

PROJECT FINAL EVALUATION REPORT

MOBILE PHONE SCORECARDS – AN INNOVATIVE CITIZEN FEEDBACK MECHANISM VIETNAM (M-SCORE)

1/2020

The report was completed within the framework of the Oxfam's M-Score Project.

The report was prepared by the external experts from T&C Consulting

The views and recommendations expressed are those of the authors and not necessarily reflect that of Oxfam or Vietnam's authorities.

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Project intervention form

Project title	An Innovative citizen feedback mechanism – M-Score Vietnam					
Partner organizations	 Oxfam in Vietnam Quang Binh Provincial People's Council Quang Tri Provincial People's Council Vietnam Initiative 					
Geographical coverage:	Quang Binh, Quang Tri and 60 provincial general hospitals nationwide					
Project lifespan	2017-2019					
Project budget (2017-2019)	EUR 500,000					
Specific objective	Improved quality of public administration services through applying an innovative citizen feedback mechanism on public administration services quality (M-Score) at provincial and national levels					
Expected results	 Result 1: Citizens in the province have improved awareness about their rights to participation and increase monitoring and feedback on public administration service quality, holding service providers and the local government accountable for quality services. Result 2: Local governments and public administration service providers in 2 provinces (Quang Binh, Quang Tri) respond to citizen feedback collected through M-Score. Result 3: National authorities commit to adopt the innovative approach of M-Score in public administration reform programmes and the E-government system. 					

Abbreviations

Арр	Mobile application
DDCI	Department and District Competitiveness Index
DHC	District Health Center
DoF	Department of Health
DOHA	Department of Home Affairs
ETR	End-Term Review
FGD	Focus Group Discussion
ICT	Information and Communication Technology
M&E	Monitoring and Evaluation
МоН	Ministry of Health
M-Score	An innovative citizen feedback mechanism – M-Score Vietnam
OOG	Office of Government
OSS	One-Stop Shop
PAPI	Public Administration Performance Index
PAR Index	Public Administration Reform Index
PAR	Public Administration Reform
PAR-MP	Master Program on Public Administration Reform
PASC	Public Administration Service Center
PCI	Provincial competitiveness index
PGH	Provincial General Hospital
PMU	Project Management Unit
PPC	Provincial People's Council
PSDU	Public Service Delivery Unit
PSI	Patient's satisfaction index
RTA	Real-time Analysis company
SIPAS	Satisfaction Index of Public Administrative Services
T&C Consulting	Transformation and Change Management Consulting Company
VNI	Vietnam Initiatives

Executive summary

M-Score is a scorecard tool, which was developed by Oxfam and Vietnam Initiatives (VNI) in 2014, for public administration services rating. The project has been implemented to support local governments to improve public administration services by providing real-time information on citizen's experiences of public services. From 2017 to 2019, the overall goal of the project is to improve the quality of public administration services at both the central and provincial levels via recording citizen's feedbacks. It aims to achieve three key results:

Result 1: Citizens in the province have improved awareness about their rights to participation and increase monitoring and feedback on public service quality, holding service providers and the local government accountable for quality services.

Result 2: Local governments and public administration service providers in 2 provinces (Quang Binh, Quang Tri) respond to citizen feedback collected through M-Score.

Result 3: Central government commits to adopting the innovative approach of M-Score in public administration reform (PAR) programs and the E-government system

During the years 2017-2019, the project was implemented at both the national and subnational levels. At the national level, the project collaborated with the Office of the Government (OOG) to develop a Decree on public administration procedures in one-stop shops (OSS) and inter-sectional OSS, and with the Department of Health Administration (Ministry of Health - MoH) to pilot scoring Patient Satisfaction Index (PSI) at 60 hospitals nationwide. At the subnational level, being hosted by the Provincial People's Councils (PPCs), the project concentrates on two types of public service, namely public administration services and health care service, which are most frequently used by local citizens. Scoring quality of public administration services was implemented in Quang Binh and Quang Tri at 7 and 9 district OSSs respectively. With regards to health service, the project was implemented at two provincial general hospitals (PGHs) in Quang Binh, namely Dong Hoi and North Quang Binh and Le Thuy District hospital, and nine (DHCs) in Quang Tri.

Citizens can score these two public services by using applications installed on mobile phones or tablets that are set up at service delivery units or phoning up. A real-time agency (RTA) was selected to provide technical solutions for the project.

The project was implemented in the context of economic development in which government has paid more and more attention on citizen's needs while people's capacity and monitoring have been enhanced. Therefore, government agencies are under more pressure of holding higher accountability to citizens, who are clients of public service delivery units (PSDU) in general and public administration service delivery units in particular, as well as of caring about their satisfaction.

The End-Term Review (ETR) of the project has bene conducted based on standard evaluation criteria. The Report concluded that,

 Relevance. The project was timely implemented to support the Government' public administration reform, building e-Government as an effort to improve the effectiveness and efficiency of public governance from central to local levels. Specifically,

- o The theory of change, which was implied in the project's logical framework, is highly relevant to PAR national strategic priorities, including promoting grassroots democracy and citizens' participation, taking advantages of technology revolution to develop e-Government.
- o The project's interventions meet the needs of key stakeholders, including (i) citizens, which are also clients of PSDUs; (ii) service providers (including PGHs, DHCs, provincial public administration service centers (PASCs), and district OSSs); (iii) local government agencies (who are responsible for receiving citizen's feedbacks, making concrete policy actions to improve quality of public services in alignment with those feedbacks); (iv) the central government (who commits to mainstream practices and experiences from Mscore project into other PAR and e-Government development programs); and (v) public media (including central and local television, radio, and newspaper agencies involved in public awareness raising campaigns for the project).
- Effectiveness. Citizens gradually exercise their rights to monitor and evaluate public service quality by using the M-score tools. Local agencies (local assemblies, line agencies and PSDUs) receive and actively use those feedbacks to improve their roles of overseeing, supervising, and enhancing service quality.
- Efficiency. Concerning output efficiency, the project's approach and tools are good supplements to other indicators on PAR effectiveness, which are widely applied in provincial level (i.e. PAR, PCI, PAPI)¹ or PSI introduced by the MoH. Citizens expressed their positive perception over M-score tools as user-friendly instruments.
 - The project has utilized its funding effectively, given its disbursement ratio of almost 100% and flexible adjustments among the budget lines to achieve the project's objectives. Funding has been diverted from management to operation costs. The employment of M-score tools, which is developed on a digital platform, is more cost-saving than the traditional survey approach. Moreover, since technical operation of the project is managed by an independent agency, who is in charge of data collection and analysis, and result reporting, information was provided in high quality, timely, and reliable manner. When citizens' willingness to judge increases, passive (and usually costly) rating tools will be gradually alternated by more proactive ones and the cost of getting citizens' feedbacks will be substantially reduced.
- Impact. Evident improvements in the quality of public services have been observed at two beneficiary provinces. In some extent, higher service quality has positive correlation with

¹ The PAR Index is an internal government tool and measures provincial efforts in realising of the Master PAR

programme 2011-2020. Government-citizen interaction is reflected in the indicators of communication of PAR; information of administrative services and results of the service application processing on different channels, including posting at one stop shops (OSS) and on the authorities' websites; administrative service delivery at OSS and online; collection of and response to people's reports and proposals; satisfaction index of public administration services (SIPAS)

The PAPI index is a public tool and generates information for the improvement of local government's performance in meeting their citizens' needs. PAPI contains 8 dimensions, 28 sub-dimensions, more than 120 indicators, and more than 550 questions about Viet Nam's policy matters covering the dimensions: 1. Participation at Local levels 2. Transparency in Local Decision-making 3. Vertical Accountability Towards Citizens 4. Control of corruption in the public sector 5. Public Administrative Procedures 6. Public Service Delivery 7. Environmental Governance 8. E-Governance.

improvements in PAPI scores. A significant percentage of survey respondents expressed their trust on the M-score tools, and the responsiveness and actions of local government. The project's results have attracted other provinces and cities such as Dong Nai, Ho Chi Minh City, and Quang Ninh, to learn and adopt similar tools. At the central level, the project made a remarkable contribution to institutionalization effort when seven out of ten recommendations from the project were included in the government's Decree 61.

- Sustainability. Although it might be too early to assess the project's sustainability, evidence on the project sustainability, at least in medium term, is available. Long-term sustainability requires stronger institutionalization effort via issuance of a legal binding documents at the local level regarding the citizens' feedback gathering. Specifically,
 - Citizens and public servants expressed their willingness to use the M-score tools in their daily work.
 - PPCs developed sustaining schemes and committed certain amount of funding for continuing these tools in the next three years (2019-2021).
 - Many PSDUs (i.e. hospitals) are willing to use their revenue to share maintenance costs with the PPCs.
 - Many provinces pioneering in PAR have adopted and scaled up M-score utilization to improve their business environment and participation of local citizens.
 - The central government strongly committed with administrative procedure simplification and construction of e-Government. The Decree No. 61 and tools to measure client's satisfaction (including those introduced by the M-score project) are initial foundation for building a government-as-a-whole e-system.

The M-score tools are 'gender neutral' vehicles that facilitate women's voices. There is also high potentiality to scale up adaptation of the M-score tools to other types of services and/or socially sensitive matters.

The report also points out some limitations on the project implementation, namely: (i) a regular dialogue between public service providers and citizens on the extent to incorporate feedbacks of the later into the former's responses should be routinized; (ii) the satisfaction measurement tools should be continuously improved, updated, and adjusted to cope with the constantly changing requirement of PAR program at the localities; (iii) the tools should be communicated by mass media to citizens in more creative and interesting fashion; (iv) the participation of local mass organizations is a vital facilitator for citizen participation, especially when the M-score applications are expanded to other sensitively social issues; (v) the local authorities' determination for legalization, allocation of budget and personnel, is a determinant on the project's sustainability and impact. Currently, PPCs demonstrated their strong medium-term commitment to the project. However, whether the project will be maintained in the long-term largely depends on their decisions.

Technically, the M-score is a trust-worthy tool and expandable to other tools (i.e. PAPI, Department and District Competitiveness Index [DDCI]², etc.) without any technique constraint.

² DDCI is a set of indicators evaluating governance capacity of Departments, branches, and local units under provinces. Based on investigating the satisfaction of investors, enterprises, individual business household, cooperative units that are investing, manufacturing, and doing business in the province, the DDCI survey suggests solutions to improve the

There are three options to expand M-score, namely: (i) hiring RTA as a sole agent providing technical solutions; (ii) hiring technical platform from RTA while data analysis and evaluation was made by local state administration agencies; and (iii) requesting a tailor-made technical solution similar to RTA from local high-tech firms. Each solution has pros and cons and largely depends on local capacity and resources.

Five good practices can be withdrawn from the project, namely: (i) choosing PPCs as the right local partner; (ii) adopting flexible approach to spread out M-score tools at the local level; (iii) the participation of an independent monitoring agency (RTA); (iv) holding a positive and constructive view in utilizing citizen's reflections; and (v) highlighting the role of mass media since the beginning of the project.

The ETR mission has proposed a dual strategy, which includes both short-term and long-term solutions, to reinforce and expand the project results. Regarding the short-term, key existing tools to collect citizen's feedbacks (post-transaction phoning up and tablet) should be maintained and improved to be simpler and more user-friendly. Over time, they should be replaced by other feedback mechanism via smartphone applications. Moreover, a dialogue and re-feedback mechanism between PSDUs as service providers and citizens as service clients should be developed.

In long-term, use of citizen's feedback channels as introduced by the project should be legitimized to serve as basis for rating and ranking local PSDUs. A concrete plan to shift from using passive scoring tools to more proactive ones, towards using an app on mobile phone and/or the provincial public service portal should be developed. Research on possibility to scale up adaptation of the M-score tools to other services and socially sensitive affairs should be conducted also.

annual Provincial Competitiveness Index (PCI) and to overcome the current limitations and shortcomings of surveyed sectors.

Part I. An overview of the project

1. Introduction

M-Score is a scorecard tool, which was developed by Oxfam and Vietnam Initiatives (VNI) in 2014, to score public administration services. The project has been implemented to support local governments to improve public administration services by providing real-time information on citizen's experiences of public services. Two most prevalent public services are selected, namely public administration service and health care service. The project offers citizens service evaluation tools developed on the mobile app, hotline, tablet set up at service provider institutions, and post-survey via phone.

After three years of implementation, Oxfam Vietnam selected T&C Consulting to conduct an ETR to assess project performance, accomplishments of project objectives as well as the possibility of expanding this tool to other public services and provinces nation-wide.

This report consists of three parts. The first one, an Overview of the Project, summarizes the project context, project managerial structure, and evaluation methods employed in this ETR. The second part, Evaluation of Project Results, assesses project performance in accordance with OECD standard criteria provided for project evaluation and achievements in three key project results. The technical aspect of the M-score tool is also reviewed. The last part, conclusions and recommendations, develops a strategy to reinforce and scaling-up the project initiative in both the short- and long-term. Important lessons learnt are also presented in different parts of this ETR report.

This study would never have happened without open, frank, and constructive discussions with all project stakeholders, for whom the ETR mission much appreciates. We would like to express our sincere thanks to the key contact persons at provinces, RTA as the unique technical assistance agent for data collection and analysis, staff members of Oxfam in Vietnam, and VNI for providing us valuable information on the context and implementation of the project and arranging meetings, interviews, round-table discussions between the ETR mission and relevant stakeholders. A special thanks goes to Oxfam Vietnam for the logistical support.

2. Background and Context of the Project

2.1. The project design

Preparation for the project implementation, including selection of project sites, approaches, and technical solution providers, was back to 2014. The period of 2017-2019 is the intensive implementation of project activities in all aspects to support citizens' feedback on public services. In terms of scope, the project was expanded from public administration services to health care services by surveying patient's satisfaction in hospitals nationwide. In terms of geographical structure, the project started with piloting citizens' scoring on public administration services provided at the district level, and then scaled up to those provided at the provincial level and influenced policymaking process at the central level. Between 2017 and 2019, the overall goal of the project is to improve the quality of public administration services at both the central and provincial levels through applying an innovative citizen feedback mechanism on public service quality. The goal then has been translated into three key result areas:

Result 1: Citizens in the province have improved awareness about their rights to participation and increase monitoring and feedback on public service quality, holding service providers and the local government accountable for quality services.

