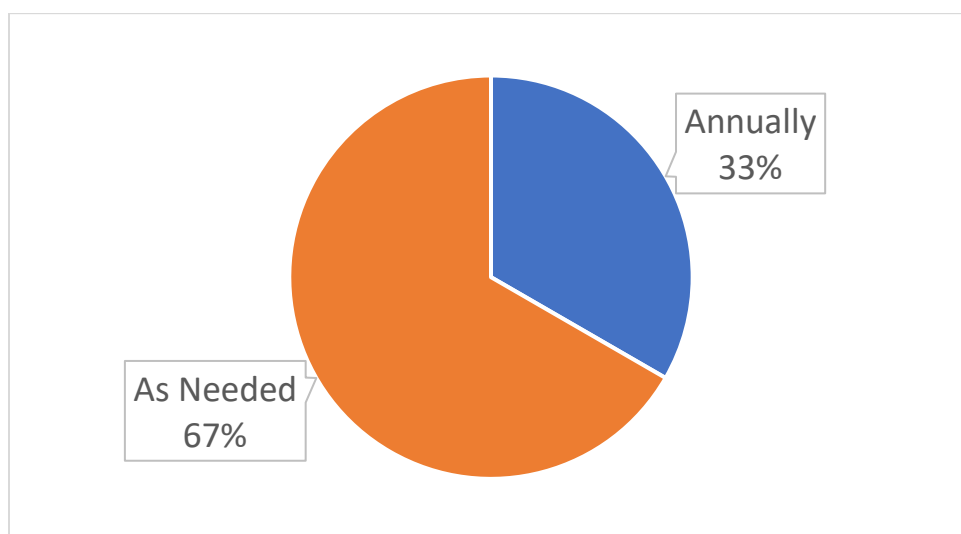


Explanation: Staff learning a new role have a different standard from experienced staff

21. Please describe your minimum accuracy requirements.

- Less than 2% error rate
- Case opening no more than 2 errors per case; no more than 10% of case screenings with outstanding corrections
- Based on the staff member's experience with more experienced staff having a higher accuracy requirement. A minimum performance floor was set after studying historical data.

22. How frequently are your minimum accuracy requirements reviewed or updated?

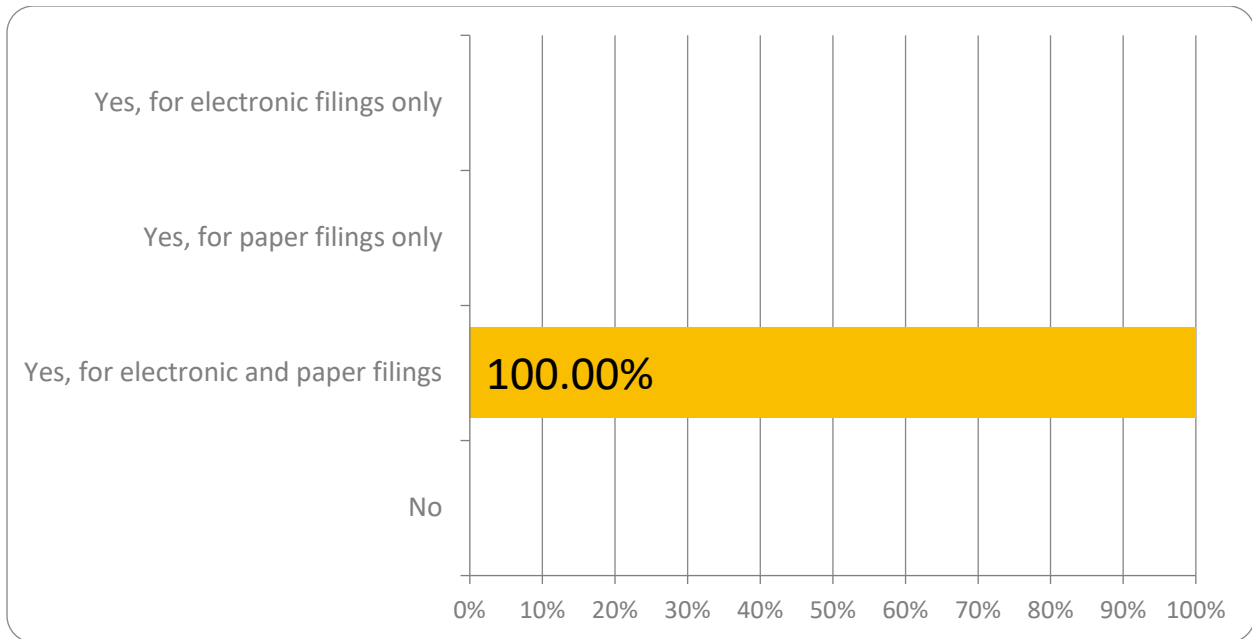


23. How did (or do) you determine how to set your minimum accuracy requirements?

- Senior management determined the appropriate standard in consultation with staff.
- Minimum accuracy requirements are set (or re-evaluated) based on the nature of the task and the average number of errors.
- A minimum accuracy requirement was set based on a review of historical data.

