

OPERATIONS MANAGER

Standard Operating Procedure (SOP)

I. PURPOSE

To outline the responsibilities of the Operations Manager for resource scheduling, coordination, and resolving inter-team dependencies.

II. SCOPE

This SOP applies to:

- Consultant scheduling
- Resource allocation
- Cross-team dependency management
- Operational support for project execution

III. SOP TASKS

1. Maintain Consultant Scheduling & Availability

(Frequency: Weekly – Monday | Procedure: Scheduling Readiness)

Objective:

To ensure consultants have updated weekly schedules and clear availability.

SOP Steps:

- Review consultant schedules across all departments.
- Update weekly availability and communicate to PM/COO.
- Ensure project assignments do not conflict.
- Resolve scheduling overlaps immediately.
- Maintain the master availability sheet.

2. Manage Internal Resource Allocations

(Frequency: Weekly – Wednesday | Procedure: Resource)
Allocation

Objective:

To assign resources based on skill, availability, and project priority.

SOP Steps:

- Review project resource requirements with the Project Manager.
- Coordinate with HR for new hiring requirements.
- Allocate consultants to ongoing and new projects.
- Adjust team allocation based on workload and urgent needs.
- Maintain updated weekly resource allocation logs.

3. Resolve Inter-Team Project Dependencies

(Frequency: Weekly – Friday | Procedure: Dependency)

Resolution

Objective:

To ensure smooth coordination across teams by resolving blockers.

SOP Steps:

- Identify ongoing project dependencies across BA, PM, HR, Delivery.
- Follow up with responsible departments for closure.
- Track each dependency until fully resolved.
- Update PM and COO with status of dependencies.
- Document repeated issues and suggest process improvements.

LANEWAY

Acknowledgment and Agreement

I hereby acknowledge that I have received, read, and understood the Standard Operating Procedure (SOP) document issued. I agree to follow all guidelines, processes, and responsibilities outlined in this SOP.

I understand that it is my duty to comply with the procedures mentioned, and any updates or revisions communicated in the future. If I have any doubts or require clarification, I will reach out to the concerned department or supervisor.

By signing below, I confirm my acceptance and commitment to adhere to this SOP.

Best Regards,



Gokul M Prabhu
CEO/MD
Laneway

FORM OF ACCEPTANCE :

I accept this appointment on the terms and conditions stated above and agree to the following:

Name: _____

Date: _____

Place: _____

Signature: _____