Result 2: Local governments and public administration service providers in 2 provinces (Quang Binh, Quang Tri) respond to citizen feedback collected through M-Score.

Result 3: National authorities commit to adopting the innovative approach of M-Score in public administration reform programs and the E-government system

In Quang Tri, the implementation of M-score in four years has improved public service quality and increased citizen's satisfaction on these services. To sustain the positive results, Quang Tri PPC adopted the Resolution No. 103/NQ-HDND dated May 2018 to allocate almost VND 2.8 billion from the provincial budget to maintain the M-score tool for public administration services at nine OSSs for the period of 2018-2020. The PPC is also drafting a scheme to provide similar financial support for maintaining the M-score tool and citizen feedback mechanism on health care services at the PGHs and DHCs. In Quang Binh, the success of project has persuaded its PPC to develop a similar scheme to that of Quang Tri to maintain the citizen feedback mechanism for both public administration service and health care service in the same period.

At the national level, MoH was obviously aware of limitations of the current approach to measure patient satisfaction on health care services. In associating with Vietnam Initiative's (VNI) efforts, the MoH agreed to carry out a patient satisfaction survey using the M-score methodology for the first time, namely Patient Satisfaction Index (PSI). PSI not only ranks the quality of different aspects within a public hospital but also ranks hospitals nation-wide. The number of hospitals participating in this initiative has been increased from 27 in 2017 to 60 in 2018 and the survey results have made impactful changed.

During the years 2017-2018, Oxfam in Vietnam made great effort to closely work with the OOG to submit ten recommendations on monitoring OSS performance based on learnt lessons and experiences from the M-score project. Seven out of ten recommendations were adopted and incorporated in Decree No. 61/2018/ND-CP of the Government on Implementing Administrative Procedures in OSSs and Inter-sectional OSSs and Circular 01/2018/TT-VPCP providing detailed guidance for implementing the Decree.

Achievement of the project implementation is shown in Table 1..

Table 1. Achievements of the M-score project during the period of 2017-2019

	Quang Tri				Qua	Quang Binh			МоН	
Activities		Date of	commencen	Date of commencement Year (Po				Year (Post-		
	Location	Post- service phoning	Setting up tablets	Арр	Location	Post- service phoning	Setting up tablets	service phoning)	Location	
Public administration service at the district level	OSSs of 9 districts and cities	2014	7/the period of 2017	2019	OSSs of 7 districts and cities	1/2016	2/2018			

PGHs	PGHs and 9 DHCs	8/2017	3/2017 (a PGH and 3 DCHs)	PGHs in Dong Hoi, Bac Quang Binh, Le Thuy	9/2018	2017	29 hospitals at 21 provinces
		2	2019 (plus 6 DHCs)			2018	60 hospitals at 23 provinces
Provincial PASC	Provincial PASCs	8/2019		Provincial PASCs	2/2019		

2.2. Project managerial structure

PPC was selected as the project's hosting partner in province to undertake Result 1 and 2. The Project Management Unit (PMU) generally includes the PPC leaders and staff members, and representatives of relevant line Departments including Department of Home Affairs (DOHA), Department of Health (DoH). PPC is in charge of overseeing performance of public agencies, including both line agencies and PSDUs in the province. This managerial structure is highly relevant to project operation.

In each line agency (e.g. DOHA, DoH) and PSDU (PASC, OSS, PGH, and DHC), a sub-PMU was established to secure smooth data collection and report receival as well as to provide supervisors advices on feedback results and proposed corrective actions.

Furthermore, the project collaborated with national partners such as VNI and MoH in conducting PSI survey and with the OOG in drafting Decree No. 61 of the Government on Administration Procedure Processing in OSSs and inter-sectional OSSs (hereinafter called as Decree No. 61). For the independent component of the M-score project as conducting PSI survey, VNI acted as a key implementer in association with the MoH.

Oxfam in Vietnam worked as the global management unit that providing technical assistance and performing M&E function. Moreover, Oxfam is a hub for result gathering and lesson learning from pilot implementations in two provinces of Quang Binh and Quang Tri. In addition, Oxfam also promoted result sharing and dissemination across provinces and services.

2.3. Background

Citizen participation in monitoring and providing feedbacks on public service quality has been a great concern of many international organizations. It is also a crucial factor contributing to sustainable development. In Vietnam, citizen feedback on public service quality that they had experienced also imply exercising citizen right to participate, via which the social cohesion and public trust in government are reinforced, and accountability of state agencies is strengthened.

In 2001, the Prime Minister approved the Comprehensive the framework for the Master Program on Public Administration Reform (PAR-MP) for the Period 2001-2010. This PAR-MP targets four key reform areas: *institutional reform; organisational reform; capacity development of cadres and civil servants; and public finance reform.* Based on the experiences if this first PAR-MP, on 8 November 2011, with the Resolution 30c/NQ-CP, the government announced the current PAR-MP 2011-2020. In addition to the four pillars of PAR as selected in the first PAR-MP, this second PAR-MP has two more pillars: *simplification of administrative procedures and modernisation of the*

public sector. The intervention of M-score project directly focused on these two pillars, from which the project can influence other pillars because simplification of administrative procedures and modernization of the public sector have a close link to promotion of citizen participation and increase in their satisfaction on public service quality.

The project was implemented in the context that there are increasing demand from citizens asking the government and PSDUs to listen more and respond timely to citizens' needs and expectations.

Firstly, economic development has forced the government to be more responsive to citizens' demand. In the last three decades, Vietnam has recorded fast, stable, and inclusive development since Doi Moi (1986), emerging from being one of the poorest countries in the world to a dynamic middle-income country since 2009. As a result, people demand for higher quantity and quality of provided products and services, including public services.

Secondly, when higher demand for better service emerged, citizens have a greater need to expressing the demand to the government. The blooming development of information and communication technology (ICT) has timely responded to these needs by providing more effective interactive modalities between the state and citizens. Therefore, the citizen's capacity in monitoring has been strengthened and created greater pressure on the state accountability.

Thirdly, to respond to the reasonable needs of the citizen, the Vietnam government has initiated reforms in many areas, of which administration reform is the core. Pressures from these reforms have forced public service providers into improving their service quality and increasing client satisfaction.

The contextual background of the project will be elaborated more in the Relevance section in Part II of this report.

3. Objectives and methodologies

3.1. Objectives

According to the Terms of Reference (TOR) (for detail, see Annex 1), the ETR focuses on the following key outcomes:

- Review of the whole M-score program (2017-2019) focusing on successes & challenges, best practices and influencing impact.
- Provide key recommendations for future strategic development of M-score and possibility for its replication strategic phasing-out plan that enable to expand the project to other locations/provinces and sectors (education, vocational training etc...), in order to ensure the sustainability of the initiative and for more nation-wide impacts.

3.2. Methodologies

The ETR mission employed five standard criteria, namely relevance, effectiveness, efficiency, impact and sustainability for the project review. In addition, cross-cutting issues and technical aspect related to the feedback collection and synthesis mechanism are also addressed. The ETR was made based on qualitative and quantitative information gathered in desk review of literature, and on-site data collection.

- Literature review. The ETR made use of a large collection of project and other related documents, collected both before and during the mission (including project documents,

- communication information, data from partners...). See Annex 3 for List of Reference Documents.
- On-site data collection. On-site data was collected via different methods: quantitative questionnaires (conducted through direct surveys and online surveys using the Monkey Survey tool), key informant interviews, focus group discussion (FGD), phone interviews, etc. The interview/discussion contents were designed to be relevant to each target group. For details on the evaluation tools used, see Annex 4. Target groups for the data collection included:
 - Clients of public administration services participating in the M-score survey (providing feedbacks via tablet and post-service phoning for both health services and public administration services in Quang Binh, Quang Tri and PSI survey).
 - PSDUs (Provincial PASCs, OSSs, PGHs, and DHCs)
 - Local administration agencies (PPC, Provincial People's Committee, DOHA, DoH)
 - Central agencies (OOG, MoH)
 - Communication agencies (local mass media and mass organizations)
 - > Other provinces, which have adopted similar approach to M-score (Dong Nai)
 - Representatives of hospitals participating in 2018 PSI survey.
 - Representatives of Oxfam Vietnam

Table 2. On-site survey samples of the ETR mission

No.	Data collection technique	Quantity			
		Quang Binh	PSI		
1	Client questionnaires (direct and distant interview)	157	451	371	
2	PSDU questionnaires (self-filling)*	25			
3	Key informant interviews/ FGDs (see Annex 5 for a	31			
	list of the interviewees)				

^(*) Note: It was planned to survey 60 hospitals through the Monkey Survey tool but by the time of reporting, the evaluation team has only received answers from 25 hospitals.

Source: Consolidated from monitoring book of the evaluation team.

Annex 3 provides detailed information on the results of on-site activities conducted by the ETR, including: Annex IIIa: The list of persons involved in face-to-face and via-phone interviews; Annex IIIb: Number of conducted FGDs; and Annex IIIc: Questionnaire-based survey sample.

- Inception report. The inception report aimed to reach the agreement on the ETR contents, tools and approaches between the ETR mission and Oxfam. For details of the Inception Report, see Annex 2. After the Inception Report was approved, the ETR had multiple discussions with Oxfam Hanoi and the two provincial PMUs on the organization and working schedule for site visits.
- Debriefing in Quang Binh on December 31, 2019, for which the mission prepared a short presentation, see Annex 6, that was discussed and commented. After the debriefing, additional information was collected via additional interviews and data analysis was conducted and completed.
- *Draft final ETR report*. Various versions of the drafted ETR report were circulated for comments before being finalized.
- Finalizing the ETR report.

Part II: Evaluation of the project performance

1. Operation mechanism of M-score

The M-score Project approach can be summarized as follows (see Figure 1).

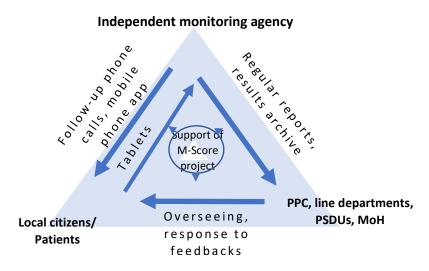


Figure 1. Intervention mechanism of M-Score

According to the project design, the M-score model has been implemented based on the triparty interaction mechanism: (i) citizens and patients — public service users; (ii) Intermediaries which provide technical solutions to collect citizen feedback and report to government agencies. This intermediary is also referred as independent monitoring agency. In Quang Binh and Quang Tri, RTA played this role, the PSI survey was been implemented by VNI, MDRI and Depocen consulting company; (iii) supervisory agencies (PPCs), line departments (executive agencies under supervision of the Provincial/ District People's Committee), PSDUs (collectively referred to as state agencies), and MoH. In addition, there is active support from other project partners, typically Oxfam Vietnam, VNI and communication facilitators: mass organizations and local media.

In Quang Tri and Quang Binh provinces, *citizens - clients* after completing a piece or the entire public service process were required to provide feedback on their satisfaction with that public service. There are three main feedback providing techniques used in the Project. The first is the follow-up phone call (or post-service phoning), in which after completing a transaction with PSDU would leave his or her contact phone number at the PSDU, who is responsible for providing such information to the independent monitoring agency (in this case, the RTA), RTA staff was responsible for making phone calls to the client to get his or her feedback on service quality. The fundamental principle of voluntary participation and unanimity.

The second technique is using the tablet, in which clients were instructed to send their feedback via using tablets already installed at number of convenient positions at the public space of PSDUs. Through a few simple steps following the instructions, people can click on their preferred options. The evaluation results will be automatically transferred to the independent monitoring agency for data processing and reporting. More recently, RTA has developed an app on smartphones. Users can download the app to their phones and look up information, track progress in service delivery process and score directly on the phone without a need to be presented at the service provider counter or participate in follow-up interview (sometimes the interview is made in inappropriate time leading to citizens' refusal to answer). However, this technique has only been tested since

June 2019 on 200 "clients" so it is too early to assess its effectiveness. Therefore, the ETR focused only on two basic techniques intensively implemented during the Project period (2017-2019), namely follow-up interviews and tablet scoring.

The independent monitoring agency in the two provinces - RTA - was a technical solution provider who was responsible for collecting client feedbacks, implementing data storage and making periodical reports to government agencies based on the principle of information access authorization: the PPC is the supreme supervising body for the public service delivery in the province, and was also the PMU. Thus, PPC had full access to collected data, while line departments and PSDUs could access to selected information directly relevant to their functions and mandates. RTA is also the developer of applications that take full advantage of ICT to provide citizen feedback in a timely and accurate manner.

The state agencies that receive information and reports from the RTA are responsible for classifying and analyzing the information to find out the shortcomings in the service delivery process, identifying the causes and setting out solutions to overcome those limitations. For the supervisory agencies (PPCs), the Project's intervention was a channel to provide independent, objective and timely feedback on PSDU performance. This will help to strengthen their overseeing and questioning mandate.

Since M-score is a new tool to enhance the interaction between the citizens and the government, when implementing within a project in the first stage, the role of project partners is urgently needed. Regarding the M-score Project, Oxfam is the global project management agency, communicating with all parties, providing technical assistance and monitoring implementation, while being responsible for disseminating project results. In addition, to raise public awareness of the M-score tool, the advocacy role of the local media and mass organizations is undeniable to help citizens becoming acquainted with new instruments and actively participating in project activities.

2. Project assessment following the project evaluation criteria

This section will assess project performance following five OECD's criteria including (i) Relevance; (ii) Effectiveness; (iii) Efficiency; (iv) Impact and (v) Sustainability.

2.1. Relevance

Assessing the Project's relevance focuses on the analysis of the Theory of change reflected in the Project design and its relevance to the context of Vietnam (including national and local priorities, as well as needs of stakeholders).

a. Theory of change reflected in the Project intervention

Although the Project Document does not clearly show the result chain in the Project intervention, through discussions with stakeholders, it can be seen that the project intervention is consistent with the main policy directions in the field of governance and sustainable development in Vietnam. Project's theory of change can be illustrated as follows (see Figure 2).