24. Do you currently perform public filing quality control review of case filings by the public?

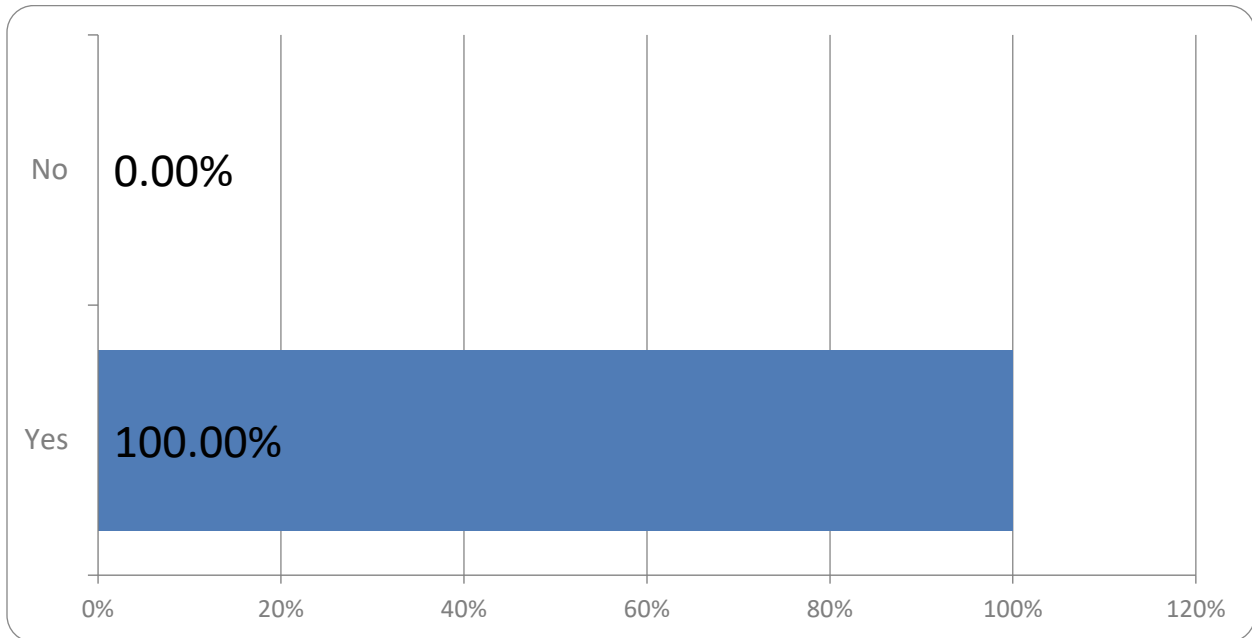
Definition: Public filing quality control review means case processing staff review a public filing for compliance with court rules or court filing requirements.



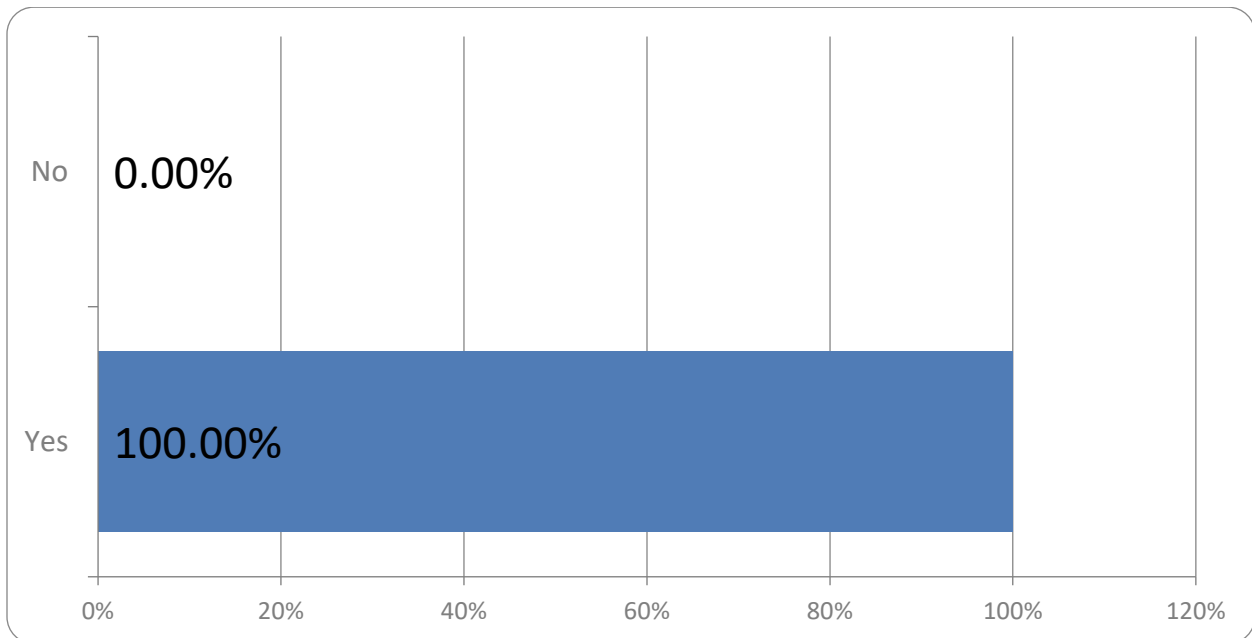
25. Please describe your process for the quality control review of public filings, including whether some items are not reviewed.

