

A study on “Efficiency augmentation of RTI operations applying information system tool with modern technology” in a tertiary care institute

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Abstract

Background: Information is the hidden blood that sustains political, social and business decisions³. Enactment of Right to Information Act (RTI) 2005 in Indian democratic setup has made government machinery more transparent, responsible and accountable. Though the Act specifies furnishing the information within stipulated time by different level of authorities, however, the fact that monitoring of dispersion and efficacy of chain, mechanism has not been developed by most of the organisations. This leads to violation of the Act and dissatisfaction amongst information seekers. The similar situation prevailed at a tertiary care hospital “Sanjay Gandhi Postgraduate Institute of Medical Sciences, Raebareilly Road, Lucknow. To overcome this problem dedicated arrangement was framed and “Central RTI Cell (CRC)” was created.

Objective: The objective of present study is to focus on the circumstances which led to creation of “Central RTI Cell (CRC)” and to highlight the outcome of establishing the cell in terms of changes which occurred in monitoring and efficiency.

Methodology: A Software eRTIMed was created by CRC. Individual application allotted one Unique Dispatch Number (UDN) number for future references. All requests for information under RTI Act made by seeker, reply of PIOs, Inter PIO Correspondences, appeals and any other activities related to RTI was entered and managed by CRC. It is also monitored regularly in terms of request/ correspondences. Regular feedback on flow of information, Difficulties faced by the PIOs were addressed by the CRC/PIO by means of inter office and monthly meetings. Thus the creation of CRC was focussed on monitoring and control over movement of application and dissemination of information.

Observation: Onward July 2015, all RTI Applications received by SGPGI are routed and distributed to PIOs through CRC by an Electronic Right to Information package software (eRTIMed Package) systems through a Unique Dispatch Number (UDN). Correspondences made by PIO to the Applicants are also made available to CRC. Regular feedback on flow of information, difficulties faced by the PIOs are given by the CRC/PIO through interoffice and monthly meeting. 6 months before inception of software (before July 2015), the pendency of RTI applications was 23 out of 191 (12.04%). But immediately after 6 months of inception, the pendency was reduced to 11 out of 363 applications (3.02%). Thus the efficiency augmentation was achieved to the tune of 9 % within 6 months. Thus the system gained about 10% improvement in efficiency in movement of reply.

Conclusion: The success of eRTIMed package software in terms of speedy disposal of RTI applications was remarkable as no application was found missing and eRTIMed package software provided all information at the click of a button by a UDN number. Decision to create “Central RTI Cell” at SGPGI has since been found to be effective and efficient. Its importance has been demonstrated in a very short time span of only 6 months.

Keywords: right to information act (RTI), governance, public information officer (PIO), public authority (PA), central RTI cell (CRC). eRTIMed

Introduction

The Right to Information Act, 2005 is a revolutionary legislation in the history of democratic India. The Act holds the unprecedented potential to transform governance and bring in accountability and transparency in the governance. The act became so popular that studies estimate that Indian citizen filed about 2 million requests for information under RTI Act during the first two and half years¹. It is also an instrument to herald participatory governance where citizens can become

active participants in the governance process rather than being mute spectators with little or no hope of demanding accountability from public Institutions. The Right to Information Act, 2005 (RTI Act 2005) ^[4] came into effect on October 12, 2005. This law empowered Indian citizens to seek data from public authorities thus making the government and its functionaries more accountable and responsible. There has been a constant effort to alter the mentality of the people in government, create infrastructure, build up novel processes

and build capability to present information under this Act. The RTI Act has been said to be India's first and probably the only law in the world that obligates governments to take up e-Governance as provided in Section 4(1-a)². This has resulted in implementation issues. The Right to Information Act, 2005 empowers all the citizens of India to question the system of decision making in the government. The act is applicable to the whole of India except the State of Jammu and Kashmir. The Act defines information in a very broad manner. It includes:

1. Any document, manuscript and file or inspection of the same/taking notes, extracts or certified copies of documents or records/certified samples of material/obtaining certified samples of material
2. Any, diskettes, floppies, tapes, video cassettes or any other electronic mode, microfilm, microfiche and facsimile copy of a document
3. Any reproduction of image or images embodied in such microfilm (whether enlarged or not); and
4. Any other material produced by a computer or any other device.