Impact: Improved citizen satisfaction with service quality, reinforced mutual trust between citizens and government Result 2: Local authorities and Result 3: The tool is Result 1: Citizens practice the right to monitor and PSDUs responsively use feedback replicated and used evaluate public service information to improve service in the government quality quality system 1 Output: Feedback mechanism on the service quality is user-friendly, reliable and gender sensitive Activity: (i) Develop the scoring modalities on the digitalized platform; (ii) Communicate and advocate citizens and State agencies; (iii) Provide periodi actual time reports

Figure 2. Theory of change reflected in the Project intervention

Accordingly, through equipping citizens with convenient tools based on ICT applications to assess the public service quality, and communicating and advocating to raise citizens' awareness in actively using the tool, the Project has developed an objective, reliable and gender sensitive feedback mechanism on the public service quality to meet the stakeholders' needs. This mechanism will contribute to achieving three result areas built in the Project design including Result 1, citizens have the right to participate and monitor the quality of health services and public administration services in a practical manner; Result 2, local governments and PSDUs respond to citizen feedback collected through M-Score to improve their overseeing (for PPC), supervision (line Ministry/Department), and service quality (PSDUs) and Result 3, the success of M-score tool will be spread beyond the Project scope to be applied in other localities and, more importantly, to be integrated into the formal system. These results are an important factor to improve the public services quality and citizen satisfaction, and to strengthen the mutual trust between citizens and government.

b. Relevance of M-score Project to the needs of stakeholders

The Project has five main groups of stakeholders including (i) citizens, and also known as clients of the public services; (ii) PSDUs (including PGHs/DHCs and Provincial PASCs/ district OSSs); (iii) local authorities (who received citizens' feedbacks and were responsible for making specific actions, regulations, policies to improve public service quality); (iv) central government (subject to integrate M-score experiences and lessons into the formal PAR programs and development of e-government); and (v) communicating organizations for the Project, including the mass media agencies (local and national media agencies participating in reporting, posting and accompanying the project in the implementation process at provinces) and local mass organizations.

Meeting the needs of citizens. As Vietnam and its citizens become wealthier, the pressure to further improve public services clearly and better exercise citizen rights increases. In the 2001-2010 period, the average growth rate of Vietnam reached 7.26%, which was higher than the global average rate and that of developing countries (3.28% and 5.56% respectively), and the income of

the bottom 40% of the population has been increasing at the rate of 9%/year ³. Middle-class growth increases the demand for higher value goods and services and supplies skilled professionals and workers to domestic firms, to the government, and to civil society. Enterprises also ask for better services, more transparent government, less corruption, and more service-oriented public administration, since such factors can help them to increase profits, improve competitiveness and deeper engage in global value chains.

Over the last few years, the Government has actively encouraged citizen participation in public governance by developing various participation channels. However, most of those channels are traditional with two fundamental limitations. Firstly, they require direct communication between citizens and state agencies. Secondly, information receipt and processing is internally conducted within the state apparatus. All limitations make citizens be reluctant to express their own opinions or lacked trust that their opinions being seriously taken by state agencies. The M-score Project overcomes these limitations by using an independent agency for information collection and processing. The project's ICT platform-based scoring methods do not require the direct interaction between clients and providers. Therefore, the Project solutions were welcomed and trusted.

The health center now showed much cares about patients like me. My health check already completed in two months ago, but I still received a call asking me about the service.

Source: Reflection of a patient in Dak Rong DHC about the follow-ups interview

In addition, *public administrative agencies and non-administrative PSDUs* are also under pressure to get higher citizen satisfaction/their clients as a measure of their performance. The Government has recently pushed up PAR, which is considered a breakthrough in institutional reform and improvement of business environment. For administrative agencies, the satisfaction of citizens and businesses has long been an integral part of a number of comprehensive measures of local governance quality (such as PAR Index, PCI, PAPI and so on), which are used as a basis for assessing PAR performance in subnational level. Therefore, improving citizen satisfaction with the public administrative services has become a survival indicator for administrative agencies if they do not wish to be seen as barriers of the reform process.

For other non-administrative PSDUs (including health care institutions), the trend of socializing service provision, transforming PSDUs into joint-stock companies or implementing the autonomous mechanism has forced these units to really compete with each other to attract more clients. State subsidy will be no longer available. Instead, the state now only pays for services ordered by the State based on the agreed quantity, quality and unit price stated in service contracts with PSDUs. Therefore, PSDUs are forced to generate their own revenue from service charges paid by clients. For health services, the main source of income will come from the hospital fees paid by patients or health insurance agencies. This new mechanism has forced hospitals to pay more attention to improving patients' satisfaction as a vital need, not only from the PAR pressure. Getting clients' satisfaction (patients and their family members) is also like keeping loyal customers staying with PSDUs' services. Thus, M-score Project turned to be an objective and effective mirror of patients' satisfaction to these health institutions.

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³ World Bank and Ministry of Planning and Investment (2016), *Vietnam 2035: Towards the Prosperity, Creativity, Equity and Democracy.*

For communicating and advocating organizations for Project activities. ICT application for creating scoring tools is very new in Vietnam. It is quite embarrassing for ordinary citizens to access to such tools. Therefore, communication and advocacy to raise awareness about the purpose and impact of these tools is both a political mandate and an attractive topic for the engagement of local media and mass organizations. M-score is one of projects with intensive investment in communication. In the initial phase, there were number of big campaigns for project communication. The project has released a lot of billboards, posters, banners of the project in PGHs, OSSs including leaflets in ethnic languages. More innovatively, conducting a show on M-score, which was performed by the Quang Tri Drama Troupe, was a local initiative to disseminate information on the Project.

From the commencement of the project, the PPCs requested involvement of local media and mass organizations in actively communicating with citizens to advocate for the project.

When the PPC asked our Newspaper office for introducing the Project, we also discussed at first whether it could be done or not, because this issue was quite technical and difficult for communication. After that, we found that the project objectives were in line with the general policy and guideline on strengthening citizens' oversight, we accepted the request. We had a "M-score" headline in the online newspaper once a month, but from 2018, it was maintained once every two months. Thank for good communication, citizens were well prepared to engage in follow-up interviews.

Source: Recalled by a representative from Quang Binh Newspaper

In the M-score Project, a media network on the topic of governance was set up by the Oxfam with the participation of all national press representatives in Quang Binh and Quang Tri province, and newspapers agencies in Hanoi. A number of press articles and reports on M-score published in Quang Tri and Quang Binh Newspapers won national press awards. However, these activities were mainly implemented in the early stages of the project when citizens did not know about the Project. Intensity of these activities was diminished over time.

Regarding mass organizations (such as Vietnam Fatherland's Front and its member organizations) in provinces, their first mission is to educate citizens for better understanding and complying with policies and regulations set by the Party and the State. Since the project was hosted by the PPC, mass organizations were soon aware of their roles as to help citizens better understanding about the M-score project and actively using the new tools initiated by the PPC. In other words, mass organizations were properly assigned a task which was closely linked to their mandate, resulting in their significant contribution to the Project's success.

The central government and local authority is a group of policy-makers in all levels. Therefore, if the project's objectives were aligned with national and local strategic priorities, the project would definitely meet these policy makers' expectations.

Strengthening the citizens' voice has been considered by the authorities at all levels a priority to secure political stability and social cohesion. Government-citizen interaction is stated in many laws enacted over the last decade. The Ordinance on Democracy in communes, wards, and townships 2007, the Constitution 2013, Law on Receiving Citizens 2013, Law on Public Investment 2014, the Law on Organization of Local Government 2015, Law on Promulgation of Legal Normative Documents 2015, Inter-agency Resolution between the National Assembly Standing Committee,

the Government, the Chairman of Vietnam Fatherland's Front Committee in 2017 all emphasized public engagement in public governance and the obligation of state agencies to listen and respond to citizens 'legitimate needs and expectations.

Administrative procedure simplification and public service quality improvement are policy priorities to create a new development momentum for Vietnam. Since 2016, Vietnam has pledged to develop new government characterised as stimulating, showing integrity and decisive. This was the first time that a cabinet issued various policies toward removal of red tape and barriers for businesses just within few months after being installed. To continue its efforts, in the following years, several decisions were made in order to keep the PAR momentum operational. For example, a series of follow-up "Resolutions 19" including No. 19/2017, No. 19/2018 and No. 02/2019, have made further pushes on improving business conditions and procedures. A Government Taskforce was established to monitor progress in implementing tasks assigned by the Prime Minister, including PAR, in central ministries and provinces. Vietnam is now ranked 69 among 190 economies in the Ease of Doing Business indicator in 2018, a jump from the 82nd ranking in 2016⁴. This evidenced that the Government has been increasingly seen improvement of business environment and quality of public administration services as a breakthrough in PAR agenda.

Finally, building an e-government based on strong ICT application is a stimulus, especially in the context of Industrial Revolution 4.0. One of the goals set out in the Government's Resolution No. 36a/NQ-CP on e-government was that "by the end of 2017, Vietnam is in the top three ASEAN countries on the UN set Online Services Index (OSI) and E-Government Development Index (EGDI)". Under the drastic direction of the Government, line ministries and provinces have strongly pushed up ICT development and application, development of e-government among other tasks. Vietnam has had nationwide digitalized systems in customs services, taxation, business registration and others. As of the first quarter of 2017, 26 out of 30 line ministries and central government agencies and 63 out of 63 provinces completed the digital connection of document management software with the OOG, which helped to establish a unified and transparent electronic document management system throughout the country. Regarding the provision of online public services, by the end of 2017, 78 out of 83 online public services provided by 20 ministries and central agencies were made online; 32 out of 63 provinces completed 44 online public services assigned to subnational level. As reported by the United Nations in 2018, Vietnam's ranking increased by 01 step relative to its ranking in 2016, ranked the 88th out of 193 countries in the world and the 6th out of 11 South-East Asian countries. In particular, relative to 2016 position, Vietnam's OSI ranking improved significantly (ranked 59th out of 193 countries), and Human Capital index (HCI) ranking increased slightly (ranked 120th out of 193 countries), higher than the world average but lower than the average of Asia and ASEAN⁵. These figures confirmed the Government's high determination in applying digital-platform based initiatives to promote egovernment.

At the national level, we have had the National Public Services Portal opened on December 9, 2019. After 2 months of implementation, it can be said that the National Public Services Portal achieved number of positive results. Firstly, 9 out of 22 ministries and central agencies, and 63

⁴ World Bank (2019), Ease of Doing Business, https://tradingeconomics.com/vietnam/ease-of-doing-business

⁵ According to the e-portal of the Government, accessing on Jan 29th 2020 at http://egov.chinhphu.vn/xay-dung-chinh-phu-dien-tu-2018-mot-so-ket-qua-tich-cuc-a-NewsDetails-37624-14-186.html

provinces have been able to connect to the portal. Secondly, number of accounts on the National Public Services Portal has increased dramatically, reaching a record of 51,000 accounts so far. More than 1 million applications relating to administrative procedures was synchronized. These figures are really encouraging.

Source: Sharing from Ms. Nguyen Tuyet Minh, Deputy Head of Department of Administrative *Archives, OOG – Oxfam's interview*

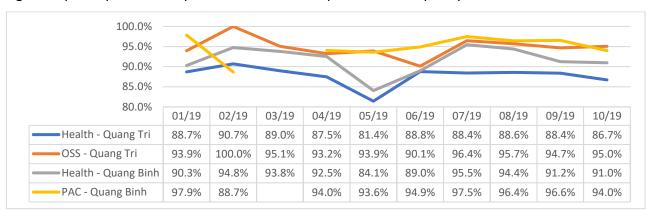
In short, at the end of the Project, it can be confirmed that the M-score Project is a relevant and timely intervention to support the Government pursuing its PAR and e-government building agenda – the entry point to enhance efficiency and effectiveness of public governance at both the central and subnational levels.

2.2. Effectiveness

This section explores to what extent Result 1 and Result 2 are achieved (see Figure 1). Since Result 3 is associated with the spillover effects of the project, it is analyzed in the Impact section.

To what extent citizens can exercise their rights to monitor and assess public service quality through the use of M-score tool?

Follow-up interview (post-service phoning survey) is deployed as long as the citizens' willingness to respond was strictly respected. In fact, after being approached by interviewers, if they refused to respond, the call would be terminated. Refusal to respond could be attributed to various factors including being busy with other commitments or impossibility to recall to a transaction completed too far away... However, an important factor was their distrust on the fact that their feedback being listened and taken into consideration. Therefore, the higher the percentage of citizens' acceptance to participate in follow-up phoning surveys, the higher the citizens' awareness of their rights to participate and to provide feedbacks on public service quality.



Source: Adjusted from monitoring data provided by RTA

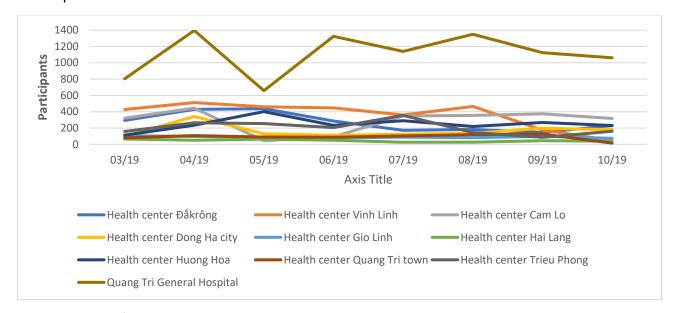
Figure 3. Percentage of acceptance to participate in follow-up phoning surveys conducted by RTA in 2019

As shown in Figure 3, the acceptance ratio in both provinces was very high, recording at almost 90% of the total number of call receivers, who are right persons to answer phone calls⁶. This high percentage was also kept fairly stable across year 2019 (from January to October). In particular,

⁶ Monitoring data allowed data disaggregation into (i) number of people being reached by surveyors, (ii) number of approached people actually involved in transaction; and (iii) number of 'actual' people accepting to respond to the call. Data shown in Figure 3 is a ratio of (iii) out of (ii). Uncontactable, wrong phone numbers, uninvolved in transaction and alike were excluded.

the responding rates in the group of public administration service clients tended to be higher than that in the group of hospital patients. Even at the lowest value (e.g. in May for health care services in Quang Tri province), the ration was still as high as more than 80% (equivalent to 802 persons out of 985 persons as the total number of actual clients being reached).