- All public filings are reviewed (5)
- Staff use a program for brief accuracy review and staff review all items
- Staff use checklists for brief compliance, quality control docketing events, and quality control review 50% of all new case openings for various data elements
- All motions and related documents are reviewed by an attorney and directions are provided to case administrators; case administrators perform quality control review of initial submissions, briefs and related documents, and petitions for rehearing or hearing en banc
- A quality control program reviews public filings for compliance and staff then review the program reports and issue deficiency notices
- Filings are quality controlled through a program to determine compliance and staff then quality control the documents for compliance
- All filings are reviewed for compliance, with noncompliant filings being subject to a non-compliance notice requiring corrective action.
- All filings are reviewed by staff before advancing to the next step in the process
- Case managers review all filings other than briefs for compliance; a separate briefing team reviews briefs and appendices for compliance

26. Do you issue noncompliance notices (or some other deficiency notice) to public filers?



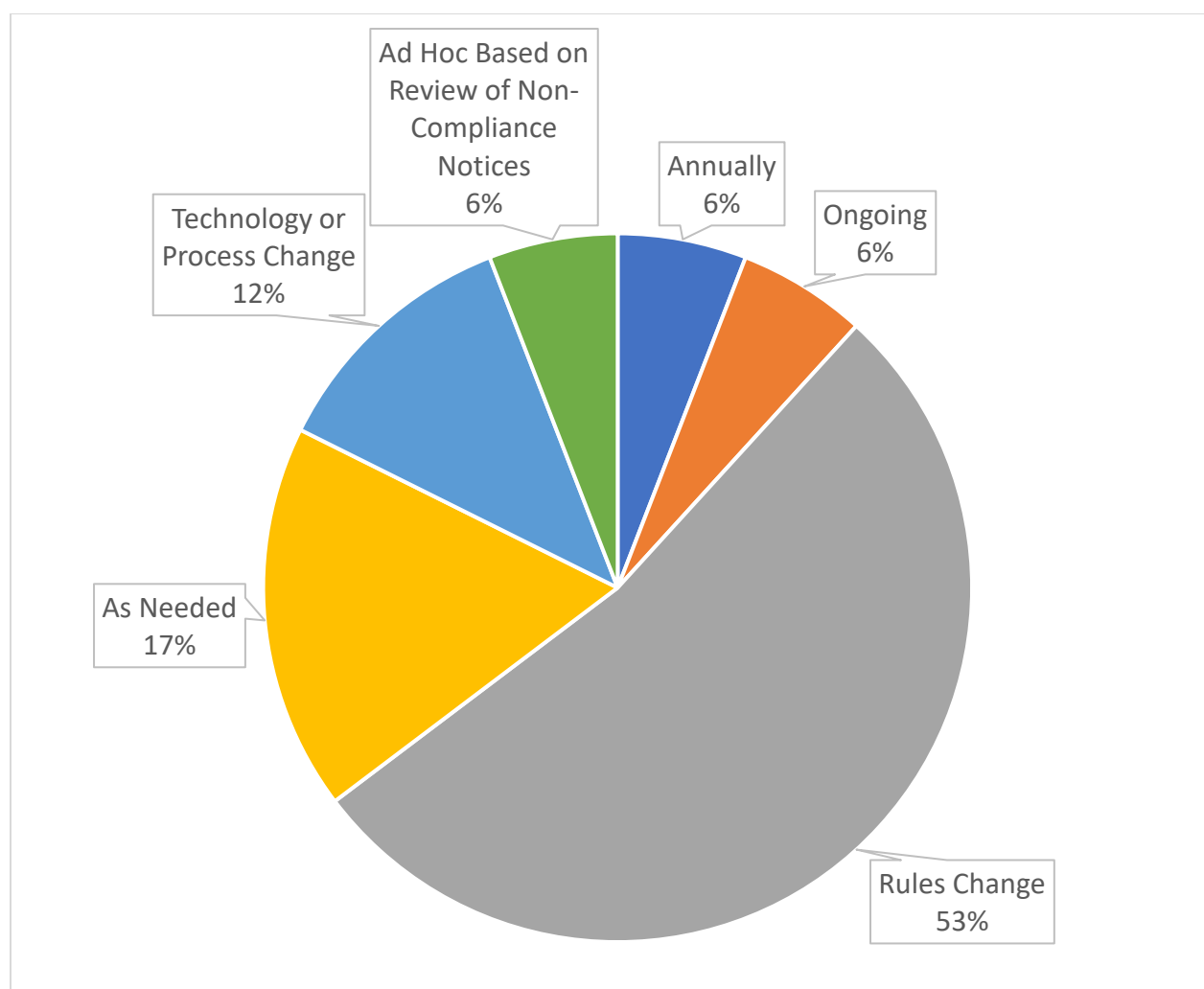
27. Do you have a list of noncompliance reasons documented and available to staff?



28. Please describe how you determine whether a filing is noncompliant.

- Review whether the filing complies with the rules (7)
- Checklists to evaluate for compliance (4)
- Errors are categorized as either critical or minor, with only critical errors issued deficiency notices and requiring correction before additional processing
- Review for compliance with the rules and an internal manual (2)
- Briefs, excerpts of the record, and petitions for rehearing are the only filings requiring correction is noncompliant

