

# IMPROVING PUBLIC SECTOR PERFORMANCE

THROUGH INNOVATION AND  
INTER-AGENCY COORDINATION



**CASE STUDY FROM THE GLOBAL REPORT**

## At Your Service: Improving Access to Information in Uruguay Through a Government-NGO Partnership



## CASE STUDY 11

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### Overview

In Uruguay, an innovative partnership between a civil society organization and the Ministry of Public Health has shown how governments can collaborate with NGOs to improve access to information – and potentially health outcomes – for citizens. Every year, Uruguayans get to choose a healthcare plan from a selection of public, semi-private, and private health providers. After launching an easy-to-use website in February 2015 that allowed citizens to compare data on the providers, such as average wait times to see a doctor, tens of thousands of Uruguayan citizens have been able to make more informed decisions about which healthcare provider to choose.



### URUGUAY

POPULATION (July 2017 est.)<sup>1</sup>

**3.360 million**

GDP PER CAPITA (current US\$)<sup>2</sup>

**15,220.60**

INCOME GROUP<sup>3</sup>

**High income**

GOVERNMENT EFFECTIVENESS<sup>4</sup>

**73.1%**

### Introduction

Every year, healthcare providers in Uruguay engage in widespread marketing campaigns and launch special offers to entice Uruguayans to switch healthcare plans. Options include public providers, private providers, and semi-private providers, which receive government funding partly based on the number of people they have signed on to their plans. Individuals sifting through the various marketing brochures faced a near-impossible task in figuring out which plan offered the best value-for-money given their specific circumstances. “Citizens were essentially navigating in the dark,” said Fabrizio Scrollini, director of the Latin America Open Data Initiative and co-founder of Datos Abiertos, Transparencia y Acceso a la Información (DATA Uruguay), a volunteer-run civil society organization. “You wouldn’t know how many doctors a provider had, how much they charged you, or if the provider complied with national targets.”

Up until 2018, citizens could switch plans during a month-long enrolment period in February. For the 2014 enrolment period, DATA Uruguay decided it wanted to use publicly available information to help citizens make better decisions about their healthcare plans. The NGO partnered with Portal 180,

<sup>1</sup>CIA World Factbook, <sup>2</sup>World Bank (2016),  
<sup>3</sup>World Bank (2016), <sup>4</sup>World Bank (2016)

an online media platform, to publish Ministry of Public Health (MSP, Ministerio de Salud Publica) data on the various providers. The ministry's data had been available for several years, but it was published online in difficult-to-read Microsoft Excel spreadsheets. Few people downloaded the data, and even fewer could understand it.

DATA Uruguay's initial experiment was not as successful as it had hoped. The group misinterpreted some of the data, and other data they collected from the MSP website turned out to be inaccurate. Several thousand people visited the project website, which was far more than had downloaded the ministry's data in previous years, but the site failed to significantly improve individuals' ability to choose the best healthcare plan for their particular circumstances (Scrollini 2017).

Still, the initiative did succeed in creating Uruguay's first digital platform to compare healthcare providers, and the website attracted the attention of citizens, the providers, and the MSP. Officials at the MSP had wanted to create a similar kind of website, but the ministry did not have the in-house expertise to design a suitable platform, and procuring an outside organization to do it would be complex and potentially expensive. Further, ministry officials had worried that making data more accessible could have unintended consequences; thousands of people switching providers could affect the stability of the entire healthcare system.

Around the same time, DATA Uruguay began working with the Open Government Partnership (OGP), a global initiative that promoted multi-stakeholder collaboration to disclose government data and empower citizens. The OGP platform provided a space for the MSP to begin discussions with DATA Uruguay on how they could work together to achieve shared goals.

## Response

**D**uring the discussions, the MSP and DATA Uruguay decided to form a partnership to move the initiative forward. Both would contribute time and resources to put together a new and improved website for the next enrolment period, which was set to take place in February 2015.

Collaborating was not easy, however. There was no precedent in Uruguay for a government ministry to partner with an NGO for such an initiative, and both the MSP and DATA Uruguay were cautious about working together. With external funding from the Latin American Open Data Initiative, the two partners set about overcoming those challenges to make the envisaged open data platform a reality.

## Forming a partnership

The partnership approach was new for the Uruguayan government. Ministries were accustomed to hiring contractors to implement certain initiatives, but working together on an equal footing with an outside organization was a new concept. The partnership relied on building trust between civil servants in the ministry and volunteers at DATA Uruguay. The two counterparts developed a Memorandum of Understanding that outlined their commitment to equal input in designing and building the system.

Developing close working relationships and shared goals on both sides was critical. According to Scrollini, concerns about the impact of open data, as well as a lack of interest in the project, made some officials within the ministry reluctant to collaborate with DATA Uruguay. On the other hand, several civil servants within the MSP were big supporters and actively worked with DATA Uruguay's volunteers to make the project a success. Strong support from the Agencia de Gobierno Electrónico y Sociedad de la Información y del Conocimiento (AGESIC), the Uruguayan government's agency for information technology, e-governance, and open data, also helped drive the initiative forward. AGESIC coordinated Uruguay's involvement with the OGP and helped ministry officials understand the government's commitments to improving data transparency and accessibility.