With tablet-based survey, after few months, Quang Binh province realized that that this survey technique did not provide reliable information and decided to cease. Threfore, Figure 4 shows only the status of tablet-based survey in Quang Tri province, disaggregated by districts. In general, the number of citizens using tablets to assess quality of health services is much higher than that of public administration services in District OSSs. Part of the reason could attributed to technical improvement in health care institutions. Initially, this survey technique could be used to evaluate institution-wide service quality. After a while, the software was improved to allow not only institution-wide but also department-wide service quality being assessed. Therefore, the number of citizens participating in tablet-based surveys in health care institutions increased significantly. Data showed that citizens' participation ratio in tablet-based surveys was neither stable nor kept increasing/constant as that of follow-up phoning survey (being elaborated later). Nevertheless, citizens begun to get familiar with this completely independent and proactive survey technique. If communication with, and encouragement for, citizens has been further pushed to routinized the use of this survey technique in citizens' lives, there will be great potential for scaling up this technique.



Source: Adjusted from monitoring data provided by RTA

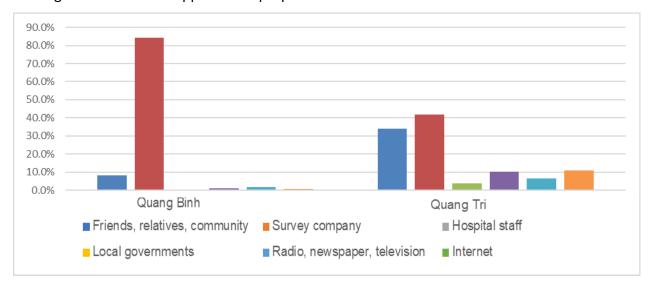
Figure 4. Number of participants in tablet-based surveys in 2019 in Quang Tri province

Supplementary to secondary data synthesized from RTA monitoring database, primary data was also collected via questionnaire-based survey with the actual sample size of 157 respondents in Quang Binh and 451 in Quang Tri. Figure 5 reflects respondents' opinions about how they knew about the Project. It is worth noting that in both provinces, the most important information channel about the project is vis-à-vis RTA's introduction, equivalent to 84% of interviewees (or 132 persons) in Quang Binh and 42% (or 189 persons) in Quang Tri. This finding has two implications. In the early stage when people were not aware of their right and obligation to monitor public service quality, they hesitated to use self-doing survey techniques (such as through tablets or mobile Apps). In that context, the follow-up phoning (which referred to as "passive

survey technique", because instead of being active in choosing most comfortable survey technique and responding moment, respondents depended on calling arrangement made by RTA staff) seem to be more effective. Given advantages of the follow-up survey technique in early stage of intervention, interviewer played very important role in making interview successful. Interviewers need to be trained carefully so that when interacting with citizens, they were able to explain and encourage citizens to be more proactively involved in service assessment for their own benefit and that of entire community as whole.

The second most important channel is through recommendations of friends, relatives and the community. This fact may imply that the Project has positive spillover effect and facilitates trust building in the community.

The third channel is self-searching via the Internet. In spite of being less popular than the other two channels, internet self-searching gained interest from citizens. When the habit of using Internet is scaled up and citizens are no longer afraid of ICT applications, there is a big room for shifting to use of mobile apps for this purpose.



Source: Consolidated from ETR survey results.

Figure 5. The percentage of respondents knowing about the project, by sources of information

Survey data provided similar picture to that reflected in key informant interviews and/or FGDs. For example, in an FGD with participants involved in follow-up phone phoning survey, a member of a Quang Tri PGH patient's family expressed:

It takes time to answer phone call, but I think that if I answer precisely, the hospital will know how to improve service quality. Service improvement will then benefit us later on. Therefore, I warmly participate in the survey, and recommend others to joining with me also.

Source: Opinion of a Quang Tri PGH patient's family member

In short, after 3 years of implementation, the M-score Project equipped citizens with new scoring tools. Starting with some confusion, citizens were no longer reluctant in using M-score tool. They realized that participating in scoring was their right and obligation to help improving service quality, increasing accountability and improving quality of life for the entire community. Embodied with that perception and belief, citizens were more proactive in seeking additional information about the Project and recommend the Project to their friends, relatives and other neighbors. With that evidence, it could be concluded that objectives of Result 1 has been reached.

To what extent, state agencies listened and responded to received feedbacks?

Provincial People's Council. PPC leaders and PPC-led PMU members in both Quang Binh and Quang Tri provinces all confirmed that M-score provides them adequate, timely and objective information. This helped to substantial improvement in their oversight and questioning capacity. The elected bodies no longer had to rely entirely on the administrative reports provided by the line agencies as it used to be. Rather, they were armed with additional evidence to make reports from thematic or periodic monitoring missions conducted by PPCs more evidence-based and persuasive. Consequently, many findings from the M-score reports were integrated into PPC's decisions.

I personally find that M-score is a very good tool because it allows citizens to express their opinions objectively without being afraid of persecution. For public administration services, the scoring helps to raise awareness of OSS staff, change their attitudes towards servicing, stop the "begging-giving" mechanism, reduce informal costs and reduce waiting time for citizens. For health services, it makes provided services more suitable and accessible to their clients. We also rely on M-score results to work with authorized agencies for improvement rather than for criticism or sanction. At the beginning, everyone was nervous with new tools, but now they felt much more comfortable.

Source: Opinion of Mr. Nguyen Duc Dung, Standing Deputy Head of Quang Tri PPC

2016 is the year to re-establish People's Council of Vinh Linh district. Since then, the district People's Council has received many complaints about the quality of health services provided by its DHC. The Center serves not only residents of Vinh Linh district but also patients from different parts of Le Thuy district in neighboring Quang Binh province. The overcrowding status led to overloaded burden for health workers in the DHC. As soon as the situation was reported, the district People's Council considered it a thematic issue in its 2017 oversight plan. Also, the M-score results of the DCH was closely monitored. By 2018, there was a dramatic change in service quality there.

Source: Opinion of Mr. Nguyen Duc Lap — Deputy Head of Vinh Linh district People's Council, at the Project Closing Workshop on December 17, 2019

Box 1. The responsiveness and open-mindedness of the leaders of Quang Tri PPC – the Change Agent

After more than 5 years of implementing the M-Score initiative, Quang Tri has conducted citizen satisfaction surveys at 10 health facilities, 09 OSSs and provincial PASC. In general, the citizen/patient satisfaction indexes were improved in both administration and health services. There is also a significant change in perception of local governments - towards better serving citizens, perception of citizens towards higher responsibility to participate in public governance, and in promotion of citizen ownership. These results were made through the cooperation and support among stakeholders, (very strong) determination of local government leaders, involvement of socio-political organizations and support of all citizens in the province. It can be said that responsiveness and open-mindedness of PPC leaders and their counterparts in provincial line departments/sectors played an important role in the success of the initiative. In the discussion with Oxfam, Mr. Nguyen Duc Dung, Standing Deputy Head of Quang Tri PPC, said:

I have been an elected representative for 21 years. I understand very well about the goal of state building, how to promote citizens' rights and democracy, how to listen to each other in the party body and government system, how to realize the ideology of a government of people, by people and for people. Therefore, when I figured out that this initiative was doable in Quang Tri, I planned a series of tasks to be done. First, to have successful adaptation of the tool, it must be formalized to be a policy of the local government. Second, it should become a PPC discipline, so we could bring this initiative to real life.

Source: Opinion of Mr. Nguyen Duc Dung, Standing Deputy Head of Quang Tri PPC, Interviewed by Oxfam

In order to translate the M-Score initiative into policy and working discipline of the province leaders, on one hand the PPC persuaded leaders of the provincial People's Committee/ line departments/sectors to implement the project. Different arguments were made, such as "we could not avoid it or be afraid to do", "we need to introduce competition into our daily work. Otherwise, we will be left behind". On the other hand, they advocated for the initiative by incorporating it in the highest-legal-status documents issued in the province such as 2016 Thematic Resolution on Supporting Improvement of Quality and Efficiency of District OSSs; Resolution No. 103/NQ-HĐND on Sustaining the M-Score Initiative in 9 OSSs during the period of 2018-2020...

The PPC received M-Score reports and directed the district People's Committees and District OSSs to investigate causes of obstacles reflected by citizens in order to improve service quality. After that, these agencies must inform citizens and report to the PPC.

State management agencies (line departments/divisions). At the beginning, most district agencies felt reluctant to adopt M-Score because they already had to implement many compulsory assessment/scoring tools such as PAR Index or PAPI. Implementation of another scoring tool, which is not an official and mandatory tool, would require them to spend much more time on information collection and result interpretation, which may have adverse effect on their careers. However, because PPP is the host of the project, line agencies could not refuse.

During project implementation, these agencies realized the importance of the M-score tool, which is complementary rather than substitute for, or exclusive to, other tools:

M-Score was implemented from early 2018. The DoH selected three hospitals, including Bac Quang Binh PGH, Dong Hoi PGH and Le Thuy District General Hospital, to adopt the tool first. At the beginning, we found many problems. Health workers were already overloaded at work, now they had to collect and provide RTA patients' phone numbers. Many senior staff could not remember their patients' phone number. Hospital leaders were afraid of getting lower scores from patients. But later, the hospital management software was updated, with a new information filling requirement of patients' phone numbers. The DoH also required hospitals to assign a nurse to manage phone numbers data in the software and transfer that data periodically to RTA. Thanks to that, from June 2019, the implementation of M-score has gone into order. With a set of accurate and useful information received, our DoH could guide hospitals to address their unsatisfactory issues. This tool also helped to validate evaluation results provided by using other tools stipulated by the MoH for measuring patient satisfaction. Leaders of our Department affirmed that M-score brought good value.

Source: Opinions of Mr. Bui Viet Hung - Deputy Head of the Medical Profession Division,

Quang Binh DoH

The implementation of M-score on public administration services at district OSSs and province PASC also received positive feedbacks.

M-score helped to collect citizen feedback quickly, issues were brought up in weekly meetings to find out causes and solutions. Thanks to that, it created timely changes in administrative procedure processing. Citizens' trust on government agencies was also strengthened. I believe that M-score will become a powerful and effective tool for the citizen-government interaction, given the context of innovative e-government building and application of the outcomes of Industrial Revolution 4.0.

Source: Opinions of Mr. Nguyen Duc Lap — Deputy Head of Vinh Linh District People's Council, at the Project Closing Workshop on December 17, 2019

Service providers. Similar to leaders of line agencies, at first, PSDUs also felt hesitate and demotivated (although it was uneasy to refuse implementation because this project was led by the PPC). They were afraid of having more workload, getting more unfavorable information leading to increase work pressure and higher risk of being criticized and sanctioned. Appreciating such hesitation, leaders of the PPC and line Departments had worked directly with them, explained the purpose of using M-score as for understanding their real situation and finding ways to solve problems given their limited resources and power. As a result, many PSDUs initiated innovative and inexpensive solutions to solve their problems. Their efforts, therefore, were highly appreciated by clients.

Getting citizens' feedback, we knew our weaknesses to improve. It is important that the M-score must be perceived as a source of reliable information, not a scrutinizing and inspecting tool. Being aware that your work is always monitored by many parties is another factor urging us to work more carefully.

Source: Key informant interview at Quang Binh provincial PASC

In the past, citizens were intimidated by public officials, but their roles were reversed... If you see yourself as a service provider, this situation is unsurprising, because serving customers is our mandate.

Source: Opinions of Mr. Nguyen Duc Dung, Standing Deputy Head of Quang Tri PPC

Box 2. Positive changes at Cam Lo District OSS brought about by citizen feedback collected through M-score

Cam Lo district is an administrative unit that actively participate in PAR. In the past, the district received funding from another project for building an OSS to handle administrative procedures in land and cadastral administration. By 2014, that project was terminated, and the OSS was dissolved. From "one-door" mechanism, arrangement for administrative procedure process in this field returned back to "multi-doors" mechanism, with a lot of cumbersome and red tapes, causing troubles for citizens and being complained a lot.

In the period from 2014 to 2015, while implementing M-score project, the OSS was reorganized, and a separate unit of a full-time officer and a contracted officer was established to manage electronic OSS process. At first, the management software was not good, leading to pilling up many overdue cases. Through the citizen feedback, the district decided to refine the software,

rationalizing some administrative procedures to be more effective and time-saving (such as administrative procedures in the fields of land management, labor, education, business registration, and finance management...). By 2018, 100% of district-level public services were processed online.

Based on citizen feedback, the district authority figured out that OSS staff, who had direct contact to citizens, played important role for citizen satisfaction. Therefore, those staff members needed to have not only strong professional knowledge, deep understanding about the overall process of administrative procedures in different fields, good ICT skills, but also good client-centered communication skills. Therefore, the district authority replaced staff in this position three times. From 2017 onwards, the OSS operated stably. Satisfaction score rated by citizens is always above 8.5 (over 10), making Cam Lo District OSS become one of the bright spots on quality of public administration services in the province.

Source: Discussion with officials and leaders of Cam Lo District OSS, Quang Tri province

Apart from these positive effects, public servants at District OSSs and provincial PASC were not fully comfortable in adopting M-score because M-score just allowed citizens to make a assessment of overall public administration services. Sometimes OSS staff found that criticism on their performance were unfair since there were many excuses for overdue or delays, many of which went beyond their control. OSS



Picture: A female citizen at OSS

Source: Oxfam

officials wished to have a clear disaggregation of the administrative procedures into different steps, which could be assessed separately by clients. This recommendation is similar to the OOG's opinion (which will be further elaborated in the Impact section).

Compared with public administration services, it is easier to assess the quality of health services because the assessment can be referred to each department/unit. Through citizen feedback, health care institutions clearly saw that clients' most concerns were hygienic quality of toilets, health workers' attitude towards patients or expensiveness of catering service for patients and caregivers. Since then, many hospitals and health centers took immediate remedial initiatives without waiting for additional funding. For example, Quang Tri PGH added M-score results in the set of year-end performance evaluation or integrated them into weekly briefings so that problems could be timely addressed. Facing funding shortage for complete renovation of toilets, some hospitals (such as Le Thuy District General Hospital) increased the frequency of mass cleaning to every 30 minutes and installed frequent tracking system for cleanness. The catering services in Quang Tri PGS canteens was open for bidding to remove monopolistic service provision.