29. How frequently are your noncompliance reasons reviewed or updated?



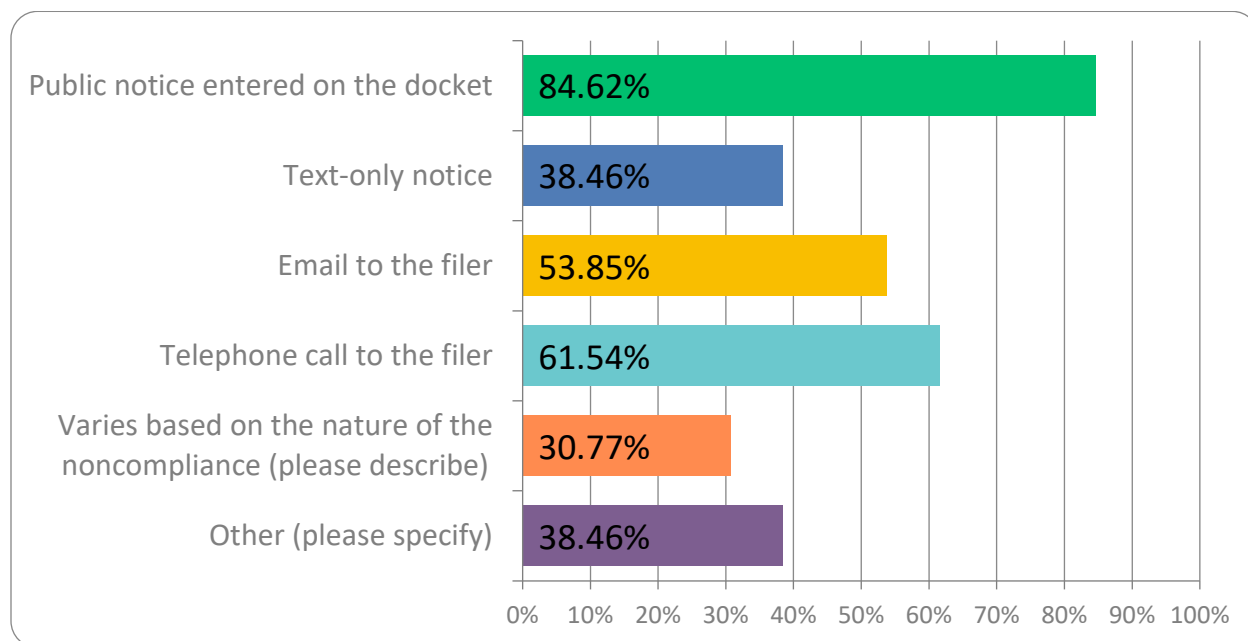
Note: Some courts provided multiple reasons, which resulted in more than 13 responses to this question.

30. How did you determine how to set your noncompliance reasons?

- Based on the Federal Rules of Appellate Procedure and Local Rules (11)
- Appropriateness determination in consultation with quality control staff and supervisors
- Judge requirements, preferences, or feedback (3)
- Court internal manual or procedures (2)
- Technological needs and capabilities
- Common filer errors
- Critical and minor errors are determined from court guidance

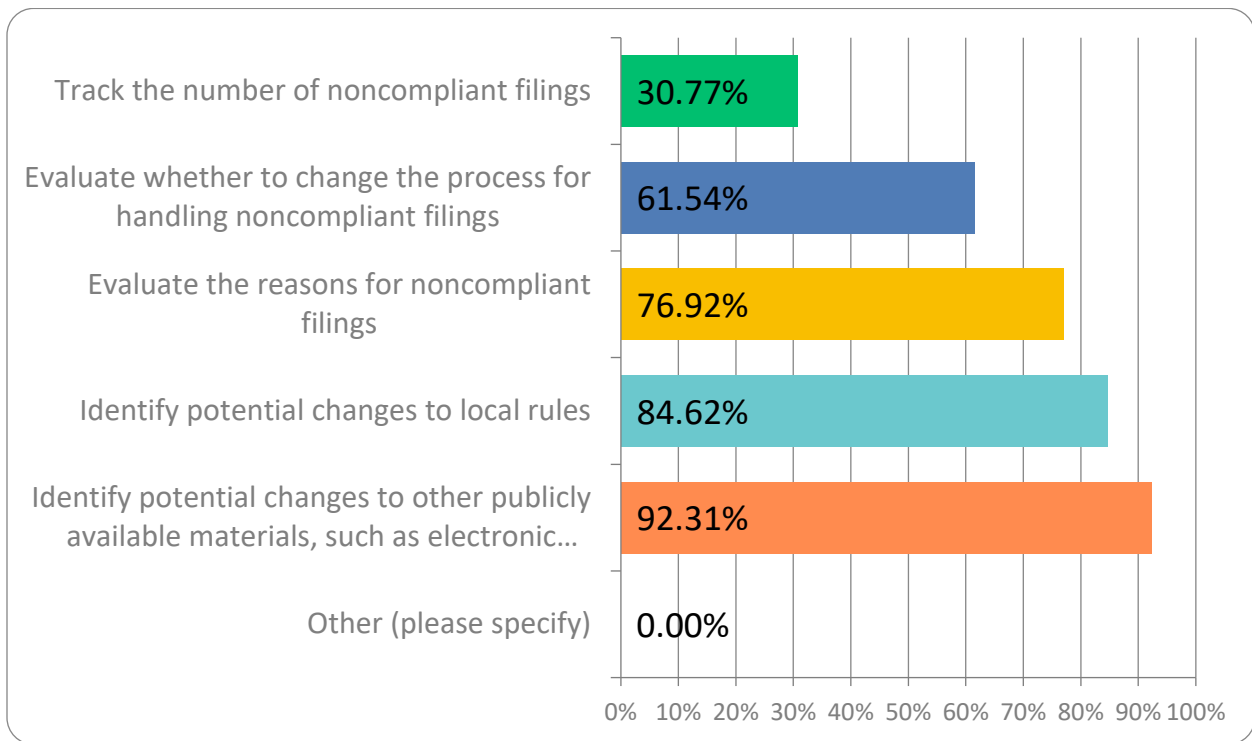
Note: Some courts provided multiple reasons, which resulted in more than 13 responses to this question.

