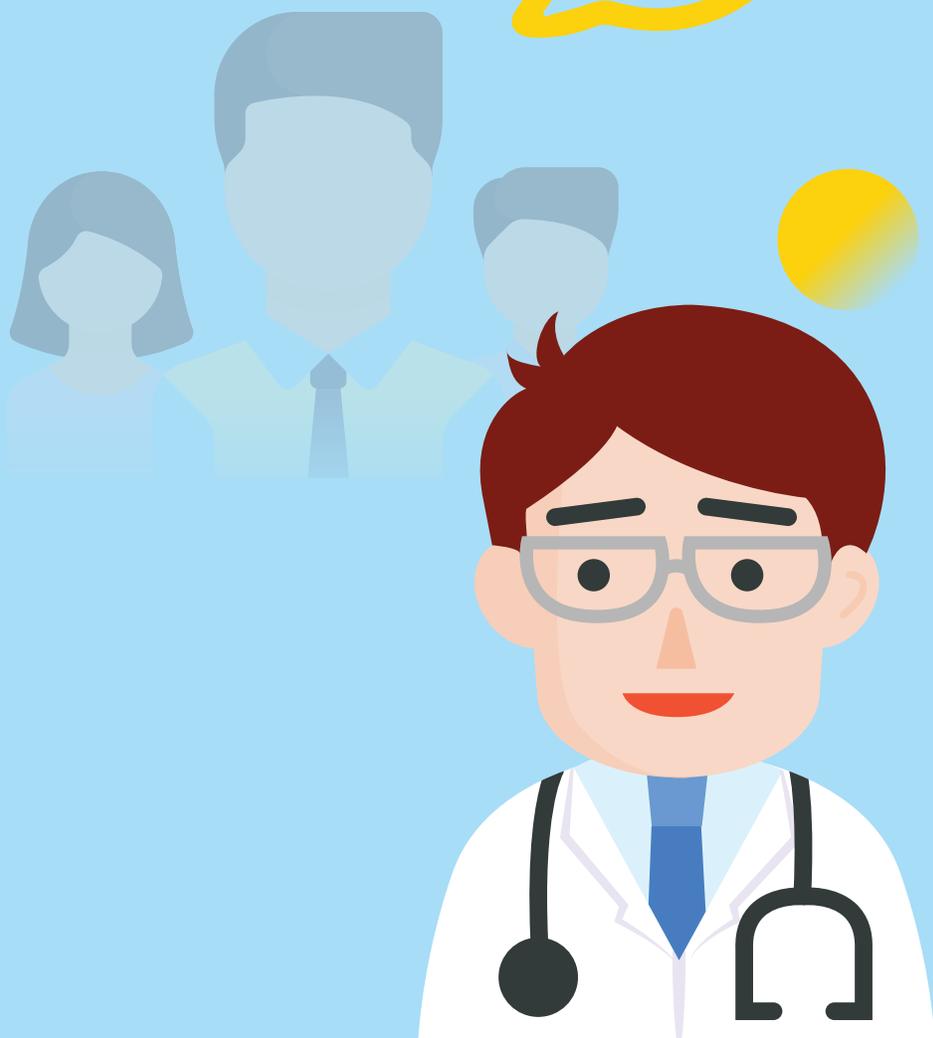# DEPARTMENT OF HEALTH
CASE STUDY

Increasing People's Access to Procurement Information Through the **Freedom of Information Program**

BACKGROUND

In July 2016, the President of the Philippines signed Executive Order (EO) Number 2, providing increased access to government information. Covering only the executive branch, the order granted access to users (currently numbering 17,696, according to January 2020 statistics). The process is managed through a program team housed under the Presidential Communications Operations Office (PCOO).

The government also has an open data portal. However, this initiative has stagnated since 2017 and contracting data that was previously available through the portal is no longer accessible. That means the only way researchers and journalists can currently access contracting data is through a Freedom of Information (FOI) mechanism. To ensure public contracts can be queried appropriately, it is essential to understand how to maximize the effectiveness of this mechanism.