It prescribes the process for obtaining information and disposal of requests. The application under RTI can be submitted either in writing or electronically in English, Hindi or the official language of the area in which the application is being made, along with the prescribed fee to the Public Information Officer (PIO) or Assistant Public Information Officer (APIO).

1. Information is to be provided within 30 days (35 days if sent to APIO)
2. 48 hours where life or liberty is involved
3. The period can extend to 35 days where request is given to the Assistant PIO

However, the time taken for intimation and payment of fees is excluded from the above time frame. If no action is taken within the stipulated time, it is deemed as a refusal. It constructs a two-tier mechanism for appeal. The first appeal lies to an officer within the organisation who is senior in rank to the PIO. The second appeal lies to the Information Commission.

Assistance Provided by PIOs: Under section 5 (3) of the RTI Act., it is expected from the PIO to assist citizens in drafting RTI applications. It was noticed that quite a few applicants complained about the quality of data supplied by the PIOs. It was later discovered that there was an absence of a computerized monitoring system of RTI. eRTImed Software is particularly customized for the monitoring and providing assistance in the disbursement of RTI application received and help to PIOs/CPIOs/APs statistically to show the replied/yet to be replied applicant's details along with the past applicants' data dealt with them in Govt./Semi Govt./Corporations/Institutions especially in Medical Institutions/ Hospitals in India.

Prevailing System of RTI Application Disposal at SGPGIMS

Execution

The Sanjay Gandhi PGI of Medical Sciences, Lucknow is a reputed tertiary care hospital in North India has earmarked 10 PIOs, 01 Appellate Authority for Implementation of RTI Act

based on the different departments available as mentioned beneath:

1. PIO (Administration)
2. PIO (Hospital)
3. PIO (Academic)
4. PIO (Finance)
5. PIO (Material Management)
6. PIO (Hospital Revolving Fund)
7. PIO (Investigation Revolving Fund)
8. PIO (Estate)
9. PIO (Engineering)
10. PIO (General)

a) Receiving

Previously, there used to be three channels of receiving the RTI Applications.

1. At the level of Director Office.
2. At the level of PIO
3. At the level of Sr. PIO.

b) Processing

RTI Applications received at Director Office, were marked not merely to the PIO related to the concerned subject, but also too many other administrative officers assumed by the Office of Director to be the steward of the relevant Information. This went to a considerable quantity of confusion between the receivers of the marked copies as regards to procedural formalities leading to delay in providing the information to the applier. In case any RTI application was received at the level of PIO, such applications were scrutinized by the custodian of the information for seeking the information. In such cases a letter and reminder (if needed) is sent by the PIO and dispatch to the custodian of the Information. Custodian of the information then send back the information to the PIO and PIO finally to the applier.

If the RTI application received at the level of Senior PIO, it was once more marked to the concerned PIO and procedure start as mentioned in the above para.

c) Dessimination

All the information received by all 3 channels, processes at the level of PIO by seeking the desired information from the custodian of Information and if not picked up by sending him reminders, finally send to the applicant probably within the time limit as provided in RTI Act.

Practical Problems faced by SGPGI in the Prevailed System

1. The applications addressed marked to several PIOs and officers created confusion among them in regards as to who would be the appropriate authority to furnish the required information.
2. Adhering to time bound reply to the applicant was not possible due to the aforementioned reason.
3. This also resulted in a sudden increase in the number of cases being escalated to the Appellate Authority & State Information Commission.
4. No verification and control level was available to supervise the proper movement of information from PIO to the applicant within the stipulated period as mentioned in

RTI Act &

Some-time reply to the same RTI Application received by a different officer at a different point of origin which creates confusion.

5. Responsibility cannot be fixed for PIO as more than one officer were having the responsibility.
6. If Information was not furnished by the Custodian of the Information due to lack of monitoring, PIO could only send reminders to them.
7. Single application deserving information from different PIOs had worst conditions and it was like no man's land.
8. A great deal of manpower and stationary were being wasted by this system and even after that every PIO was responsible to create and preserve the record of the existing and old application manually.