31. Please select how you notify the public filer that the filing is noncompliant. (Select all that apply)

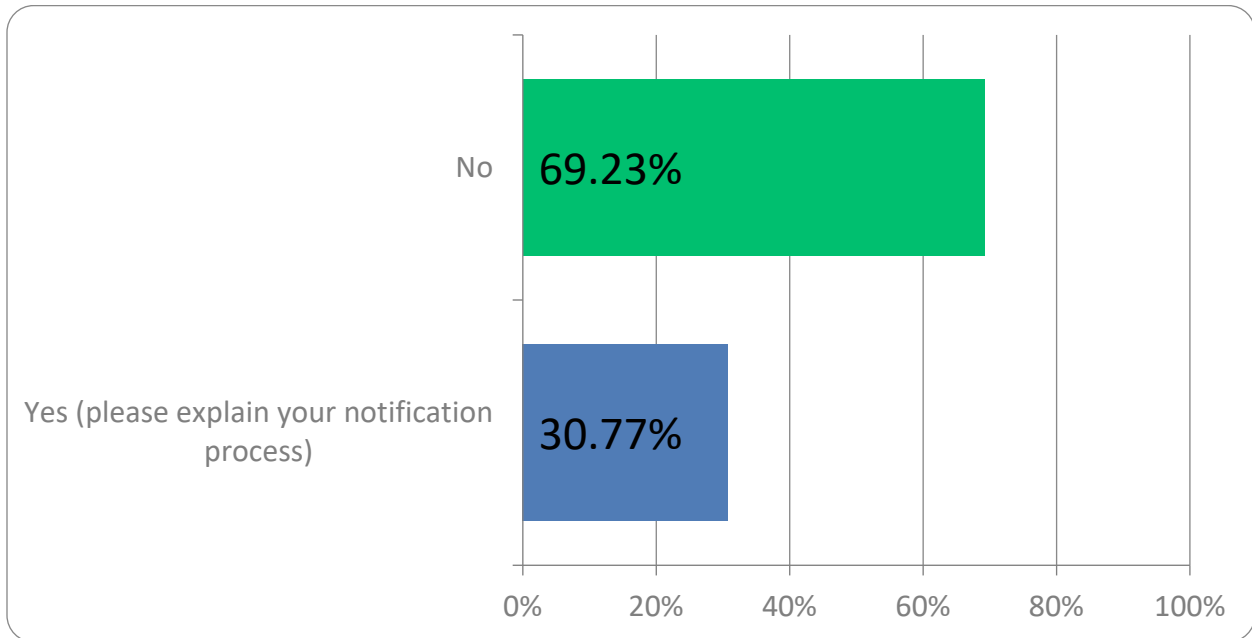


Other Responses: Clerks can enter a note to filer, issue a noncompliance order directing refiling, or contact the filer directly by phone or email; Quality control program provides immediate notice to the filer with corrective guidance; Varies based on the nature of the noncompliance (public notice, text-only notice, email, or call); Varies based on the nature of the noncompliance (clerk order striking the filing, docket text notation, email for deficient briefs and replace with the corrected version); Dependent on the filing type and nature of the noncompliance issue

32. In addition to notifying the public filer of noncompliance, please select any of the following you do with noncompliant filing information. (Select all that apply)

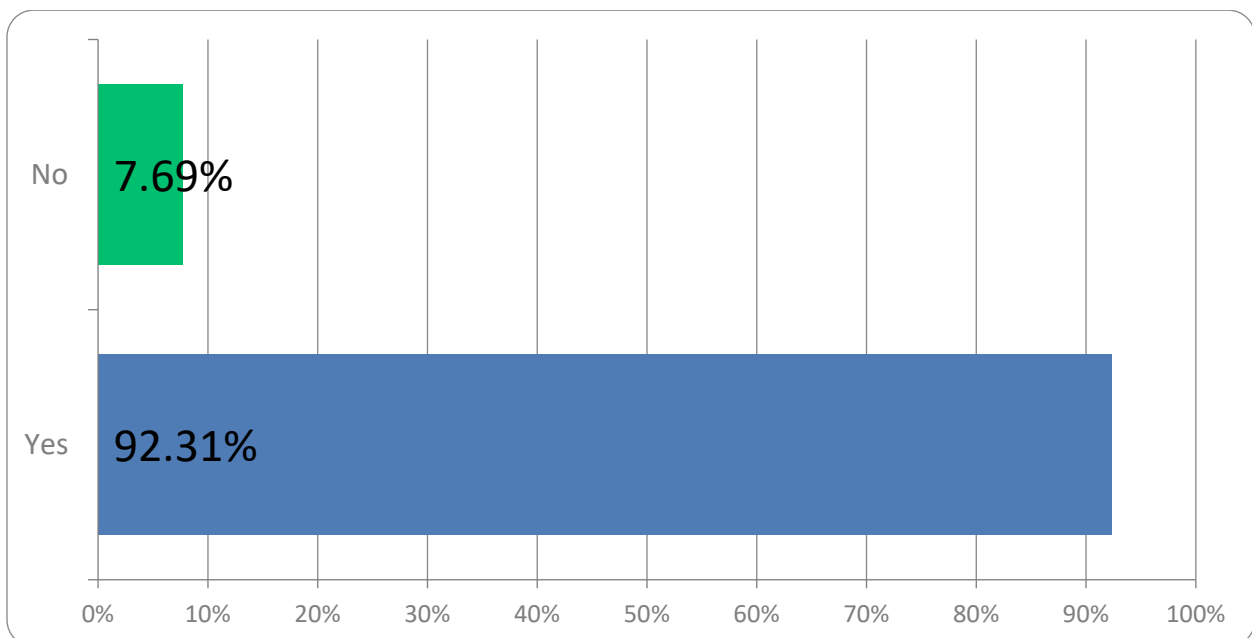


33. Do you provide courtesy notifications to public filers of problems with their filings but do not require action or correction by the public filer?