Step Up Consulting, with the support of HIVOS and in partnership with the government FOI - Project Management Office (FOI-PMO), conducted research in 2019 to answer the following questions:

a. What barriers make it difficult for FOI requesters to access contracting data?

b. What gaps in data management systems and agency processes hinder the provision of contracting data?

c. What opportunities are available to improve access to contracting data using the FOI mechanism?

The Department of Health (DOH) was selected for case study research because it is one of the top 10 agencies in terms of both size of budget and the number of FOI requests it receives.

As the main health agency in the Philippines,

DOH is responsible for making quality basic health services available to every Filipino. It is also mandated to enforce standards and regulations in the provision of health goods and services. The DOH's mission is to develop a "productive, resilient, equitable and people-centered health system. Led by the Secretary of Health, the department is composed of seven functional units: health policy and systems development; public health services; health facilities and infrastructure development; health regulation; procurement and supply chain management; administration and financial management; and field implementation and coordination.

Although health services were devolved with the passage of the Local Government Code in 1991, DOH remains "the leader, enabler, standard-setter (or regulator/enforcer of standards/regulation) for health services planning and service provision and delivery, policymaker, health advocate, resource center, mobilizer, and technical adviser as well as administrator of regional and special hospitals" (Cuenca 2018[1]). It is important to keep this in mind, as field implementation and coordination remains a large chunk of DOH operations. Additionally, DOH has several attached agencies, including the Philippine Health Insurance Corporation, the Population Commission, and the National Nutrition Council, as well as corporate hospitals including the Philippine Heart Center, Philippine Children's Medical Center, and the National Kidney and Transplant Institute.

PROVISION OF
CONTRACTING DATA
TO THE PUBLIC

As part of its efforts to promote transparency, DOH proactively publishes several datasets on its website (See Box 1). This includes targets and accomplishments, a list and status of programs, projects, and activities, including its status, and procurement-related reports. However, only documents related to procurement planning are published proactively. Information about awarded contracts, the names of selected contractors or the status of contract accomplishments is not published on the DOH website. While DOH

1 https://www.doh.gov.ph/sites/default/files/transparency%20seal/FOI_PEOPLE%27S_MANUAL.pdf

contends that all its procurement activities are published in the Philippine Government E-Procurement Service (PhilGEPS), PhilGEPS data is only accessible to registered users. While there are open data available at PhilGEPS, this does not include the details of every procurement (e.g. documents on Invitation to Bid, Notice to Proceed, and contracts).

The FOI mechanism in DOH only covers requests for information directed to DOH Bureaus, Regional Offices and Services, and selected attached agencies such as the National Nutrition Council (NNC), Philippine National AIDS Council (PNAC) and the Philippine Institute for Traditional and Alternative Health Care (PITHAC)[2]. The FOI system does not include the other attached agencies and corporate hospitals previously mentioned – though regional hospitals are covered. There are at least 54 regional hospitals across the country and 12 hospitals in Metro Manila under DOH management.

The DOH FOI Manual sets out the processes for the submission and resolution of eFOI requests (see figure 1 below). FOI receiving officers are identified for each operating unit of DOH, and their contact details are included in the FOI manual. FOI decision-makers are assigned to respond to FOI requests that the DOH has the power to resolve. Their contact

