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Telecontract pvt ltd t/a telco

#telcoWay Supervisory Schedule

**Daily / Weekly / Monthly Supervisory Schedule (Rhythm)**

**Name:**

**Role:**

**Daily Routines:**

|  |  |  |
| --- | --- | --- |
| **Time Block** | **Key Activities** | Related Action Matrix Priority |
| 08:00 - 09:30 |  |  |
| 09:30 - 11:00 |  |  |
| 11:00 - 13:00 |  |  |
| 13:00 - 14:00 |  |  |
| 14:00 - 15:30 |  |  |
| 15:30 - 17:00 |  |  |

**Weekly Routines:**

|  |  |
| --- | --- |
| **Day** | **Key Activities** |
| Monday |  |
| Tuesday |  |
| Wednesday |  |
| Thursday |  |
| Friday |  |
| Saturday / Sunday |  |

**Monthly Routines:**

|  |  |
| --- | --- |
| **Week** | **Key Activities** |
| Week 1 |  |
| Week 2 |  |
| Week 3 |  |
| Week 4 |  |
| Week 5 (Optional) |  |

**Business / Departmental Continuity Plan**

Please explain what is your plan / strategy should the above mentioned daily supervisory schedule be interrupted by (i.e. How do you propose to ensure that the above important aspects are still carried out in the face of unexpected disruptions):

|  |  |  |
| --- | --- | --- |
| **Nature of Interruption** | **Recovery/Catch up Plan** | **Stakeholders RACI (Who will be Responsible/Accountable/ Consulted / Informed** |
| Network Interruption |  |  |
| Power Disruption |  |  |
| Family Emergencies |  |  |
| Personal Illness (Sick Leave) |  |  |
| Formal Planned Leave |  |  |
| Other business disruptions 3 |  |  |
| Other business disruptions 4 |  |  |
| Other business disruptions 5 |  |  |
| Other business disruptions 6 |  |  |

Please include in your plan:

1. Recovery / catch up plan
2. Communication plan to key stakeholders (please list explicitly the stakeholder and the communication that you will do)
3. Delegation plan