In general, M-score results have been considered and used by government agencies in their oversight and supervision, and initiation of timely and innovative solutions to solve problems

gradually or comprehensively, and improvement in public service quality. Therefore, it can be concluded that Result 2 of the project has been successfully implemented.

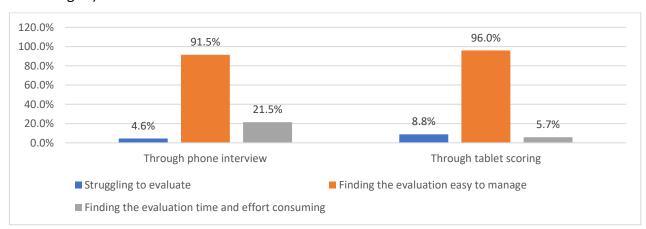
Putting together analysis of completion of Result 1 and Result 2 described in this Section and the extent of completion of Result 3 described in Impact section, the ETR concluded that the M-score Project is effective.

2.3. Efficiency

Project efficiency comprises output efficiency and cost efficiency. In particular, the output efficiency is analyzed by comparing performance of M-score tool with existing measures adopted in the government system, and comparing usefulness of different M-score assessment techniques.

Project output efficiency

Survey respondents were very positive about the M-score tool because they saw it as a user-friendly and frank instrument. Out of 659 interviewees, up to 92% (or 539 respondents) agreed with this view on follow-up phoning interview, while 96% (or 285 respondents of 297 interviewees) shared the same opinion on the tablet-based scoring technique (see Figure 6). The percentage of respondents who had difficulties with using tablets was higher than that of the follow-up interview technique. Nonetheless, when respondents were asked about time consumption for using the techniques, the results were reversed. This is reasonable given differences in technical properties of two techniques. Furthermore, this finding also suggested that in the early stages of the application of digital tools, priority should be given for "passive" follow-up interview technique, which could help removing people's reluctance in exposing to new technologies).



Source: Consolidation from ETR survey data

Figure 6. Assessment of the convenience of M-score techniques

For Hospitals involved in PSI surveys, only follow-up phoning interviews were conducted. 92% of hospital representatives agreed or strongly agreed that the M-score was a simple, inexpensive, fast and objective way to reflect patients' opinions. Additionally, 72% thought that data collected from phone interviews were more accurate and objective than by other methods.

In FGDs, making comparison between follow-up phoning interview and tablet-based survey techniques, FGD participants clarified that follow-up interview was conducted when transactions were complete. Thus, patients could have calmer and more holistic view of the whole service process. At the same time, they also got free from anxiety that giving low scores may lead to some discriminated treatment from health workers. However, since several calls were made long time after completion of transaction, participants struggled to remember the exact improvement in

service provision. Being phoned without prior notice, many people found the interview time unsuitable for them to answer (some were on the way home or busy with other commitments, etc.), leading to their refusal or feeling of waste of time to answer. Moreover, many phone numbers were no longer reachable, resulting to high rate of unsuccessful calls. Finally, quality of gathered information from the interview depended a lot on the caller's ability to express sympathy and confidence while using an appropriate accent or dialect that the participant found relatable.

Someone called me the other day. I knew they were asking about my visit at the hospital. But they spoke so fast in a Northern accent so I didn't understand, so I just winged it.

Source: Recoded from an FGD with health service clients in Quang Tri

RTA was well aware of this issue and during the process of improving the tool, it had tried to localize the conversations by recruiting local interviewers. However, the improvement was less observable due to the difficulty of recruiting local interviewers who met RTA's requirements (as analyzed above).

On the other hand, using tablet had advantage of expressing people's opinions right after completing a stage in servicing process so it could accurately reflect the participants' attitude at that time. As people did not have direct conversation with interviewers, they felt more comfortable with their assessments. However, the questionnaire installed in tablets was only closed questions, so it had not been able to explore "out-of-track" information about services. In addition, as mentioned above, people were often reluctant to using high-tech equipment. Fullness and completeness of collected information depended heavily on operational stability of devices. During the ETR, it was observed that percentage of clients taking tablet-based survey after completing transactions was not high. Public servants at service counters did not provide detailed instructions on how to conduct tablet-based surveys. The interface of the software was not very user-friendly. In many locations, tablets were not available on the shelves, with different excuses such as "running out of battery" or "tablets are out-of-order". These limitations must be solved in the future if "passive" feedback technique (e.g. follow-up phoning interview) to be replaced by more active and self-filling techniques such as tablets or smartphone apps.

Sometimes we also compared the feedback via follow-up phoning interviews and tablet-based survey, and we were shocked by so much divergence of the results. Often follow-up interviews provided more positive feedbacks. However, after analyzing, we found that it doesn't matter which data collection techniques we used. They both had advantages and disadvantages and complemented each other very well. The tablet-based questionnaire reflected actual pressing issue on the spot, but questions in the questionnaire should be revised frequently. When a complained issue was already addressed, then the survey should move on to another issue, as long as the questionnaire is kept at a reasonable length so that people are not too tired to answer.

Source: Shared by Ms. Nguyen Thi Luyen, Deputy Director of Quang Tri GHP

The M-score is a good complement to the existing PAR measures, so it is well received by government agencies. In the PAR agenda, a component of PAR Index (PAR Index) is the satisfaction Index of Public Administration Service (SIPAS), which is collected by sociological survey method, in which provinces will compile lists of potential respondents. The Provincial Post Office is then responsible for organizing survey and collecting responses. The Ministry of Home Affairs processes and analyzes information, then publishes the results. The advantage of SIPAS is its large sample size, wide scope of investigation and the use of an independent organization (Provincial Post Office) to collect data. Therefore, the survey results are objective. However, SIPAS is only used to

measure the satisfaction of citizens and businesses on received public services at provincial level. Frequency of the survey is one every year (not based on real time). Traditional survey methods are quite expensive and the organization responsible for conducting surveys (Post Office) has no analytical capacity. Apart from PAR Index, there is Provincial Competitiveness Index (PCI) and Provincial Governance and Public Administration Performance Index (PAPI) used to measure and rank quality of local governance. These two measurements share similar characteristics of SIPAS, in which the surveying target group of PCI are enterprises and of PAPI citizens.

M-score's tools do not aim at ranking governance quality among provinces. Rather, it help to investigate the areas subject to be improved in each type of public services. Patients can give comments right after completing transactions with PSDUs, so the accuracy of their assessment is higher. The responses are collected, processed and reported periodically by an independent and professional organization, so they are prompt and highly relevant to local government's needs for oversight and supervision. Moreover, given decentralized arrangement in dealing with public administrative procedures, the clients of public services at provincial PASC are often businesses, while that of district OSSs are ordinary citizens. Thus, the M-score allows to collect feedbacks from both businesses and residents at the same time. In other words, it has simultaneously complemented both PCI and PAPI. It can be said that the M-score has addressed the needs of administrative management within each locality (at provincial and district levels).

For health services, the MoH has issued a set of criteria for evaluating hospital quality, including 83 criteria in accordance with the Decision No. 6858 on November 18, 2016. The set of criteria aims to help provincial DoHs aware of actual quality of local hospitals. Evaluation is based on observations, desk review of available records, interviews of the evaluation mission. In particular, some criteria are scored based on interviews with patients or their caregivers. Comparing this set of criteria with the M-score health service scoring tool, a hospital health worker claimed:

The results of the M-Score evaluation are a very good supplement to MoH-led exercise. The DoH is expected to do evaluation following the MoH criteria twice a year according to an evaluation plan made at the beginning of the year. The evaluation mission asks patients right in the hospital when they are still receiving treatment. Of course, patients tend to be afraid of giving authentic feedback because of fear of being discriminated against. In contrast, the M-score collected feedback from patients after they were discharged so it is more objective. Also, it can provide us prompter information on a quarterly basis.

Source: Shared by health workers at Le Thuy General Hospital, Quang Binh Province

In short, the M-score has shown its superiority to become the necessary complement to the existing satisfaction measures used in the government system. When citizens' awareness of their right to monitor and evaluate public services is low, the "passive" data collection techniques will be advantageous, although its running cost may be higher than other proactive techniques. However, as people's awareness has increased over time, the proactive (or self-filling) techniques will be dominant.

Cost efficiency

Cost

By the end of the project, the project' disbursement is 97% of the budget. The disbursement situation over the years is as follows:

Table 3. Disbursement situation compared to the Project's plan, the period of 2017-2019

2017 2018 2019

		Budgeted	Actual ⁷	% of	Budgeted	Actual ⁸	% of	Budgeted	Actual	% of
		(EUR)	(EUR)	budgeted	(EUR)	(EUR)	budgeted	(EUR)	(EUR)	budgeted
-	Operation	200,871.77	78,024.54	38.8	147,855.82	105,562.51	71.4	93,455.74	243,130.80	260.2
-	Management	10,211.06	6,816.00	66.8	12,588.39	5,959.34	47.3	10,482.86	21,144.09	201.7
	Total	211,082.83	84,840.54	40.2	160,444.21	111,521.85	69.5	103,938.60	264,274.89	254.3
	% management	4.8	8.0		7.8	5.3		10.1	8.0	
	costs in total (%)									

Source: Project financial statements

The disbursement rate shown in Figure 7 suggests that the management cost of year 1 and year 2 is only 66% and 47% respectively, while in the third year, it reaches 202% of the budgeted. Similarly, in the first year, disbursement rate of the operation cost was only 40%, then jumped to more than 71% in the second year and above 260% in the last year. The management expense in the last year nearly doubled that in initial budget plan due to number of non-implemented activities in the previous year were carried over to the following year. While disbursement was behind planned, but it was consistent with the project progress, in which most activities of the two provinces were conducted in the last two years. In general, the project budget was now nearly fully disbursed, with a reduction of about 4% in operation costs and increase of 2% in management costs compared to the budget estimates.



Source: Project financial statements.

Figure 7.Project disbursement rate over the years

In general, project funding was used up in appropriate, flexible and effective manner. Although the budget for conducting the follow-up interview technique is high relative to existing cost norms of provincial budget, compared to the paper-and-pencil method of traditional sociological survey, the follow-up phoning interview is much more cost effective. When people become more proactive to exercise their rights to voice – the 'passive' follow-up interview technique will be gradually replaced by other convenient and less expensive ones thanks to ICT advancement.

2.4. Impact

The impact of the Project is reviewed from the angles of service quality improvement, citizens satisfaction, their trust in the government and replicability of the M-score to other provinces.

Public service quality improvement

⁷ Data of 15 months: January 1, 2017 - March 31, 2018

⁸ Data of 9 months: 1/4/2018-31/12/2019

Local government's efforts to improve public service quality were acknowledged by local people. For example, monitoring data on tablet-based scoring in 2019 in Quang Tri (Figure 8) shows that: For health services, percentage of health service receivers, who were satisfactory and very satisfactory, remained stable at around 50% in the first 10 months. For public administration services in OSSs, there was a remarkable improvement when the average satisfaction score increased from 4.3 points (out of 5) in January to 4.9 points in October.

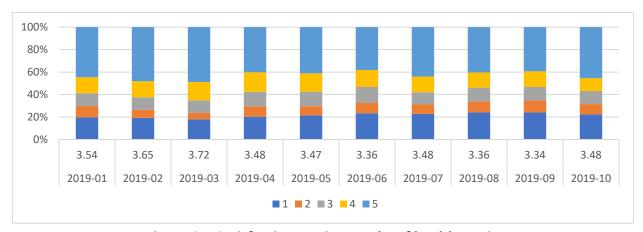


Figure 8a. Satisfaction scoring results of health services

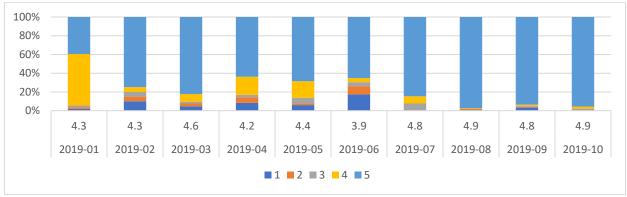


Figure 8b. Satisfaction scoring results of public administration services in OSSs Source: Processed from monitoring data provided by RTA

Figure 8. Average score of client satisfaction in tablet-based survey in Quang Tri, 2019

Box 3. Efforts to improve the quality of medical examination and treatment services at Quang Tri General Hospital

Quang Tri PGH was established under the Decision No. 113/ QD-UBND dated August 5, 1989 of Quang Tri People's Committee. It was graded as the 2nd level hospital with a capacity of 300 patient beds. On February 1, 2016, it was upgraded to the 1st level hospital, with a total area of 21 hectares, 1,178 beds, 635 health workers, 33 departments (7 functional rooms, 7 subclinical departments and 19 clinical departments). The hospital's main functions and mandates include: (1) Providing emergency, medical examination and treatment services; (2) Training for health workers; (3) Undertaking medical R&D activities; (4) Technically supervising lower level health centers; (5) Providing preventive care; (6) Facilitating international cooperation; and (7) Conducting health economic management.

As a PGH with an average of 400 to 500 visits and 900 to 1,200 inpatient treatment per day, Quang Tri's Hospital not only serves people in locality but also neighboring provinces and Laos. Therefore, it was often in overloaded status and service quality was criticized by patients and their caregivers.

Through the M-score tool, the hospital found that the lowest rated aspects of the service included long queue for check-ups and completion of registration procedures, dirty toilets and expensive catering service in canteens. Hospital leaders considered these issues bottlenecks to be addressed immediately.

In order to reduce waiting time for registration procedures, the hospital manager decided to increase number of examination hubs from 8 to 17 and check-in counters from 2 to 7. This was a great effort of the hospital, given fixed staffing quota and stressful and overload status.

Regarding catering service in canteens, the hospital leaders determined to eliminate monopoly. Since there was a sole service provider in canteens, patients were sometimes overcharged and ripped off. The hospital managers opened up bidding and allowed two other private service providers to participate. Competition has forced these private organizations to lower prices and improve service quality.