Explanation: Letter or form sent by email and noted on the docket; For internally correctable items, a phone or email to the filer to advise of the need to not make the error on future filings; Filer advised of all deficiencies but only required to correct critical errors; Minor issues are noted on the docket and advised to the filer but without the need for correction

34. Do you currently perform staff quality control review of case processing activity by case processing staff?



35. What position in your office performs the staff quality control review of case processing staff?

- Quality control team
- Supervisors, Chief Deputy, and a quality control staff member in the automation unit
- Case management supervisors and data quality analysts
- Operations Manager and CM/ECF Analyst
- Clerk, Chief Deputy Clerk, Legal Supervisor, Case Manager Supervisor, Records/Intake Supervisor, Data Quality Analyst, Administrative Attorneys, Paralegal, and Records Filing Clerk
- Case Managers and CM/ECF Quality Control Department
- Case Administrator Specialist and Case Processor Supervisor
- Appeals Processing Specialist (performs daily quality control review of the department)
- Management Analyst (Quality Assurance)
- Operations Supervisors and Chief Deputy Clerk
- Quality Assurance Team
- Case Management Specialists (primary) and Case Management Supervisors

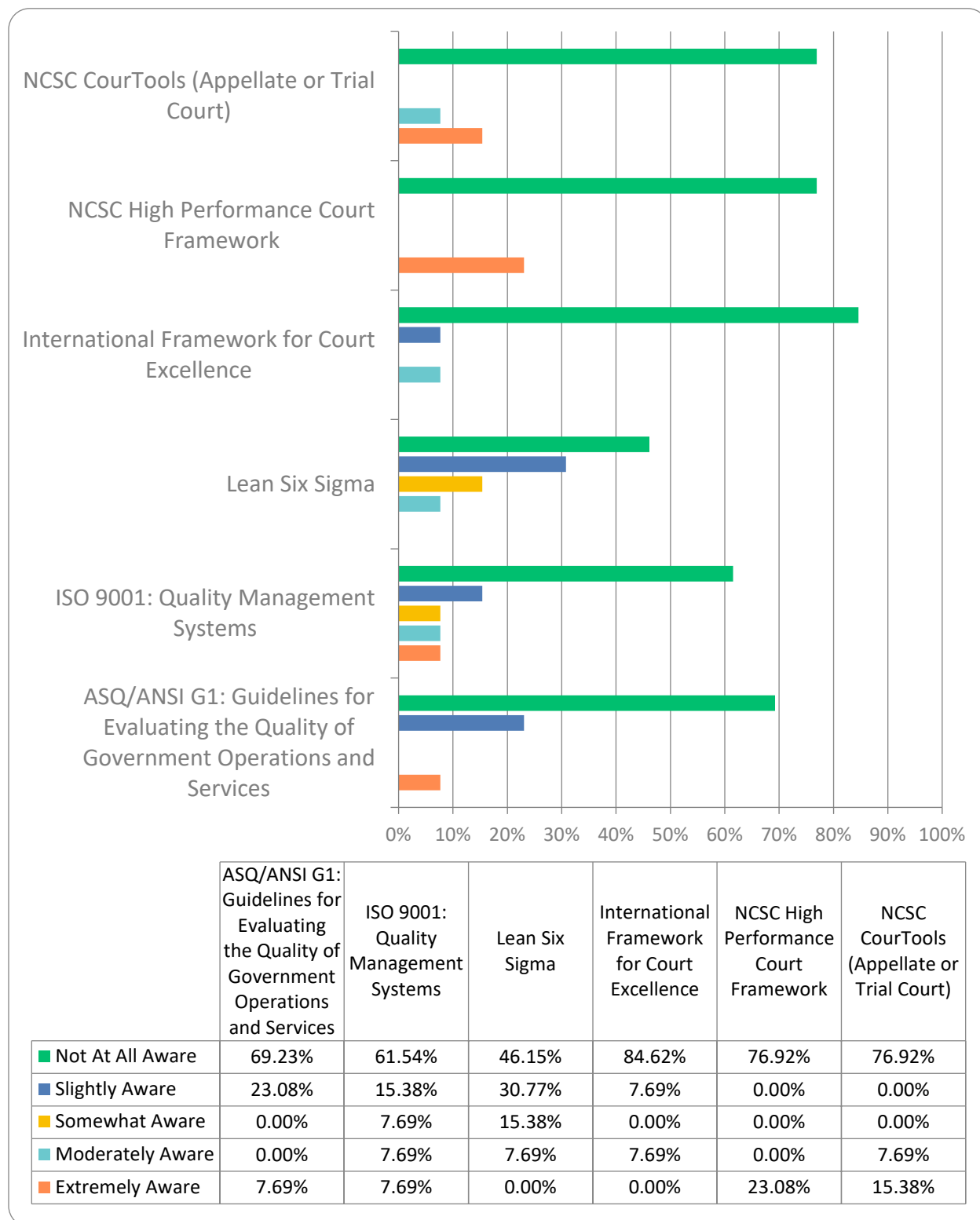
36. Please describe how staff quality control review of case processing staff is performed, including the frequency of the review, what percentage of filings are reviewed, and which items are included and excluded from this review.