Solution (Problem Solving)

In view of the above, to overcome the practical difficulties, The present Director and HOD Hospital Administration of SGPGI undertook an initiative to implement a fool proof system with a centralized approach which can channel all the agreements made by the PIO at a cardinal office. The Nodal Agency that created was named "Central RTI Cell (CRC)" on 31.07.2015 and was tasked with the following objectives.

1. To have a track of all applications centrally received from applicants by following line of authority.
2. To keep a constant monitoring on flow of information from PIO to applicants.
3. To increase the efficiency of the flow management for information.
4. To prevent confusion, loss of application and fix the accountability.

Observations

About the Sanjay Gandhi Post Graduate Institute of Medical Sciences (SGPGIMS) Lucknow, U.P.

"Sanjay Gandhi Post Graduate Institute of Medical Sciences, Lucknow" was established by the state of Uttar Pradesh (India) as a centre of excellence for providing medical care, teaching and research of high order. It was chartered to function as university under state Act. The Institute aims to provide advance specialized medical care such as is available only at few centres in the country and nowhere else in the state.

The hospital has 1003 beds, 26 well equipped specialty operation rooms, 56 beds intensive care unit and a 56 bedded dialysis unit. For ambulatory care there is provision of specialty clinics, as well as an established Emergency Medical Care Receiving Station.

The six super specialties which imitated in the first phase were:

1. Neuro Sciences.
2. Cardiac Sciences.
3. Renal Sciences.
4. Gastroenterology.
5. Endocrinology.
6. Genetics and Immunology.

Latest inclusion

Following specialties have been included during the last 05 years

1. Critical Care Medicine
2. Hematology
3. Hospital administration
4. Plastic surgery
5. Pulmonary medicine
6. Pediatric surgery
7. Maternal and Reproductive med.
8. Telemedicine & bioinformatics

New courses started

1. Post-Doctoral Certificate Course (PDCC)
2. B.Sc. Nursing (Honour)
3. Master in Hospital Administration
4. Diploma in nursing informatics
5. Diploma in hospital information system
6. Diploma in telemedicine
7. Diploma in public health information system
8. Diploma in library information system

Each specialty is being developed as a comprehensive centre combining the discipline of medicine, surgery and basic sciences. In addition, there are departments of Pathology, Microbiology, Radio diagnosis, Nuclear Medicine, Radiotherapy and Anaesthesiology, Transfusion Medicine to provide necessary support to all the specialties.

The Institute has been offering Ph.D., M.Ch., DM and MD, Master in Hospital Administration degrees and Diplomas in respective fields. The Institute is having equipped ultramodern CSSD, Laundry and Kitchen Services. With in short period of 10 years it has made its mark within the medical & education climate of the country.

About CRC

Central RTI Cell was created Vide office order no. PGI/DC/DIR/9389/2015 dated 31.07.2015 by the Director, SGPGI in continuation of the office order no. PGI/DC/DIR/9220/2015 dated 17.04.2015 RSD No. 1485/B.

Office bearers

1. Prof. Hem Chandra, Nodal Officer, CRC
2. Rajesh Kumar Tiwari, Coordinator, CRC

Operation of CRC

Co-ordinator of the CRC under the guidance of Nodal Officer, CRC started working on the operational part of the CRC. eRTIMed software was designed & customised by the CRC as per need of SGPGI. Each and every step and module involve in RTI Process was identified. It has since been demonstrated that this system takes just 15 minutes to feed and scan the RTI application which is used for the purpose of forwarding the application to the concerned PIO using system software/ manually through dispatch. In case of loss of original application, a soft data of the application and fee is available in the record of eRTIMed Package and can be immediately transferred to the PIOs. This package is observed to be best for the purpose of maintaining the RTI Record where no. of PIOs are more than one. Tracing of any information from receiving the application to the disposal of RTI application is stored in a single system hence Institute can have the access and control on each and every correspondence made by applicant, PIOs and Appellate Authority.