Through discussions, the MSP and DATA Uruguay overcame different ways of thinking, aligned objectives, and developed a shared understanding of what the collaboration hoped to achieve. The most contentious discussions surrounded what data, and how much data, to make available. From the outset, DATA Uruguay encouraged the MSP to collect and publish more data than it had previously. Scrollini said the NGO initially wanted to run surveys and

focus groups to gather citizens' views on what data was most important to them, but with the February deadline to launch the platform looming, they decided there was not enough time for such research. Instead, they made decisions on what data to include based on what they thought would be most helpful for citizens and what data citizens had requested from the MSP in previous years. Examples included waiting times at clinics, drug prices, and the availability of specialists.

The group decided it was best to publish all the data in an easy to digest format that clearly showed how each provider compared to the others on individual variables. A lot of discussion went into deciding on a simple platform on the website's homepage that would present the data accurately. Scrollini said the group specifically decided not to create a ranking system using the data. Choosing a process to rank the providers and how to weigh different variables would create unnecessary additional complexity. Those factors, combined with the difficulty of ensuring impartiality in the rankings, meant that "ranking providers would have been a disservice to the system," Scrollini said.

## Developing a platform

After agreeing on what data to include and how to present it, the MSP-DATA Uruguay team began collecting information and developing a website to publish it on. Any providers that received government funding (including all semi-private providers) were legally mandated to provide data on their operations to the MSP. But the providers did not submit data in a standardized way, and ministry staff had to manually go through the data sets to find what they were looking for. Further, the ministry did not have sophisticated information systems to manage its data. Most data was manually entered into spreadsheets and then published on various pages of the ministry's website. Turning that data into a standardized format that allowed for easy comparison between providers was a difficult task.

As ministry staff began collecting and analyzing the data, the team realized there were inconsistencies in the data provided. The MSP had to follow up with providers and push them to provide more accurate and more timely data. Because of its legal backing, the ministry was able to sanction any publicly funded

provider that did not comply. Private providers, however, were less willing to submit data that the MSP and DATA Uruguay requested.

DATA Uruguay's team developed the application to import and process data, and ran tests to ensure the data was compatible with the application. Syncing the data and the application was a time-consuming and technically difficult process, and both the MSP and DATA Uruguay had to constantly refine the system, right up until the website launch in February 2015.

After a few frenetic final weeks putting the website together, the MSP-DATA Uruguay team successfully launched the website, which they named *A Tu Servicio* (At Your Service), on time. The website's user-friendly infographics helped citizens visualize the data and easily compare providers. As more Uruguayans looked at the website and submitted feedback, the team was able to further improve the quality of the data. DATA Uruguay's team could correct any data errors pointed out by website users, and in cases where healthcare providers had not submitted data, citizens could put pressure on those providers to update the information they sent to the MSP. When citizens questioned the data on the website, the MSP conducted formal audits to ascertain if the data provided was indeed accurate.

## Stimulating debate

DATA Uruguay launched a marketing campaign to inform citizens about *A Tu Servicio* as soon as the site launched. The NGO concentrated its efforts on social media, for example by purchasing advertisements on Facebook. The MSP also placed advertisements in traditional media and held press conferences to promote the site.

The website received more than 32,000 unique visitors in 2015. Journalists also took notice, and began drawing attention to citizens' concerns that were evident in the data, such as long wait times at public hospitals. The data helped stimulate public debate about the quality of health services across the country. Later that year, the debate spread to Uruguay's parliament, and politicians began quoting data from the *A Tu Servicio* platform during parliamentary discussions on healthcare policy (Sangokoya et al 2016).

## Reflections

After *A Tu Servicio*'s first month in operation, the MSP and DATA Uruguay kept working on the platform to improve data accuracy and ensure it was presented in an easy-to-use format. The number of users increased the following year. In 2016, *A Tu Servicio* had more than 50,000 unique visitors, which equated to about 4% of the population eligible to change providers. It was unclear, however, how many of those visitors were Uruguayan citizens in the process of choosing a new provider, or if the site helped them choose a better healthcare plan. In 2016, about 4% of eligible Uruguayans changed healthcare provider during the February enrolment period, a similar amount to prior years (Ministerio De Salud Publica 2016). In 2017, unique website visitors dropped to about 36,500. Daniel Carranza, co-founder of DATA Uruguay, said that due to budget constraints the NGO had to cut the advertising budget for the site by 50% in 2017, which likely contributed to the site receiving fewer visitors than it had the previous year. Scrollini said that DATA Uruguay hoped to conduct a user survey in 2018 and do more in-depth research on the system to better determine the initiative's impact.

In 2018, the MSP began implementing a new system for switching healthcare providers, and DATA Uruguay was planning how to adapt *A Tu Servicio* to the changes. "The February transfer window was suspended until a new online system for transfers is implemented within the year," said Carranza. "The new system will eliminate the need for a transfer window because it will function all the time. As a result, we will probably change *A Tu Servicio* to a year-round information service, hopefully with more updates."