details are also included in the manual. In addition to the eFOI mechanism, DOH also has a regular FOI mechanism where citizens can request information in person, as well a call center where people can submit inquiries, including FOI requests.
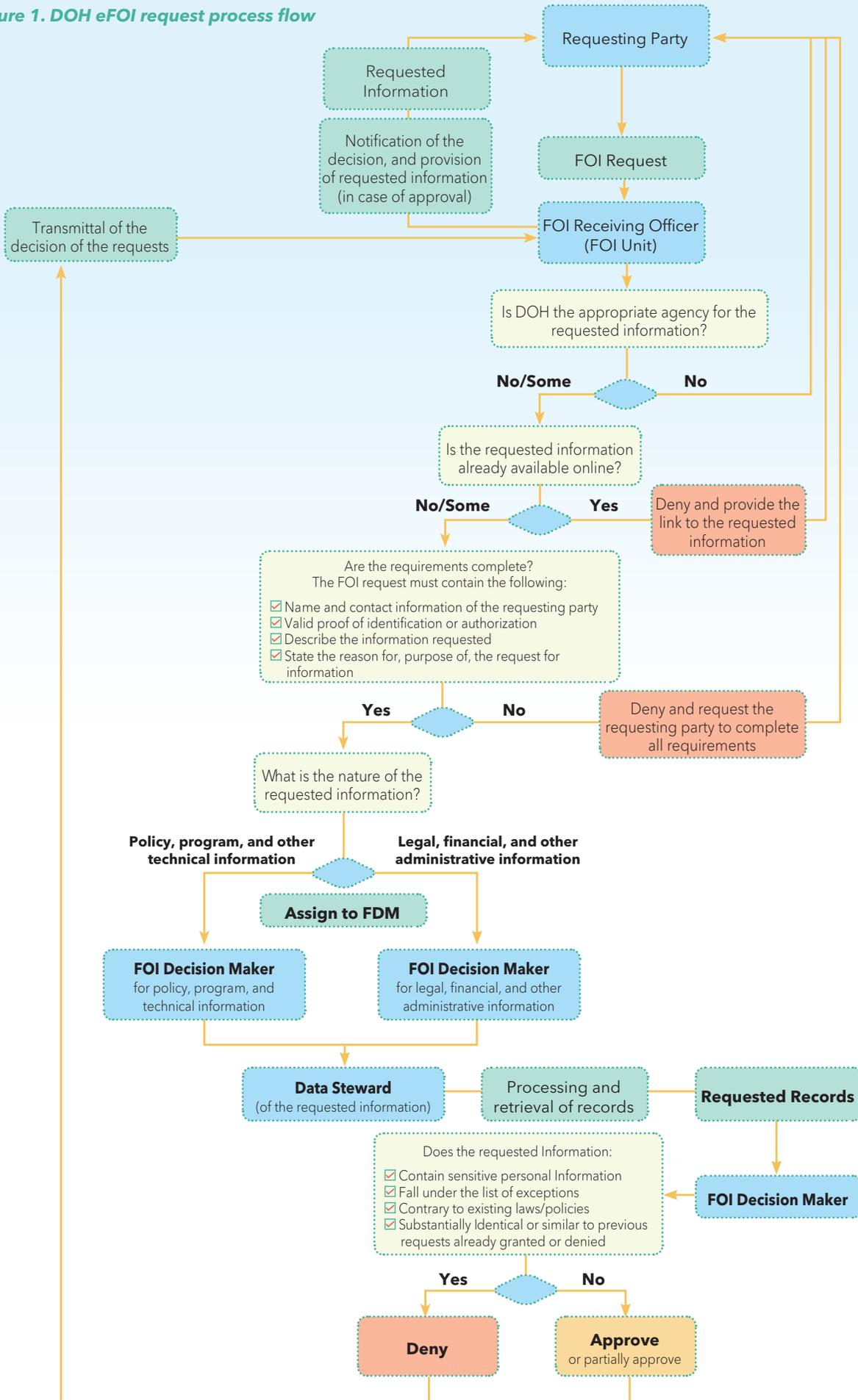
Box 1.

List of Documents Published Proactively by DOH in its Website

A. Physical targets and accomplishments (from 2011)

B. Financial Reports (from 2012)

C. Approved Budgets and Targets (from 2012)

D. Programs, Projects, Activities, and Beneficiaries (from 2012)

E. Annual Procurement Plan (from 2012)

F. PhilGEPS Postings (2012 to 2014 only)

G. Quality Management System

H. FOI provisions

I. Performance-Based Budgeting reports

J. Disease surveillance (from 2010 to 2019)

K. Health statistics - natality, population, morbidity, mortality, notifiable diseases (up to 2015 only)

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2 https://www.doh.gov.ph/sites/default/files/transparency%20seal/FOI_PEOPLE%27S_MANUAL.pdf

Figure 1. DOH eFOI request process flow

Requesting Party

Requested Information

Notification of the decision, and provision of requested information (in case of approval)

FOI Request

Transmittal of the decision of the requests

FOI Receiving Officer (FOI Unit)

Is DOH the appropriate agency for the requested information?