Improvement of facilities (toilets) hygiene was the most headache issue since it depended on funding. Recognizing the importance of the PGH, the DoH leaders provided the hospital a grant of 50% of funding need for repairing and upgrading the facility in 2019. Remaining 50% of reparation cost would be pledged in 2020. In addition, the hospital managers increased frequency of toilet cleaning and set up routine monitoring system of its cleanness. Communication with healthcare receivers was strengthened to raise their awareness of keeping public toilets clean.

Thanks to these responsive actionss, the average score of patient satisfaction in Quang Tri PGH improved over time.

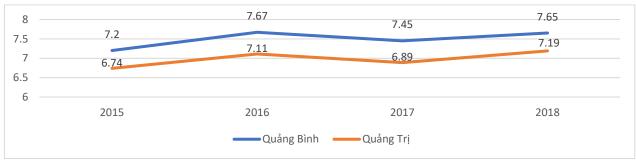


The average score for waiting time was boosted up from the base-line level, increasing from 3.9 points (August 2017) to 4.2 points in March 2019. From September 2017 to May 2018, the score for hygiene level felt from 3.8 points to 3.5 points but in March 2019, it turned back to 3.75 points and reached 4 points in some months⁹.

Source: Key informant interviews and field surveys at Quang Tri PGH and monitoring data provided by RTA.

Improved service quality increased client satisfaction, which was an important factor in measuring PAR Index and PAPI. Figure 9 presents the average PAPI score of Quang Binh and Quang Tri provinces during the project implementation period. While improvement in PAPI score could not be entirely attributed to the M-score project, the upward trends in this indicator value in both provinces implied a positive correlation with the increasing level of satisfaction reflected in the M-score.

⁹ RTA 4/2019, REPORT ON QUALITY OF HEALTH SERVICES IN QUANG TRI BASED ON M-SCORE HEALTH INDICATORS.

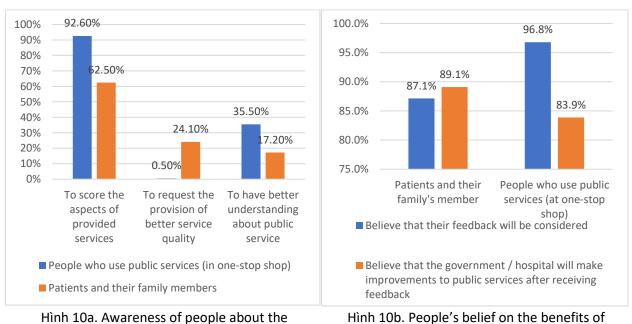


Source: UNDP, PAPI score, multiple years.

Figure 9. PAPI of Quang Binh and Quang Tri provinces in the 2015-2018 period

People's trust in M-score tool and the learning attitude of government agencies.

Citizens' awareness and trust in the M-score tool were also strengthened. Figure 10a reflects respondents' understanding of the meaning and purpose of feedback on public administration service quality for the two groups of respondents: patients' family members (for health services) and individuals who had direct exposure to public administration services at OSSs. The results showed that 93% of respondents interacting in OSSs and 63% of the patient's family members understood that their feedbacks were used to evaluate quality of services provided. If number of respondents choosing "Other options" is counted (since they pointed out dual scoring purpose of feedback survey as for service quality assessment and for higher quality service requirement), number of precise answer about the purpose of the M-score among the group of patient's family members reached 87%. Such percentage indicated that people were well aware of the purpose of the M-score as to improve service delivery.



purposes of M-score

Hình 10b. People's belief on the benefits of service scoring

Source: Consolidation from survey data of the evaluation team

Figure 10. Citizens' perception and trust in the M-score tool

Similarly, Figure 10b shows that 80-90% of respondents believed that their opinions would be seriously taken into consideration by local government, who would then have positive responses to improve service quality. This should be seen as a positive signal because after all, building trust on state agencies is essential for people to actively and responsibly participate in evaluating public administration service quality.

This finding is similar to the results of the PSI survey on 25 hospitals, of which 22/25 (or 88%) of the hospitals confirmed impact of PSI evaluation results on changing the way of service delivery and management practices. 96% of hospitals responded that patients' feedbacks were taken seriously. 21/25 PSI implementing hospitals (accounting for 84%) believed that if the M-score tool would be applied widely to all health care institutions, a significant change in the health services quality nationwide could be reasonably expected. 76% of hospitals pointed out that level of patients' satisfaction increased after PSI survey was undertaken.

Scaling up of M-score and possibility of integrating the M-score into the formal system.

Apart from its direct support to Quang Binh and Quang Tri provinces, the M-score Project also worked with central agencies, particularly the Administrative Procedure Control Agency (under the umbrella of OOG), to provide legal assistance for the promulgation of Decree 61/2018/ND-CP on simplification of public administration procedures in OSSs and Inter-sectional OSSs, and the Circular 01/2018/TT-VPCP providing guidance for Decree implementation. In addition, the Project collaborated with the Agency of Health Examination and Treatment - MoH to conduct PSI surveys following the M-score approach.

Provision of legal assistance to formulate the Decree and guiding circulars on administrative reform. Via the M-score Project, the OOG contacted Oxfam proactively to ask for legal assistance to formulate Decree 61. This legal document was expected to bring a paradigm shift in administrative procedures via OSS mechanism or the inter-sectional OSS mechanism. In the Decree, provisions on evaluating public service delivery have been introduced. Supporting OOG to organize three workshops in three regions to discuss issues including evaluation of service quality, strengthening of public governance or ICT application in PAR. Besides, in the course of formulation of the Decree, the Project continually worked with the Administrative Procedure Control Agency and proposed many specific recommendations to improve the draft of the Decree. Specifically:

On July 15, 2017, Oxfam sent the first paper of comments with seven specific recommendations, of which the first five recommendations referred to good governance, the sixth proposed the roadmap for computerization of procedures and the seventh mentioned about M&E of the implementation of administrative procedures. The first 6 recommendations were incorporated into a draft of the Decree of July 18, 2017. At the workshop on July 20, 2017, the 7th recommendation was put under discussion and accepted in the draft dated July 28, 2017.

Oxfam also emphasized the necessity of further study for more specific, reasonable and feasible regulations on three issues: (1) Ensuring the rights and interests of disadvantaged groups when implementing administrative procedures.; (2) Developing a set of evaluation criteria and indicators applicable to each stage of administrative procedures and facilitating people's participation¹⁰; (3) Developing a roadmap for computerization of administrative procedures relevant to Vietnamese context. Eventually, Decree 61 adopted 7 out of 10 Oxfam's recommendations.

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¹⁰ Circular 01/2018/TT-VPCP mentioned the system of criteria for evaluation as recommended by Oxfam.

Notably, the Decree officially uses "satisfaction of organizations and individuals as a measure of service quality and efficiency of public agencies" (Article 4, Clause 1), and acknowledges "...monitoring, oversight, and evaluation should be made by different ICT-led methods and engagement of organizations and individuals.... "(Article 4, Clause 4). In addition, Article 29 of the Decree formalizes the use of information collection modalities, including M-score tools (such as: electronic evaluation devices at the OSS counters, online evaluation via the One door information system or independent and regular or periodic sociological surveys ...) through follow-up phoning surveys, online surveys, or via mobile apps, tablet, social networks... "(Article 29, Clauses 1, 2). In short, the project has made significant contribution to the promulgation of a legal document serving PAR and e-government building agenda. Cited Prof. Dang Hung Vo - the Oxfam consultant supporting OOG in formulating Decree 61: "This is among rare cases where the OOG adopted so many ideas from a non-governmental organization".

As such, the project has contributed to gradual shift from the traditional method of public opinion polling to new ICT-based survey techniques. This is considered the first step to influence the internal monitoring mechanism of government agencies and monitoring of each stage of administration procedures, processes and relationships between the governments, ministries and provinces. With the establishment of public service portals at the national and provincial/ministerial-levels, the OOG expects to be able to disaggregate public administrative procedures into different stages, allowing citizens to assess public service quality not only in ultimate results, but also in all stages of the process. If do so, the problems raised by District OSS staff members could be shown.

Collaboration with the MoH to conduct PSI surveys in hospitals nationwide. In response to the M-Score initiative and to implement Resolution 30c/NQ-CP on the Master PAR for the period of 2011-2020, the MoH issued numerous important policies to accelerate sectoral reform in the direction of "patient-centered care". The MoH is also the pioneer in institutionalizing the public opinion collection and patient satisfaction evaluation as a part of the process of management over medical examination and treatment services at health institutions (according to the Circular No. 19/2013/TT-BYT dated July 12, 2013). The Ministry also issued a set of criteria for hospital quality evaluation, in which ensuring patient satisfaction is one of five criteria. Particularly, the set of 83 criteria for hospital quality evaluation were established elaborately and scientifically. However, patient satisfaction is measured based on the views of patients and/or patients' caregivers, who are still in treatment. This arrangement may harm sufficiency, neutrality and objectivity of information, which represents the biggest limitation of this tool.

In August 2016, the MoH assigned the Agency of Health Examination and Treatment, in coordination with VNI, to develop and conduct pilot PSI surveys. With the support from Oxfam, PSI surveys were conducted for the first time in 2017 and interviews were carried out with 3,000 post-treatment inpatients from 29 public hospitals across the country. By 2018, PSI surveys were implemented on a larger scale with 7,500 post-treatment patients and their relatives from 60 public hospitals in 23 provinces and cities. The representative of the Agency of Health Examination and Treatment provided that the number of registered hospitals became much larger, demonstrating their increasing concerns on the opinions of patients and their relatives regarding service quality. PSI surveys were also conducted via follow-up telephone to gather opinions of patients who had been discharged from the hospitals in a short period of time (not too long) because they had experienced all the stages of the medical examination and treatment process

and had no longer been involved in the treatment in the hospital. Furthermore, surveys were performed by independent entities. Therefore, the survey results are considered more objective, reliable and persuasive from perspectives of health service receivers and health institutions.

The patient satisfaction rate of more than 80% reflected from PSI survey results was reasonable. If the rate was too high, such as continuously above 90%, it may cause suspicion. Hospitals also adopted patient opinions from the PSI surveys as indicator for service quality improvement. For example, they made lavatories, hospital's precinct greener, cleaner and more beautiful. Even the Prime Minister also expressed his concern on the quality of lavatories.

Source: Shared by Mr. Duong Huy Luong, Division of Quality Management - Agency of Health Examination and Treatment - MoH.



Photo: Workshop on announcement of 2018 PSI results

Source: Oxfam

This view is consistent with those reflected in the ETR online surveys on engaged hospitals. The survey showed that all hospitals kept very positive view over PSI exercise - an evaluation indicator designed based on the M-score initiative:

92% of hospitals affirmed that the M-Score tool motivated them to better undertaking of their roles and responsibilities, and considered the patients responses be accurate and objective. A similar proportion of hospitals admitted that the evaluation tools and criteria reflected accurately the service quality at their hospitals. Up to 15 hospitals showed their full support to the new feedback tools and other 9 hospitals had conditional support to the idea provided that adequate facilities and sufficient resources are ensured. In sum, only 1 out of 25 hospitals rejected the approach.

Source: Compiled from the results of surveys with hospitals piloting PSI

In general, the health sector highly appreciates the M-Score initiative - the PSI survey tool. In the Workshop on Announcement of the PSI report 2018, Dr. Nguyen Viet Tien - Deputy Minister of Health – called for joint efforts from all hospitals in this scheme. In a follow-up meeting in August 2019 with hospital managers in Ho Chi Minh City and Hanoi, the Minister of Health announced 7 solutions to improve the quality of healthcare services, including "independent and transparent

M&E system". The MoH also revealed the scheme to recalculate health care fees, diversify health insurance services, and promulgate new regulations to address issues related to health care costs. This scheme is to respond to patients' biggest concern pointed out in the 2018 PSI Report. In an international conference on hospital management dated September 11, 2019, the MoH used PSI as one of the reliable sources on hospital service quality in Vietnam.

Spillover effects of the Project. Project made positive impact not only within two beneficiary provinces where the project took place but has spread out to others. Many provinces, such as Dong Nai, Ho Chi Minh City, Quang Ninh, have learned the project's experiences. For instance, in 2015, Dong Nai province actively approached RTA to ask for help in building an evaluation system to be exercised by local people, which combines the forms of paper-based survey, follow-up interview and via apps on mobile phones. Accordingly, the Provincial Post Office was the agency commissioned to conduct the surveys. The survey was funded by the provincial budget. Up to now, Dong Nai province is the only province that has developed a unified system of internal process for 2,000 administrative procedures at all three levels, namely the provincial, district and commune levels, in which time limit for processing administration procedures in each stage is specified. The process can be publicly monitored by everyone. The province frequently updates and improves this evaluation system.

The content of the survey (in 2018) is designed to be more concise, focusing on emerging issues in 2017 and the PAR agenda implemented in 2018. Especially, an indicator was developed to show proportion of civil servants who cause troubles and harassment; effectiveness of coordination with 1,022 Call Centers on public services to handle people's feedbacks and petitions, and limitations in the implementation of online public services and public postal services. Satisfaction rate for each criterion was rated on the 10-point scale, which is different from the 2017 approach when feedback was classified only by satisfactory and dissatisfactory. The scale is more detailed and specific than in 2017.

Source: Dong Nai People's Committee (2018), Report on the Results of Public Opinion Survey on the Service of Public Administrative Agencies in 2018.

Leaders of Ho Chi Minh City also took a visit and investigated experience of satisfaction evaluation of the M-score project in Quang Tri. The city has actively tested the satisfaction rating system together with receiving, processing and returning the results via the city portal of public services and online OSS system under the Decree 61 for 4 administrative procedures, including issuance of permits for house construction; registration for business operation and tax coding registration, birth, permanent residency, issuance of health insurance cards for under 6 children; death reporting, and withdrawal of permanent residency registration at three district People's Committees and nine commune People's Committees, including Tan Son Nhi, Hoa Thanh and Son Ky (Tan Phu district); Hiep Phu, Phu Huu, Truong Thanh (District 9); Cu Chi, Tan Thong Hoi, Tan Phu Trung (Cu Chi District). Although application of the new approach has not covered all administrative procedures as in the case of Dong Nai province, Ho Chi Minh City is the first province that applies online satisfaction evaluation on the provincial portal of public services in accordance with the standards set out in Decree 61. The OOG expects that the city's pilot experience will inspire replication in other provinces across the country.