Scrollini pointed to people having more access to data and being able to make better choices, and the government having a better understanding of its own data and where healthcare dollars were being spent, as early indicators of the initiative's success. He was cautious about making any links to health outcomes, however. "Open data is not a miracle tool, and health outcomes are not easy to track," Scrollini said. "But [*A Tu Servicio*] can help correct inefficiencies in the healthcare system."

The initiative received international recognition for

the innovative way DATA Uruguay and the MSP had collaborated to make data available to the public in a useful way. In 2015, the OGP awarded *A Tu Servicio* first prize in its annual open government award ceremony.

As of 2018, the initiative looks to be sustainable. The MSP has funded the website through its own budget, and Scrollini estimated the total cost of the project to be less than US\$20,000 per year. *A Tu Servicio* continued to receive government support during an administration change in 2015, and the MSP has committed to supporting the platform through at least 2020.

Uruguay's *A Tu Servicio* project has important lessons for other countries interested in open data initiatives. First, it showed how simply making data available to the public was not sufficient to have a real impact. The MSP had made some data on healthcare providers available on its website for years, but it was not until the information was published in a more easy-to-understand format that citizens began using the data.

Second, it showed the benefits of government working in partnership with civil society. It was a political risk for the MSP to collaborate with DATA Uruguay on an equal footing, instead of a more traditional arrangement where the government would have more control over the process. The decision paid off, however. DATA Uruguay pushed the MSP to publish more data than it might otherwise have been comfortable doing, which potentially provided citizens with more relevant and useful information. The NGO was also more open to new ways of thinking, such as publicizing the initiative through social media, which may have resulted in a greater impact than if the MSP had embarked on the project alone.

An opportune platform to build the partnership, and the partners together defining shared objectives were two key elements to the success of *A Tu Servicio*.

Uruguay's engagement with the OGP created an opportunity for the government to collaborate with civil society in new ways. The government's commitment to the OGP ensured sustained interaction with civil society actors like DATA Uruguay. Further, the existence of AGESIC (the government agency that led the OGP engagement)

provided institutional support for collaboration. The *A Tu Servicio* initiative itself did not require high-level political support. Instead, senior officials allowed middle managers within the MSP to lead the process.

Developing shared objectives was critical to success. Though the MSP did not support DATA Uruguay's initial intervention in 2014, it did see that the NGO had similar goals to the ministry. DATA Uruguay also came to understand the intentions of the MSP, and was able to nudge ministry officials toward embracing open data. Both partners wanted to increase access to information and improve the national healthcare system. Despite not having a legal framework in place for the partnership, shared objectives and trust between the partners helped hold the partnership in place through the challenges they confronted. Neither partner could have implemented the initiative alone. The government needed civil society engagement to ensure relevance, and the NGO needed the government's institutional, technical, and financial resources.

Knowledge of the *A Tu Servicio* initiative quickly spread to new sectors and other countries. DATA

Uruguay collaborated with a Mexican NGO to develop another healthcare data website that aimed to improve service delivery in the Mexican state of Sonora. Scrollini said DATA Uruguay had also engaged with potential collaborators in Chile and Colombia to explore if similar websites to *A Tu Servicio* could work in those countries. As of 2018, the Latin America Open Data Initiative was supporting the secretary of health in Bogota, Colombia's capital, to replicate *A Tu Servicio* there.

Other government ministries in Uruguay also learned from the initiative. AGESIC used the example of *A Tu Servicio* to encourage other ministries and agencies to engage in open data initiatives. In 2017, DATA Uruguay began discussing with the Council for Secondary Education about the potential for an *A Tu Servicio*-style website for the education sector. The new collaborations within Uruguay and in other parts of Latin America were early indications of the potential to replicate the *A Tu Servicio* model in different sectors and in different countries around the world.

## Success Drivers

**Uruguay's** experience in making healthcare data more accessible to and useful for citizens reflects **three** of the five key dimensions for successful public sector innovation.

**Transparency** in healthcare performance data enabled citizens to make better choices about their healthcare. While the Ministry of Public Health (MSP) had collected data for several years, it was published in a format that made it difficult for citizens to access and understand. By partnering with DATA Uruguay, an NGO that advocated open data, the MSP was able to collect more data than before and present it in an open and transparent way for Uruguayan citizens. More eyes on the data made it easier to identify inaccuracies, inducing healthcare providers to give accurate and complete data. With more-accurate data available in an accessible format, citizens could make informed choices regarding their health plans.

**Incentives** also changed for healthcare companies as a result of increased transparency. Wide and easy availability of their performance information pushed them to improve their performance to compete for new customers.

**Technology**, particularly the simple web-based platform co-created by DATA Uruguay and the MSP, provided the mechanism to share the MSP's data with the public. Additional functions, such as a feedback form for citizens to report inaccurate or incomplete data, increased the usefulness of the website for both the public and the government. Partnering with the Uruguayan government's agency for information technology, e-governance, and open data provided additional support for the technology platform. DATA Uruguay also made use of new technology platforms, such as social media, to market the new website to Uruguayans.