Flow Chart of Operations of CRC

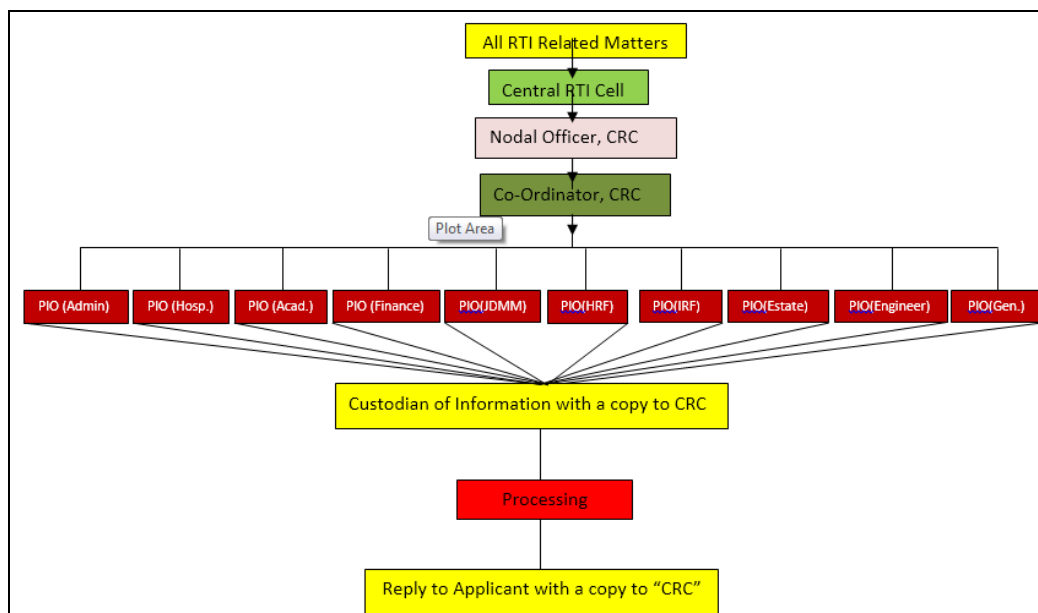


Fig 1: Flow Chart of Operations of CRC

How eRTIMed Works

Log-in to the Software using password and enter into the main screen of the Software, where you can choose the option as mentioned below:

1. Application under RTI (PIO wise List)
2. New RTI Application Register (Form 3- Inverse Chrono Order)
3. RTI UDN Register (Inverse Chronological Order)
4. RTI Application to expedite.
5. Insert Fresh RTI Application.
6. Monthly Extract.
7. Progress Report of Cases (3 Month Summary)
8. RTI Applicants in this Office (Alpha Order)
9. Missing Dispatch Numbers list.
10. RTI Dispatch Register (Inverse Chrono Order)
11. Graph of PIOs Cases
12. RTI Applications in this office (Alphabetical list)
13. Search

PIO Wise applicant List

If user clicks on this option in the main menu on the screen. A PIO Wise complete list of all applicant appears on the cover. It is useful to knowing that which PIO has received how many application in the month/year.

RTI UDN Register

UDN stands for "Unique Dispatch Number". eRTIMed system software works on the UDN. This is a unique number which is used automatically by the system software (eRTIMed) and is traceable for any PIO in their log-in. If UDN number is known, it becomes very easy to delineate all the documents referred to the RTI Application e.g. Original RTI Application, Reply from PIOs, Appellate Decisions and much more info about the operation of obtaining in house information by the PIOs. This UDN Register is basically the

electronic despatch register.

RTI Applications to Expedite

This list of applicant is very useful as it indicate the remaining time with in which one has to reply to the applicant. It also remind the PIOs if they have not replied to the RTI Application in 30 days.

Insert Fresh RTI Application

Central RTI Cell after receiving the RTI application, this option is used for inserting the fresh RTI application. It accepts many selections like, Name of Applicant, Subject of Application and 20 more options necessary to be satiated.

Monthly Extract

This selection is used to view the record of applications received within a particular month and also PIO wise.

RTI Applications in this Office

This selection is used to view all the applications in alphabetical order received at CRC.

Search

This selection is applied to search any application using their applicant name, address, mobile number, zip code or a portion of the application.

Observations

The CRC started functioning through eRTIMed software w.e.f. 1.8.2015.