In short, despite having been implemented for a short period of time, the M-score tool showed obvious impacts on improving clients' satisfaction, strengthening their credibility on scoring tools

and the improvement of public service quality. The greatest impact of the project is reflected in its support to the formulation of Decree 61 and Circular 01, which allow expression of the people's views and their levels of satisfaction with public services and application of satisfaction rating methods based on ICT-led initiative of the M-score Project. Besides, the project has interested by many other PAR pioneering provinces. The success can be attributed to the fact that the Project is very relevant to the Government's PAR and e-government building agenda, bringing about a paradigm shift in PSDUs' concern about service quality, and becoming a useful monitoring tool for supervision agencies. Given such evidences, it can be concluded that the Result 3 of the Project have been successfully achieved.

2.5. Sustainability

Sustainability refers to the possibility of maintaining the project's benefit after the project ends. The sustainability of this project is evaluated at two levels: (1) at the local level, it is reflected via citizens' willingness to continue using the M-score tool and the commitment of local government agencies to respond to citizens' feedback; (2) at the central level, it is shown by the extent of institutionalizing M-score or other similar tools in government's legal documents. As the project sustainability at the national level was thoroughly analyzed in the previous section, this section emphasizes on project sustainability at the local one.

Institutionalizing the M-score tool in beneficiary provinces. M-score was highly valued at the beneficiary provinces.

Evaluation of subordinate agencies' performance was conventionally conducted via survey or checklist of supervisor units, which is called internal evaluation. As M-score allows citizens to express their opinions, which are synthesized, analyzed, and reported by an external independent agent, the result is more objective. It is also more aligned with the general direction of encouraging citizens raising their voices. Promote decentralization is must-do thing, but it will be effective only if accountability holding system is set up. The M-score has provided us a good monitoring tool.

Source: Reflected by Ms. Nguyen Thi Trung Tuyen, a Quang Tri PPC member.

Since application of the M-score tool to all public administration services in district OSSs has gained positive results, Oxfam actively prepared a wise exit strategy by delegating system management to provincial government in February 2018. Quang Tri PPC allocated VND 2.8 billion from the state budget to adopt this tool in the next three years (2019-2021). In the project closing conference, the PPC was drafting another scheme to allocate VND 700 million for continuation of the M-score application in health care service in this period. The representative of the Department of Finance also highly valued this scheme. She emphasized that in the context of fiscal autonomy, a tool for PSDU performance evaluation in the province is extremely needed. As M-score enables collection of objective feedbacks from public service clients, it is necessary to use the tool as a key performance indicator for those units.

Quang Binh PPC is planning a VND 2 billion scheme to maintain M-score in both public administration services and health care services in the next 3 years. Although the scheme has not been officially approved, the representative of the Department of Finance revealed that funding would be available under a budget line of "funding for other economic services".

Obviously, positive project results were persuasive to beneficiary provinces and they were willing to introduce this tool in the formal system by securing its funding need from the provincial recurrent budget. However, as the scheme will end in 2021, whether this tool can be integrated permanently into the formal system to collect citizens' feedbacks remains an open question. In other words, the long-term sustainability of the M-score project largely depends on the long-term commitments of the Provincial People's Committee's decisions, with clear statement of using the M-score as an official source for collection of citizens' feedbacks.



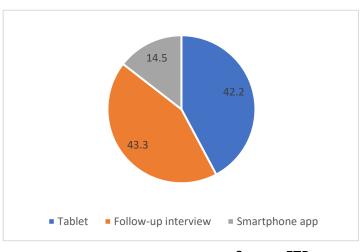
Photo: Citizen using tablet-based evaluation technique

Citizens' willingness to use the M-score. 100% of respondents engaged in tablet-based evaluation and 90% of respondents participated in follow-up interview agreed that the M-score tool should be maintained. It implies that once citizens have a chance to experience these techniques, they will not hesitate to use them in the next time or with other public services.

Among digital scoring techniques, 404 respondents (out of 923 respondents of

this question) prefer the follow-up phoning interview (accounting for 43.3%) to tablet-based

technique (nearly 42.2%), and smartphone apps (14.5%) (see also Figure 11). This result matches with our arguments that the follow-up phoning interview technique is the most suitable vehicle in the early phase when people have limited experience on this tool. Although scoring via smartphone app is the most convenient form, it requires certain ICT experience and skills and higher evaluators' accountability.



Source: ETR survey

Figure 11. Citizens' responses on their most preferred evaluation techniques

Similarly, 96.2% of respondents reflected that they were willing to use these evaluation techniques and introduced them to others. Local citizens accepted the M-score tool as a mean to voice frankly and comfortably. However, long-term use of the tool will largely depend on the responsiveness of local administration to citizens' reflections.

As one of the users of M-score evaluation results, 92% of hospitals engaged in ETR online survey recommended to maintain this tool as a mean of hospital service quality evaluation. Furthermore, 68% of hospitals agreed that the M-score evaluation results should be used to rank health care institutions regularly in the province.

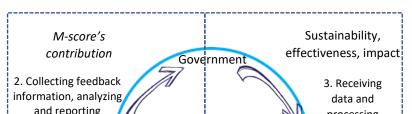


Figure 12. From citizen's reflections to policy response.

The degree to which the policy responds to citizens' feedbacks. Participatory policymaking theory in Figure 12 presents a 4 step sustainable policymaking process: gathering citizens' feedback (step 1), screening and analyzing collected information, and reporting to authorities for their processing (steps 2-3), and proposing policy reactions (step 4). However, in practice, not all feedback from citizens can be translated into policy reactions, because it depends on many other constraints (such as budget constraints, the power of policy-making agencies, or other more urgent priorities...). Therefore, the extent to which citizens' feedbacks are translated into policies and why some recommendations cannot be taken into account should also be communicated with the public in a timely and frank manner. Transparency is an important principle to maintain people's trust on the government and encourage them to keep sending feedbacks in the coming cycles.

For the M-score, four steps of the policy-making cycle was well implemented by the provinces. The PPCss themselves were aware of the importance of communicating with citizens on the extent that their feedbacks were responded.

Sometimes in the PPC meeting, the meeting Chairman received up to forty direct phone calls. We sat on the meeting panel, we pointed out immediately which line departments must answer to what. For example, if in this today's morning, I received complains or questions about an issue. I asked for clarification of which department responsible for handling the issue, and asked that department to report how it would deal with that issue in next day. Voters then are informed and they will be very happy with that.

Source: Shared by Mr. Nguyen Duc Dung, Standing Vice President of Quang Tri PPP

Some hospitals maintained a regular meetings between the Patients' Comission and the hospital managers to inform patients about what the hospital had responded to their legitimate proposals. Those communication mechanisms are necessary but not sufficient. Even though the PPC's onsite responses can increase citizens' pleasure, they still need to be transformed into a routine to strengthen public servants' accountability. PSDUs also need to take full advantage of mass communication channels (such as bulletins, loudspeakers, etc.) so that information can approach all target audience.

In addition, in order to maximize the project outcomes, Oxfam had a wise exit strategy to minimize operation costs by gradually transferring the M-score to each province for their self-management, applying cost norms issued by the PPCs, using local officials to replace hired staff, cutting less relevant expenses (such as funding to mass organizations for their project advocacy activities, etc.). At the end of the project, many hospitals clearly saw benefits of the M-score tool and were

willing to share the maintenance cost of the system with state budget. That has undoubtedly reinforced the sustainability of the Project.

This tool gave us accurate information about hospital service quality. Thus, if the project terminated, it would be extremely regretful. As long as this activity is hosted by the PPC to secure its objectivity, we could share maintenance cost of the system from the hospital's budget.

Source: Shared by Ms. Nguyen Thi Luyen, Deputy Director of Quang Tri PGH, at the Project Closing Conference on December 17, 2019

In summary, there is strong evidence that these tools will continue to be maintained in the beneficiary provinces and replicated in other provinces. The fact that the M-score has been recognized as official feedback gathering channels in the Government's Decree 61 is the most important evidence that M-score has actually entered Vietnam's public administration system.

Nevertheless, the implementation of the M-score Project has some limitations as follows:

Firstly, similar to all project interventions, the M-score Project could only take place within time and budget constraints, in which, the Project could only be implemented with two public services, Health Service and Public Administration Service. Therefore, there is insufficient evidence to continue replication to other types of public services. In principle, scaling up to other types of public services or other social sectors is feasible (as will be further analyzed in the next section). However, each type of public service has different characteristics, so when the replication is made, deeper sector study and adaptation is needed. As a result, the ETR could not have sufficient information to recommend adaptation strategy if it is proposed to be replicated in other public service sectors such as education, culture, utility (electricity, clean water, garbage collection, etc.).

Secondly, the tools need to be constantly upgraded and improved to become more user-friendly and convenient, especially for rural or ethnic minorities. The operational stability of the devices (such as the quality of tablets, communication skills of phone-based interviewers, etc.) should be guaranteed to best serve people's evaluation process.

Thirdly, the communication for the project has been actively supported by the local media, but the communication form is still rather traditional and boring. Media agencies need to develop new, creative and more attractive forms of communication in alignment with local citizens' interests and local cultures (such as sharing experiences, role playing, development of case studies, etc.) and more importantly, communication should not only be one-off campaign. Rather, it should be repeatedly made with updated content.

Fourthly, the participation of mass organizations was rather insignificant. In the first phase, the Project allocated some funding for local socio-political organizations to educate their members to participate in the Project. However, the message was only to call people for supporting a project chaired by the PPC. It was not compelling enough to make citizens understand that feedback provision was their rights and obligations to build a government of people, by people and for people. Therefore, when this funding is cut (to minimize project operation cost to an affordable level for the provincial budget), these mass organizations were no longer continued their advocacy efforts. If the M-score is to be applied to other social sectors, the role of these mass organizations should be appropriately emphasized.

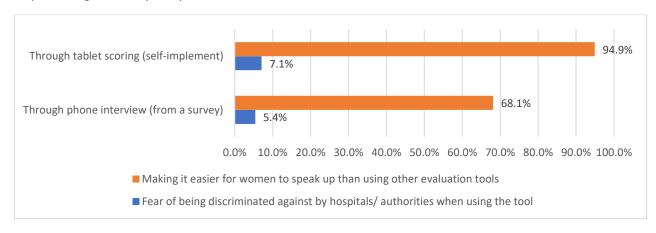
Finally, although the Decree 61 has paved the way for the large scale application of the M-score, the Decree also allows provinces to use whatever techniques (including the traditional ones such

as filling out paper ballots after the end of a transaction, suggestion box, citizen reception, etc.) to measure citizens' satisfaction within local budget constraint even though these techniques may not be so effective. Thus, the ability to maintain or replicate the M-score will depend greatly on the determination of each province, reflected in its readiness to institutionalize, allocate funds and human resources to sustain this model (such as in Quang Binh and Quang Tri).

2.6. Gender issues

The ETR survey (Figure 13) showed that the majority of respondents felt comfortable in using these tools regardless of which M-score techniques (tablet based or follow-up interview) were adopted (less than 5% of respondents said that they were afraid of being discriminated by PSDUs, equivalent to 59 persons in the sample size of 979 interviewees).

It is interesting that up to 70% (or 479 respondents) said it is easier for female to express their opinions with the follow-up interview technique. The corresponding rate for tablet-based technique is even higher (nearly 95%, or 282 persons) since the later does not require them to be exposed to the interviewers. In other word, M-score is a 'gender neutral" tool, implying that the tool allows both male and female to freely and confortably raising their voices. In a society where women are often defensive and hesitate in expressing their own views, this finding is a positive impact on gender equality.



Source: The ETR survey results

Figure 13. Respondents' perception of advantages of the M-score tool

In summary, the M-score helps to increase voices of women, who are often shy and reluctant to express their own opinions publicly. If properly designed (in terms of questions and approaching strategy), the M-score can gather feedback on gender sensitive issues (such as domestic violence, women and children trafficking, prostitution...) or other social issues (ethnic and religion discriminatio,...) that have not been collected effectively for long.

3. Evaluation of technical aspect of the M-score

General assessments of the technical aspect of the M-score tool are based on discussions with RTA and collected feedbacks/comments in the field mission.

3.1. System structure

Under technical perspective, the structure of information management system is shown in Figure 14.

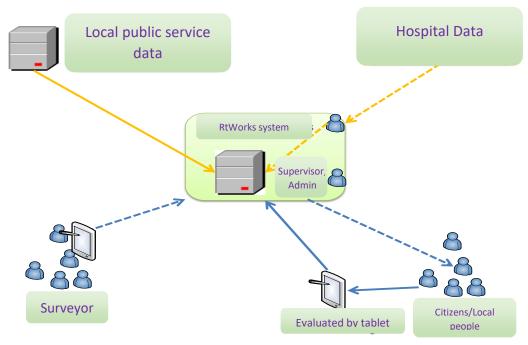


Figure 14. Structure of information management system in M-score

As shown in Figure 14, all survey management-related activities were computerized on a clearly decentralized workgroup model with the intensive participation of management and supervisory team operated by RTA. Most of the activities related to checking, archiving data and integrating, analyzing reports can be done automatically on real-time Works software system.

In alignment with the maturity and completion of the evaluation tools, RTA itself has also researched and formed its own work management platform with the increasing application of mobile technology.