- Quality Control Team reviews certain times of entries by staff
- 100% of daily work is quality control reviewed
- Checklists are used to review various data points, case management receives an email identifying errors; 50% of new case openings are reviewed; 100% of briefs, case opening forms, motions, and orders are reviewed
- Regular quality control review is for case openings, case terminations, orders, and petitions for rehearing and en banc. Case opening and orders are reviewed daily. Case terminations are reviewed several times a week.

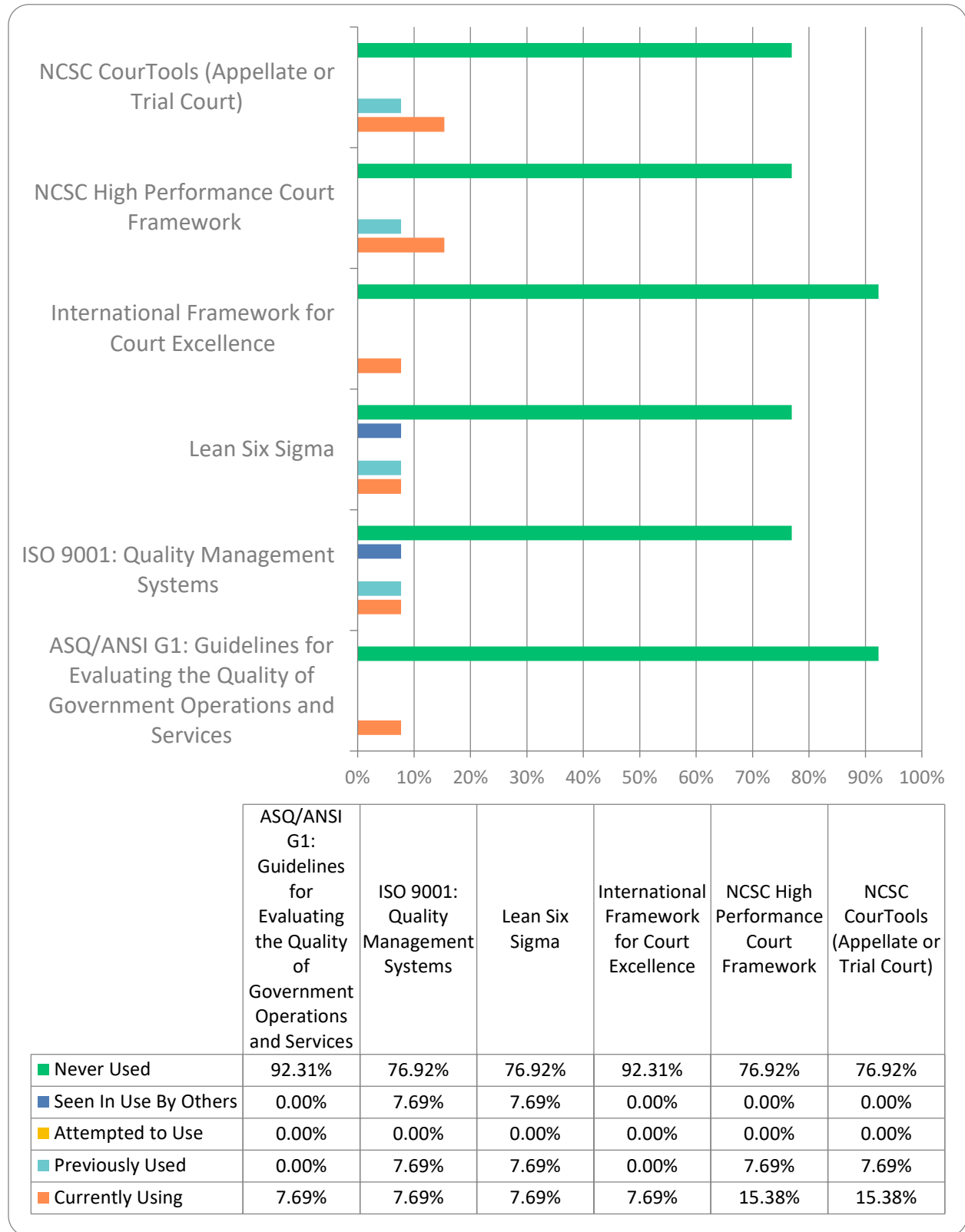
Petitions for rehearing and en banc are reviewed once a month. Specific percentages are not tracked.

- Electronic briefs and appendices are reviewed by intake clerks with a brief screening sheet. The intake supervisor checks all brief screening sheets where the reviewer noted a noncompliance error; 10% of screening sheets are spot-checked when no error is noted. Paper briefs and appendices are reviewed monthly. Other court staff filings are reviewed within 24 hours of docketing by various staff, with some documents reviewed a second time by staff before docketing.
- 60% of filings are reviewed through daily and monthly reports, including data entry at case opening, status reports, tickler reports, briefs, orders, and opinions. Appearance forms and record reviews are excluded.
- The case processing supervisor reviews a docketing error report daily, which is based on historically frequent issues. The supervisor also audits the docketing and quality control work of each staff member for two weeks each year. The case administrator specialist reviews a weekly list of issues and cleans up the docket issues, daily review of all orders entered, and daily review of instructions from motions attorneys.
- 75-100% of entries are reviewed on a daily history report.
- Risk management determination of what percentage of each item should be reviewed, with items of a higher risk being reviewed in a higher percentage than other items. Docket entries are sent to a SharePoint list where the quality assurance person reviews and makes notes about any issue, which sends a notice to the case manager to make any correction. The items reviewed by the quality assurance person are predetermined and located on SharePoint. This work is performed daily.
- Chief Deputy Clerk reviews certain categories of dispositive orders to ensure correct deadlines and statistical entry. All data is reviewed monthly before submission, as well as other custom reports for quality control and to identify stalled cases or motions
- All opinions, panel submissions, and court orders are reviewed. Reports are used to check for data duplication during attorney maintenance and case opening.
- Case opening, all court orders, and all judgments. Some standard orders are reviewed or approved before issuance.