Till date, 363 applications have been received (as on 01.01.2016) with CRC. Each application received in the CIC is classified according to information sought RTI Application was distributed to the concerned PIO within 0-2 working days after filtering, scanning and feeding into the eRTIMed

Software with a UDN number. During the process no loss of applications was noted and 82.37% (299 out of 360) of applications were disposed with in the time limit of 30 days by the PIOs concerned. It was also observed that all for information were acted upon by the PIO (Hospital) and PIO (Engineering) while PIO (Estate), PIO (HRF) & PIO (IRF) stood IInd by attempting 99% of accuracy while responding quickly on the application received after the founding of the Central RTI Cell. It was likewise taken note that maximum number of pendency of RTI Cases which were observed

before the creation of CRC and which has since been trimmed down to nil now after the creation of CRC. All PIOs are co-operating with the Central RTI Cell (CRC) and mailing a copy of each correspondence to the CRC for proper maintenance of the data in the CRC Server. A start-up of the Monthly meeting of the Nodal Officer, CRC with the PIOs created a positive change in the manner of Disposal of RTI Cases by the PIOs. In that respect there was no confusion and overlapping observed during the functioning of the CRC.

Details of Cases received 6 month before the implementation of eRTIMed Software.

Table 1

Serial Number	PIO	Number of cases received during 6 months (Feb 2015 – July 2015)
1	IRF	0
2	HRF	04
3	Estate	0
4	General	0
5	Academic	39
6	Hospital	65
7	Administration	59
8	Mm (Material Management)	0
9	Finance	12
10	Engineering	12
	Total Received In 6 Months	191

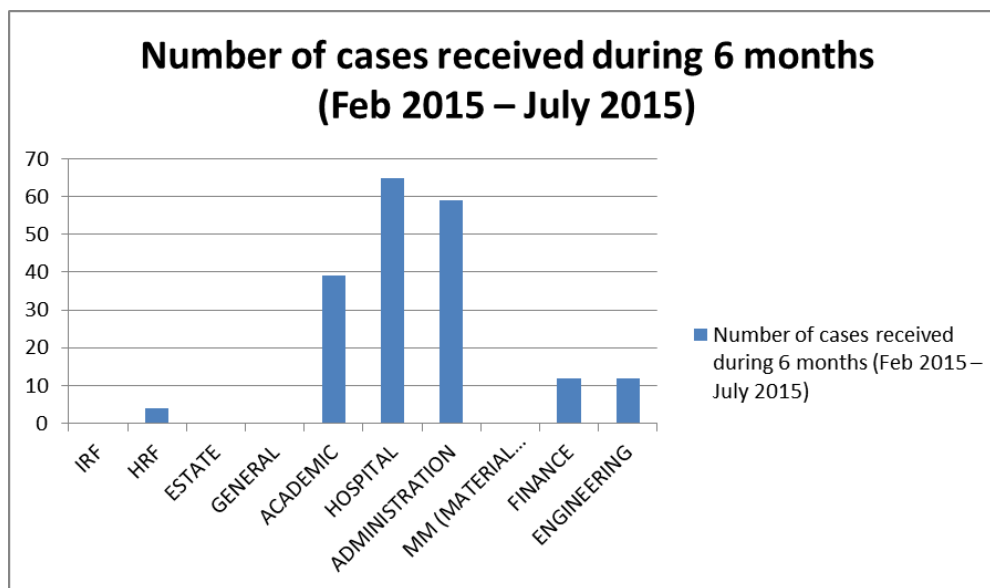


Fig 2

Table shows that PIO(Hospital) has maximum number of cases(65) following PIO(Admn) cases (59) & PIO (Academic) cases (39)

Table 2: Detail of cases received 6 month before the implementation of eRTIMed software. Details of pending cases.

Serial Number	Pio	Number Of Cases Received During 6 Months (Feb 2015 – July 2015)	Number Of Cases Pending After 30 Days During Feb 2015- July 2015 (6 Months)	Pending Percentage
1	IRF	0	0	0
2	Hrf	04	0	0
3	Estate	0	0	0
4	General	0	0	0
5	Academic	39	5	12.82

6	Hospital	65	9	13.85
7	Administration	59	7	11.86
8	Mm (Material Management)	0	0	0
9	Finance	12	2	16.67
10	Engineering	12	0	0
	Total	191	23	12.04