No/Some   **No**

Is the requested information already available online?

No/Some   **Yes**

Deny and provide the link to the requested information

Are the requirements complete?
The FOI request must contain the following:
- ☑ Name and contact information of the requesting party
- ☑ Valid proof of identification or authorization
- ☑ Describe the information requested
- ☑ State the reason for, purpose of, the request for information

Yes   **No**

Deny and request the requesting party to complete all requirements

What is the nature of the requested information?

Policy, program, and other technical information   **Legal, financial, and other administrative information**

Assign to FDM

FOI Decision Maker
for policy, program, and technical information

FOI Decision Maker
for legal, financial, and other administrative information

Data Steward
(of the requested information)

Processing and retrieval of records

Requested Records

Does the requested Information:
- ☑ Contain sensitive personal Information
- ☑ Fall under the list of exceptions
- ☑ Contrary to existing laws/policies
- ☑ Substantially Identical or similar to previous requests already granted or denied

FOI Decision Maker

Yes   **No**

Deny

Approve
or partially approve

The top five information requests received by DOH are related to morbidity, hospital facilities, statistics of nurses, drug rehabilitation facilities/cases, and HIV cases. Interestingly, there are few requests to DOH for information relating to public procurement or contracting through the eFOI portal. From 2017 to 2019, only seven of the 1,376 requests processed were related to contracting data. These are shown in Table 1 below:

DATE REQUESTED	DATA REQUESTED	DOH RESPONSE
25 August 2017	Drug price procurement data	❌ Denied
23 February 2018	Bidding award for Sanofi Pasteur Dengvaxia for the DOH Dengue Immunization Program	✅ Granted
30 November 2018	Contracts won and implemented by Cooperatives in all public hospitals and health units/offices	✅ Granted
10 February 2019	All related contracts between Sanofi and DOH on the procurement of Dengvaxia vaccine	❌ Denied
10 April 2019	Question on training government hospitals on public procurement	✅ Granted
8 August 2019	Procurement of DOH Region 5 HIV Screening Kits	✅ Granted
21 August 2019	Procurement for HIV in Region 1 (with aggregated data per municipality, city, province)	✅ Granted

Table 1. Data Requests Related to Procurement - DOH (2017 - 2019)

The request for the Sanofi contract was denied because the information was not with DOH but with the attached corporate hospital, the Philippine Children's Medical Center (PCMC). The requester was asked to refile the request with PCMC, but unfortunately, PCMC is not yet a participating agency in the Philippine government's eFOI portal. For the request for drug price procurement data, DOH confirmed the availability of the dataset however, it was not in a format that would satisfy the requester, and so they were asked to visit the DOH office to get assistance with their request.

DOH has a low performance in responding to requests. Since 2017, the average processing time for FOI requests is 67 days – far beyond both the 15-day response period mandated under the agency's FOI manual and the 20-day extension period. Also, it performs poorly in the percentage of requests it successfully fulfils compared with other departments, including the Department of Transport and the Department of Public Works and Highways which are also in the top five agencies by volume of requests. There are many reasons for this low performance. First, requesters often think that all health-related data can be requested from DOH. For example, municipal and barangay health data are not available from DOH; these need to be requested from the local governments. Second, the DOH receiving officers are not authorized to release data without the approval of units within the department who technically own the data. Sometimes, it takes a while for these units to act on requests forwarded to them for approval.