Some analyses on the technical infrastructure of M-Score tool are as follows:

- On tool management: M-Score evaluation system is originated from abroad, but it has been completely adapted and modified for using in Vietnam. The technical flatform was built and operated effectively by a Vietnamese partner. The company's technical staff have rich experiences in developing the project management software system from the begining of the project, so it has formed a professional management application with a strong combination and inheritance of features of mobile technologies (mobile application, web, voice gateway);
- On technical platform: Real time Works system is a Web application with an interactive API, whose design is quite flexible and highly adaptable to many forms of assessment/survey with a relatively good combination between labor and mobile devices. The current system can serve well not only the requirements of evaluation and analysis according to existing tools, but also be customized for use with other evaluation criteria. The work involved in the assessment process is fully modularized allowing the integration of calculation and analysis tools into each stage (calculation, sample selection, frequency analysis, reporting, interacting with external inputs etc.);
- On technology device: The operation of the entire system was done without any technological complication (voice gateway, web hosting, data and api...). All these system and devices can be outsourced or equiped and operated by the company with reasonable cost. This system can serve various goals and expand by incorporating analysing tools associated with artificial

intelligence to reduce the dependence on labor in some stages (audio digitalization, survey reliability testing, etc.);

- On management of devices: The current system (regarding to follow-up phoning interview or tablet-based technique) was already completed, accordingly:
 - All interview calls are made through a Voice gateway, then recorded and archived in a centralized system which directly managed by the Company. RtWork software allows to control call status and quality easily;
 - All tablets were installed with RtWorks application separately and have a mechanism to control the operational status of the device at the facilities. RTA have shared the system which has the function of reporting the operational status of the tablets in order to support the local maintenance operation team in the solving problems to ensure the continous operation of the device.
- RTA itself is undergoing a change in personnel structure to serve its current work, specifically:
 - There is a clear role of project management and survey conducting with relevant professional personnel (statistics, analysis, sociological surveys, etc.);
 - Form a development team to operate and upgrade the system techniques to meet current needs as well as upgrade and expand the system in the future.

3.2. The technical process of getting feedbacks

Procedures for performing the entire technical process from step of the surveyor selection to the step of survey implementation and draft data analysis are organized in closed form (only those who participate in the system can access to the software according to the their decentralized functions and roles). There have not been any reference document describing the system in an understandable format for the purpose of communication with stakeholders.

Some findings in understanding RTA implementation procedures are as follows:

- The 3-step selection process for surveyors is relatively flexible. This process could help surveyors to develop the capacity for self-study and familiar with the system. Surveyors are organized on a decentralized model with the close collaboration with the supervisors and supporters through monitoring the interaction process on the RtWorks system and the KPI performance evaluation set by the Company.
- The survey implementation process is strictly controlled and applied credit scoring mechanism through the verification of the reliability of survey results (by comparing survey questionnaire with recording of survey calls). The controlling and credit scoring mechanism are classified and applied according to the qualifications and capacity of surveyors. This can be considered an important factor to help improving confidence and reliability of the survey.
- The process of digitalizing the input of the survey samples and calculating the sample size has also been set up relatively complete, specifically:
 - With data on public administrative services, the mechanism of linking information with local databases has been established and fully automated;
 - With patient data, if the linkage of information with the local database is not implemented in the first stage due to lack of necessary attributes (phone number ...), it is also standardized in cleaning and reviewing data before entry into the database on RTWorks system with the participation of technical staff.

 Mechanism of sample calculation, sample selection has been softwareized and centrally managed on the system. This allows calculating the sample scientifically according to common standards of survey.

3.3. General evaluation

- The technical infrastructure for implementing M-Score is considered reliable and can be applied to other tools (PAPI, DDCI...) without any technological difficulties. (The company has also introduced and provided this solution to Dong Nai province for its own implementation).
- To apply this tool, organizations and government agencies can use the M-score tool in at least three forms depending on financial and human resource availability.
 - Hire RTA to operate: RTA will be in charge of all technology and personnel issues. The
 host agency only provides input data on the services. The operational cost may be "high",
 but the independence of evaluation process will be ensured with good coordination and
 control mechanism.
 - Only hire technical service from RTA, the host organization will be in charge of human resource in conducting the evaluation. RTA will provide services using the RtWorks system (by account number), training methods and general technical support. The implementation cost might be lower than that of the first option but the pressure in organizing and coordinating evaluation of host agency will be relatively high.
 - Order local technology companies to design similar M-score technological solutions. For provinces which competent technology companies are available in the area, the PMU may coordinate with the survey implementation unit to select the appropriate technological solution provider on the basis of competitive bidding.
- It can be seen that RTA is fully competent to be able to undertake the same evaluation tasks as M-Score or on a larger scale without any major technological difficulties because they have invested a lot in software technology as well as human resources for implementation. However, depending entirely on a single supplier can be a risk for the M-score model, which should be carefully considered.

Part III: Lessons learned and Recommendations

1. Conclusions and lessons learned

Overally, the M-score project is a successful project in all three result areas. The project has got great concerns from citizens, directed them to effectively excercising their rights to monitor and evaluate public service quality. Since then, citizens' awareness has been raised and they are increasingly convinced that their active participation will be listened by local authorities, leading to positive changes in public service quality. Government agencies have gradually shifted from skepticism and hesitation to high appreciation because M-score has provided objective and timely information for oversight, supervision, management and improvement of public service quality. At the macro level, the Project has contributed significantly to the issuance of high-level legal documents to promote PAR and e-government building agenda.

With regard to 5 project evaluation criteria, the M-score project is seen as relevant, efficient and effective. The M-score project has great impact at central and local levels, even outside of the project area. In the medium-term, the project has affirmed its sustainability, but in the long-term the project sustainability depends on the decisiveness of each province.

Success of the project is due to fundamental causes as follows:

Selecting the right strategic partner of the Project. At the begining, the M-score project has identified the PPCs as local partner in Quang Binh and Quang Trị province. This is a wise choice for the following reasons:

Firstly, PPC is elected agency with the mandate to oversee executive agencies' performance. Thus, the PPC is always willing to know opinions and expectations of local people/voters via independent feedback channels. The M-score has met the needs of the PPC.

Secondly, as a legislative body, the PPC does not have any conflict of interest with line agencies or PSDUs. The PPC's evaluation based on cosring results is considered neutral and objective. Therefore, this evaluation was easily accepted by line agencies and PSDUs. Currently, many line agencies wish the M-score system to be continued as long as the system is hosted by the PPC.

Thirdly, as the most powerful agency in the province, the PPC's opinions might quickly be translated into commands for line agencies or interventions by PSDUs. As a result, although the project life is quite short, many project activities including those required intensive coordination among agencies have been promptly implemented.

Fourthly, one of the important functions of the PPC is to approve the local budget plan. This will be considered an advantage for maintaining project impact and sustainability. The PPC might proactively discuss with other provincial departments about the continuation of the M-score in the province.

Flexible approach in introducing the M-score. Overall goal of the project is to apply ICT products in designing digitalized citizens' satisfaction scoring techniques. Therefore, the project has designed and introduced variety of scoring techniques. Depends on the extent of local readiness, they could flexibly apply the most appropriated one(s). Both follow-up phoning interview and tablet-based survey techniques were used effectively in Quang Tri province, so that by the end of 2019, the project has pilotted the scoring technique in smartphones application with 200 clients. On the contrary in Quang Binh province, while local people's readiness of using proactive (self-filling) scoring techniques was not as high as expected, the province stopped using tablets and focused on the follow-up phoning interview technique. This is consistent with the roadmap for

gradual introduction of new ICT applications in the real life: When local people are not familiar with new technology and do not have a strong belief in the effect of their scoring results, the priority was placed onusing the "passive scoring" technique - follow-up phoning interview. This technique will be gradually replaced by more proactive techniques, depending on the extent of local people's readiness, provided the ultimate outcome as moving to evaluating public service quality via the smartphone app or on local public service portals (as targeted by the Decree 61).

The involvement of independent monitoring agency as RTA is one strength of the M-score Project. This is a multi-functional and professional company which could peform variety of tasks, including designing the M-score tool, collecting and archiving survey data, analyzing information and reporting periodically to relevant stakeholders. As a system designer, RTA has accompanied with Oxfam and provinces to continuously adapt the tools to local conditions¹¹. As a professional data analysist, RTA's report is often concise and timely with scientifical data, so it is trusted and agreed easily by all parties. Moreover, RTA company also help expanding the M-score tool to other provinces. For example, both Dong Nai province and Ho Chi Minh City have used RTA's technical assistance services, thereby increasing impacts of the project. In fact, it is not easy to choose multifunctional independent survey company like RTA. For example, Dong Nai Province has signed a contract with the provincial post office to conduct the survey, but the province itself was not satisfied because the provincial post office was not able to process data and provide reports, nor could it fix the software errors as provincial requirements due to lack of professional capacity. As mentioned above, relying on a multifunctional independent survey company is both a strength and a risk that localities need to consider in the future.

A constructive perspective when using the people's evaluation results. Introduction of the M-score tool has caused considerable concern for both line agiencies and PSDUs at the beginning of the project. On one hand, these agencies have often been under pressure in providing information for many indicators (PAR Index, PCI, PAPI or set of criteria on hospital quality measurements). Having a new evaluation tool makes them feel waste of time and resources. In addition, this tool was initiated by a specific project so it was not compulsory. On the other hand, it is reasonably concerned that if the results of this assessment were not encouraging, their reputation and recognition might be eroded. Understanding these concerns, the PPC discussed intensively with other provincal departments to reach consensus on the main purpose of this assessment as to 'know ourselves and make things better". In fact, there were lots of discussions among PPC, line departments and PSDUs to find solutions based on citizens' feedback. With learning-by-doing attitude and constructive view in using the citizens's satisfaction scoring results, PSDUs' attditude shifted away from hesitation towards appreciation and support. At the Project Closing workshop in Quang Tri on December 17, 2019, majority of participants suggested to continue using this tool and using the results to rank PSDUs. In other words, the M-score tool has been used locally, not only as an communication channel to improve service quality but also as a measure to improve accountability in the system.

Emphasis on the role of communication activities at the beginning of the project. The local media and mass organizations were identified as important partners in the inception phase of the project

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¹¹ There are lots of examples of RTA's contribution: from the hospital-wide health service quality evaluation software, RTA adjusted the questions so that it can be used for departmental level. The questionnaire and interface on tablets located at provincial/district OSSs were continuously adapted to be more realistic and user-friendly. RTA also made many efforts to recruit local people to be the follow-up interviewer to get closer and more friendly with local people.

to help communicating, explaining and mobilizing local people to participate in and overcome initial difficulties in the process of exposing to new assessment tools and techniques. However, change is a continuous process and the momentum of change needs to be sustained. Therefore, the role of communication should be repeatedly emphasized in the entire project life til it is firmly rooted in the formal system. The communication modalities and formats should be frequently updated to be adapted to changes in evaluation purposes, sent messeges in new context.

2. Recommendations

In order to maintain and scale up benefits of the M-score project, the ETR proposes a replicating strategy consisting of short- and long-term recommendations.

2.1. Short-term strategy

The short-term strategy aims to sustain firmly benefits of the M-score in public administration services and health services in project provincies. The following recommendations are proposed:

- Continue to adopt two main M-score techniques. The follow-up phoning interview has been very proved as useful for the community since it does not require citizens to send their feedbacks proactively. Therefore, this technique is suitable with residents in localities where the readiness to accept is not high. It can be an entry point for enhancing people's awareness and confidence to exercise their citizenry rights and responsibilities. Tablet-based technique is more cost effective, but the application of this technique requires certain conditions for stable operation. Specifically,
 - The follow-up phoning interview technique: Continue to localize the process of interview through recruiting and training interviewers with local knowledge and good communication skills to create an open and friendly environment with interviewees. Update regularly interview questionaire to provided needed information for PCC and line departments to serve their oversight and supervision mandates.
 - The tablet-based technique: Select the appropriate space to install tablets, regularly check and timely repair to ensure stable operation of the devices at OSSs and health institutions. Different instructional schemes should be designed to guide local citizens to properly use the tablet software, including sending public servants and/orr volunteers to the installation places for face-to-face coaching. A monitoring system of scorers should be developed to incentivize individuals engaging in scoring exercise (similar to that mechanism applying in private companies to encourage customers' despondence to the survey).
 - Regularly update and adjust assessment questionaire aligned with changing priorities in public service quality improvements in each period. Currently, assessment questionaire (especially with the tablet) is focusing on the weakest aspects of health care public administration services. When those aspects have improved significantly, continuing to ask the same questions will be useless and bored. Therefore, the assessment questionaire need to be adapted to the issues needed to be addressed by government and citizens.
- Develop post-feedback-receiving responding mechanism. As mentioned in the previous section, not all local people's comments/feedbacks could be accepted and resolved immediately. Therefore, PSDUs need to hold regular dialogues with local people/clients to inform them about issues being fully or partially addressed, or not being taken into account and justifying PSDUs' decisions. Communication should be made by using community notice boards/bulletins, digital notice boards, loudspeakers or frequent dialogues between PSDUs

and representatives of citizens/customers. This arrangement will help to strengthen answerability of government agencies and PSDUs.

2.2. Long-term strategy

- Officialize usage of citizen scoring results via the M-score tool. According to the Decree 61, assessment information collected via M-score-like tools and techniques can be used to measure clients' satisfaction on public administration services. However, the Decree also accepts provincial government's discretion in altering assessment methods, either traditional or digitalized ones, provided that they are suited to local conditions. PAR and e-government building agenda has suggested that using digitalized assessment tools is irreversible trend. Nevertheless, to facilitate this process, provinces can adopt citizen satisfaction assessment tools introduced by the M-score project as a monitoring and ranking indicator for PSDUs in the province (similar to the lesson from Dong Nai province).
- Set up concrete roadmap to gradually shift to online assessment modalities. Assessing public services quality vis-à-vis applications in smartphones or in provincial public service portals is the ultimate goal of citizen feedback collection effort. To meet that goal, a concrete roadmap, which can secure important preconditions such as unifying administrative procedures, encoding individual records on administrative procedures handling, constructing needed ICT infrastructure and gradually increasing citizens' readiness to use online assessment tools and techniques. The M-score tools will be important milestones in such roadmap.
- Scale up usage of the M-score tool to other fields and sectors. It is very potential to use the M-score tool in collecting citizens' feedback in other areas, such as education, culture, environment... or sensitive social issues, such as domestic violence, human trafficking, child labor, ethnic and religious discrimination. However, each field or sector has its own characteristics, so it is impossible to copy the M-score tools mechanically to all other fields and sectors. Instead, selecting proper assessment tools and techniques based on digital platform and adapting them to changing context is crucial.

In addition, an in-depth technical study on the M-score tool to assess its advantages/shortcomings and the conditions for successful application is recommended. Results of such study should be widely shared among different provinces, cities and types of public services. The study will be a valuable document for other provinces to enhance their determination to promote PAR and e-government building agenda.

Part IV: Annex

Annex I – TOR

Annex II – Inception report

Annex III – List of references

Annex IV – Evaluation tools

Annex V – List of interviewees

Annex VI – Draft debriefing presentation

(Please see attached folder for reference).