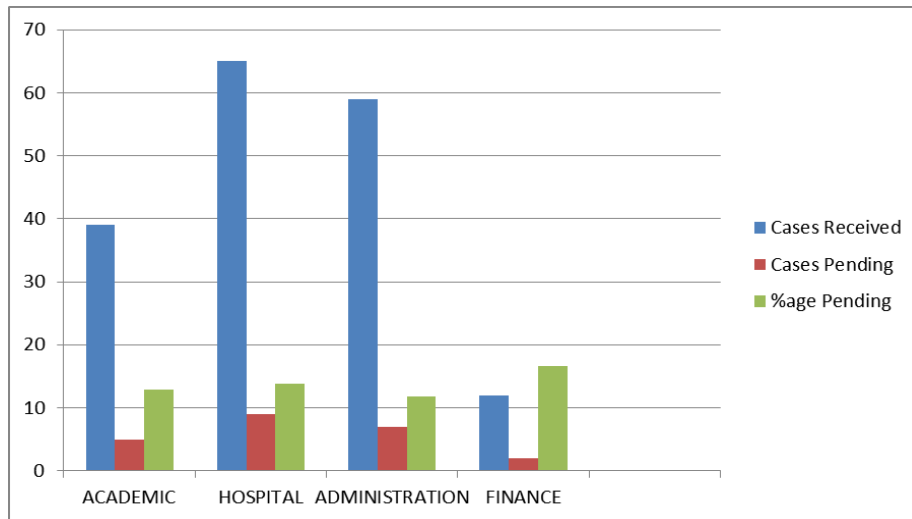


Fig 3

Table shows that maximum number of pending %age was in PIO (Finance) following Hospital and Academic

Table 3: Detail of Cases received 6 month after the implementation of eRTIMed software.

Serial Number	PIO	Number of cases received during 6 months (Aug 2015 – Jan 2016)
1	IRF	1
2	HRF	12
3	Estate	1
4	General	16
5	Academic	54
6	Hospital	163
7	Administration	70
8	Mm (Material Management)	13
9	Finance	15
10	Engineering	18
	Total Received	363

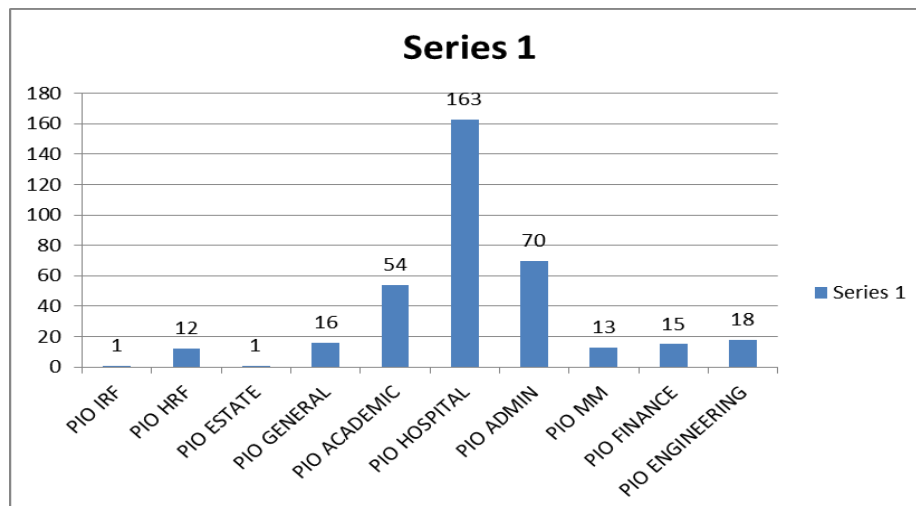


Fig 4

Table shows that during this period maximum number of received cases were from Hospital (163) following Admin (70) and Academic (54).

Table 4: Detail of cases pending during six month after the implementation of eRTIMed software.