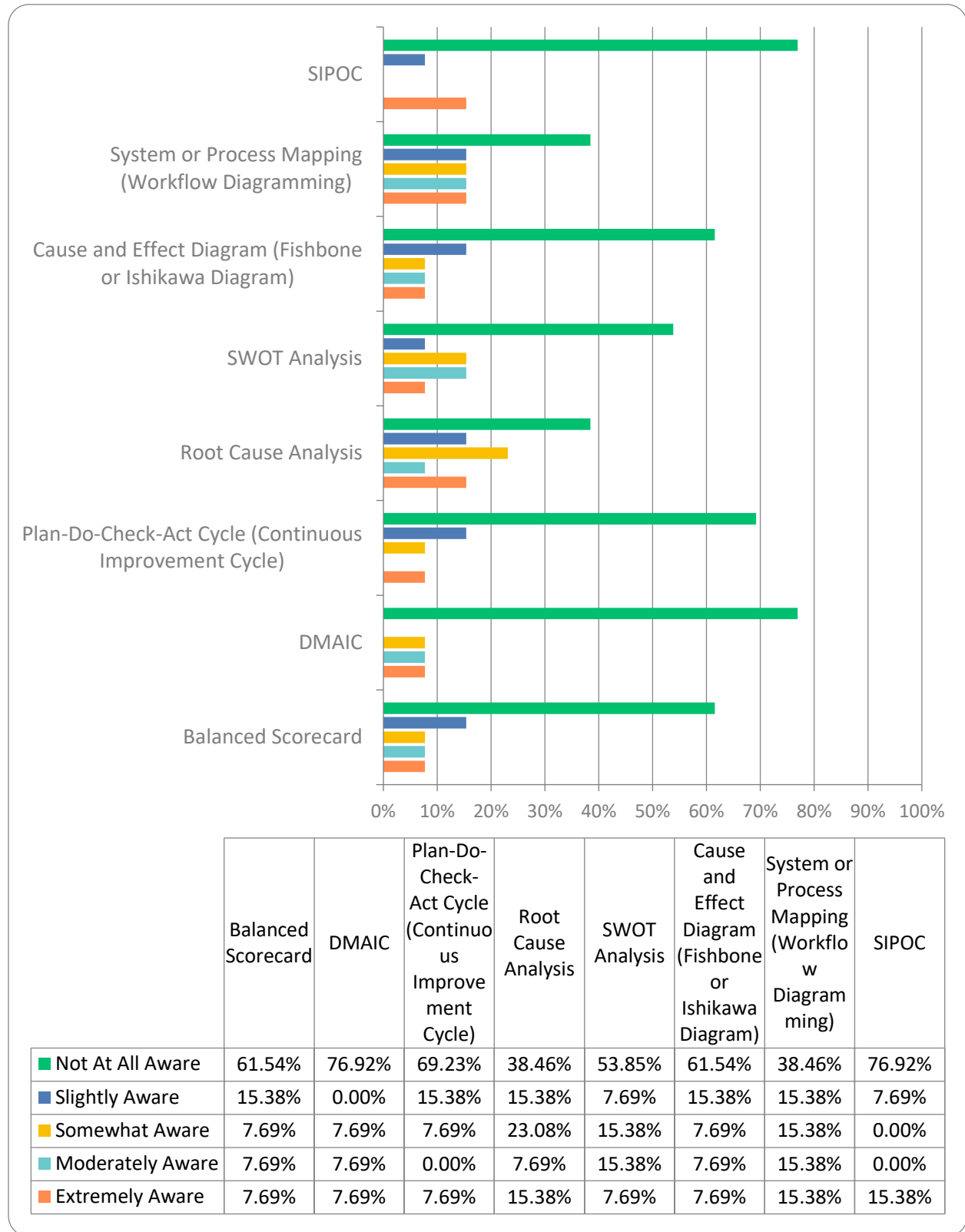
37. Please rate your awareness of the following quality resources or standards.



38. Please rate your use of the following quality resources or standards.



39. Please rate your awareness of the following quality tools.



	Balanced Scorecard	DMAIC	Plan-Do-Check-Act Cycle (Continuous Improvement Cycle)	Root Cause Analysis	SWOT Analysis	Cause and Effect Diagram (Fishbone or Ishikawa Diagram)	System or Process Mapping (Workflow Diagramming)	SIPOC
■ Not At All Aware	61.54%	76.92%	69.23%	38.46%	53.85%	61.54%	38.46%	76.92%
■ Slightly Aware	15.38%	0.00%	15.38%	15.38%	7.69%	15.38%	15.38%	7.69%
■ Somewhat Aware	7.69%	7.69%	7.69%	23.08%	15.38%	7.69%	15.38%	0.00%
■ Moderately Aware	7.69%	7.69%	0.00%	7.69%	15.38%	7.69%	15.38%	0.00%
■ Extremely Aware	7.69%	7.69%	7.69%	15.38%	7.69%	7.69%	15.38%	15.38%

40. Please rate your use of the following quality tools.