CHALLENGES IN PROVIDING
CONTRACTING
INFORMATION
TO USERS

Lack of a comprehensive data inventory

The DOH data inventory is grossly incomplete. Only 13 key records are included in its self-published data inventory, with no procurement data included[1]. FOI personnel from the department acknowledged this inventory is incomplete and said it was

[1] https://www.doh.gov.ph/sites/default/files/transparency%20seal/2019%20DOH%20Information%20Inventory.xlsx

assembled only for compliance purposes. They still need to undertake an agency-wide stock-taking process to ensure that the inventory includes a complete set of data and information maintained by the department.

The department is also piloting a Document Management and Archiving System (DMAS) where all operating units of the department are requested to digitize their permanent records. Until this process is completed, a comprehensive data inventory will not be available. Without such an inventory, FOI receiving officers need to conduct internal research to locate requested data. This causes significant delays in fulfilling requests.

Absence of a standardized data integration process

The Knowledge Management and Information Technology Service (KMITS) is the operating unit within DOH tasked to manage data, information, knowledge sources and systems. Ideally, it would be the central repository of all DOH data and information assets. But unfortunately, different operating units within DOH have their own independent databases where data collection, processing, and reporting takes place. In the case of contracting data, user departments, those that need the item to be procured, keep and maintain procurement records. There is no specific requirement for these departments to provide copies to KMITS and in most cases, doing so is up to their discretion.

If KMITS is given copies, it can store and retrieve requested information easily, subject to redaction and prohibition to disclose based on the judgment of the FOI Decision Maker. KMITS will also defer to DOH's legal division on whether to release a certified copy. But if the requested data or information sits only with the user department, the retrieval of information will be delayed.

Competing priorities sacrifice tasks that are not life-threatening

DOH's mandate is clear: to ensure that all Filipinos have access to basic health services. With a population of more than a hundred million people, a quarter of whom are below the poverty line, this task is enormous. Between managing records or attending to patients, the choice is clear. "It is not that we don't value records management", an administrative officer of a regional hospital said on the condition of anonymity, before adding: "The tasks are really piling up on our side, with fewer resources and real problems to deal with daily, we need to prioritize."

This is a common dilemma for frontline agencies offering public services, especially in a context of scarce resources. DOH has long complained about insufficient human resources to accomplish its mandate. The department previously highlighted this handicap during the government's immunization program[1] and more recently with the COVID-19 pandemic[2]. But experts we consulted rejected this excuse, pointing out that better health management requires better data and information. DOH should prioritize improving its information infrastructure if it wants to make better decisions in health service delivery.

Lack of dedicated personnel to handle FOI requests

Majority of the designated FOI Receiving Officers of the department are from the Records section. The volume of work that employees at the record section are dealing with on a regular basis is sometimes way beyond their capacity. It would have been better if the department appoints a permanent FOI Receiving Officer dedicated to support the FOI program. In this way, responding to FOI requests will be timely and more responsive.

1 https://www.rappler.com/nation/240924-doh-says-immunization-program-understaffed-logicstically-challenged
2 https://www.cnnphilippines.com/news/2020/3/17/health-worker-shortage-philippines-coronavirus.html

OPPORTUNITIES
FOR
IMPROVEMENT

DOH has taken significant steps towards modernizing how it manages data assets. These are outlined in the Philippine e-Health Strategic Plan 2014-2020[3]. In addition to the DMAS pilot mentioned above, the department plans to develop and use common data standards to "enable consistent and accurate collection and exchange of health information across health systems and services, and geographical and health sector boundaries."[4]. Other reforms included in the plan – some of which are underway – include the development of applications for extensive access to and management of health information and investment in appropriate systems infrastructure, network resources and services to enable a seamless exchange of health information.

While it remains to be seen how far these initiatives will support people's access to information, they are vital to addressing challenges to effective and efficient FOI processes in the department.

3 http://ehealth.doh.gov.ph/
4 https://uhmis.doh.gov.ph/index.php/downloads/153-philippines-ehealth-strategic-framework-and-plan/163-philippines-ehealth-strategic-framework-and-plan-2014-2020