Serial Number	PIO	Number of cases received during 6 months (Aug 2015 – Jan 2016)	Number of cases Pending during 6 months (01 Aug 2015 – 31 Jan 2016)	Pending Percent
1	IRF	1	0	0
2	HRF	12	0	0
3	Estate	1	0	0
4	General	16	0	0
5	Academic	54	3	5.56
6	Hospital	163	5	3.07
7	Administration	70	3	4.29
8	Mm (M M)	13	0	0
9	Finance	15	0	0
10	Engineering	18	0	0
	Total Pending	363	11	3.03

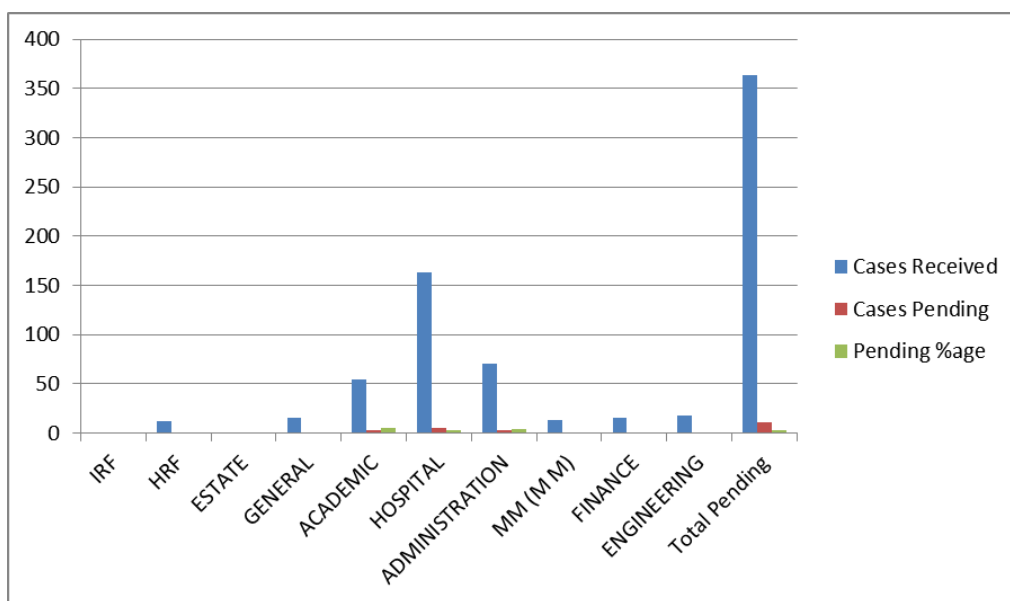


Fig 5

Table 4: Comparison Before and after 6 month after Creation of CRC

Period	Total No. Of Cases	Cases pending as per information received by PIOs	Pending Percent
6 Months Before the Creation of CRC	191	23	12.04
6 Months After the Creation of CRC	363	11	03.03

Conclusion

This system eRTIMed of CRC was developed as a consequence of failure of dissemination of information to seekers within assigned time. Some of the applications were also lost during the transit between departments and great confusion prevailed due to overlapping jurisdiction of PIOs. The eRTIMed within the period of 6 months has been established as an efficient alternative in terms of dissemination of information and overcoming all problems which were associated with traditional system. This electronic software has revolutionised the processing of RTI Application within the established time frame and proved that compliance to this software improved the overall efficiency of PIOs as well as record keeping. The eRTIMed software was developed to tackle these deficiencies as well as provide factual data in real

time to monitor the progress and movement of applications within the organisation. Although the exact figure for the number of applications processed prior to the implementation of the eRTIMed software package could not be ascertained, however the delay could be extrapolated from the fact that constant notices of delay were received from the RTI Commissioner in this regard. Since the inception of CRC and implementation of Software Package, among a total of 363 RTI applications received, a sum total no. of 299 applications were processed within the prescribed time limit of 30 days; and 53 cases were replied between 30 - 60 days and remaining 11 cases were yet to be replied but were within the time limit. Thus the system gained about 10% improvement in efficiency in movement of reply. It will further improve in future. The success of this project could be attributed not only to the

implementation of this software package but also to the untiring efforts of the staff of CRC who followed the progress made with the office of the Chief Information Commissioner Office at periodic intervals. This has resulted in an impeccable operational record of all RTI related process within the Institute. This unique software operation inaugural event has been fixed for 6 August 2016, when the Chief Information Commissioner of UP will formally inaugurate and launch it. This soft will be available for use of others.

Recommendations

The eRTIMed software needs to be developed by all large Institutions where bulk of information is generated and sought. Updation of software is required. Regular Continuous monitoring is required for further improvement. RTI Seminars/ Conference may be organised to demonstrate the eRTIMed Software and discuss the possibility to adopt it to local need.

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