

Guidelines for Implementing Sevottam



Department of Administrative Reforms and Public Grievances Ministry of Personnel, Public Grievances and Pensions

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September, 2011

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INTRODUCTION

Guidelines for Designing and Implementing Sevottam

1.1 Background and Purpose

The Second Administrative Reforms Commission in its twelfth report entitled "Citizen Centric Administration the Heart of Governance" in paragraph 4.6.2 has recommended for making Government organizations transparent, accountable and citizen friendly. The recommendations that have been accepted by the Core Group on Administrative Reforms (CGAR) headed by the Cabinet Secretary for implementation by all the Ministries/Departments of Government of India include mandatory adoption of the 'Seven Step Model for Citizen Centricity'.

The 'Seven Step Model for Citizen Centricity' has been documented by Department of Administrative Reforms & Public Grievances, Government of India under the name "SEVOTTAM", meaning *Uttam Seva*, or service delivery excellence. One practical difficulty in achieving service delivery excellence is the lack of a common understanding on what is considered satisfactory or acceptable quality of service delivery across different organizations and geographical locations. In this context, the role of standards in public services becomes significant. If service standards are clearly laid down and widely known, service-recipients know what to expect and service-providers also know what must be delivered. Therefore, the fundamental tenet of SEVOTTAM is laying down and clearly communicating service standards (including standards for grievance redress) and taking necessary steps to ensure that the standards are consistently met. 'Time-lines' are the simplest and most frequently used form of 'Standards'

To ensure uniformity in how government ministries/departments in India develop and implement service standards, the Department of Administrative Reforms and Public Grievances, Ministry of Personnel, Pensions and Public Grievances, Government of India (DARPG) had conducted four workshops covering 62 central ministries/departments during August-September 2010. A booklet titled "Designing and Implementing Sevottam Compliant CITIZEN'S / CLIENT'S CHARTER & GRIEVANCE

















REDRESS MECHANISM BY CENTRAL MINISTRIES / DEPARTMENTS" was prepared for the workshops covering two aspects of Sevottam, viz. Citizen's Charter (with measurable service standards) and Public Grievance Redress Mechanism (through CPGRAMS).

In order to cover the entire Sevottam framework, DARPG is covering the third module of the framework on 'Capability Building' that could not be covered in the 2010 workshops, through these current workshops in 2011. These workshops on the 'Capability Building for Service Delivery' cover aspects such as - how ministries/departments link the ongoing improvements by way of process reengineering, infrastructure enhancement, IT up-gradation, employee skill building, etc., with achievement of standards in service delivery. This document contains guidelines on implementation of the complete framework of QMS Sevottam. It is an extension of the August 2010 guidelines and include chapters on SERVICE DELIVERY CAPABILITY which is a critical factor for achieving and improving the laid down Standards based public service delivery.

1.2 Concept of Citizen's / Client's Charter

The Citizen's / Client's Charter is a written declaration by a Government department that highlights the standards of service delivery that it subscribes to, availability of choice for consumers, avenues for grievance redress and other related information. In other words, it is a set of commitments made by a department regarding the standards of service which it delivers.

Though not enforceable in a court of law, the Citizen's / Client Charter is intended to empower citizens and clients so that they can demand committed standards of service and avail remedies in case of non-compliance by service provider organizations. The basic thrust of the Citizen's / Client's Charter is to render public services citizen centric by making them demand driven rather than supply driven.

Central Ministries/ Departments are expected to design a Client's Charter instead of a Citizen's Charter in case they are not dealing with the public directly. The difference between the two service recipients is as follows:

















Citizens

Citizens are individuals, groups of individuals (companies, trusts, associations, unions etc.) and the common public at large. They are outside the government and are generally referred to as *external clients*. Being outside the government machinery, the general presumption is that they do not have sufficient knowledge of the government's internal processes. Therefore the onus is on the service provider to ensure that citizens are well aware of the service standards and the expectations from service recipients. It cannot be presumed that all citizens are literate or understand the official language, and it may be necessary to communicate with them in the local language also.

Clients

Clients could be government agencies and government employees availing services from another government agency. Services here will exclude administrative control activities, references and opinions to be provided on policy-related matters which cannot be disposed-off within pre- defined time norms. Clients are part of the government and are generally referred to as internal clients. Being part of the government machinery, the general presumption is that clients have sufficient knowledge of the government's internal processes. Therefore the onus of ensuring that clients who are also part of the government are well aware of the service standards and the expectations from service recipients is equally divided between the service provider and the service recipient. It is presumed that all clients are literate and communicating with them in the official language of the service provider agency is sufficient.

Citizen's Charter / Client's Charter or Citizen's / Client's Charter

The Charter prepared by the department may be either called a Citizen's Charter or a Client's Charter depending on whether the organization is serving internal or external clients. It can be called 'Citizen's / Client's Charter' in case the service recipients are a combination of the two. In this document, the term 'Charter' is generally used to include the 'Citizen's Charter' and the 'Client's Charter' or 'Citizen's / Client's Charter'.

















1.3 Concept of Grievance Redress Mechanism

As per the 12th Report of the Second Administrative Reforms Commission (ARC), entitled 'Citizen Centric Administration – The Heart of Governance', 'Grievance' has been defined as indignation or resentment arising out of a feeling of being wronged. Indian Standard 15700:2005 defines 'grievance' as an expression of dissatisfaction made to an organization related to its product, services and /or process(es) where a response or resolution is explicitly or implicitly expected. A grievance is thus any sort of dissatisfaction, which needs to be redressed. It can be real, or imaginary, legitimate or ridiculous, rated or unvoiced, written or oral,; it must however, find expression, in some form or the other. In other words, if a grievance is received, it needs to be redressed. For the purpose of this document, grievances include complaints by service recipients against non-delivery of services as per standards included in the Charter.

In addition to the Sevottam compliant Charter related grievances, covered in this document, a larger framework for redress of grievances is called 'Grievance Redress Mechanism' (GRM). GRMs are process systems set up by organizations to receive record, investigate, redress, analyze, prevent, or take any other appropriate action in respect of grievances lodged against them. GRMs in Central Ministries / Departments include grievances received by them from the public and clients / service recipients as well as from their own employees. As such, these include issues related both to service delivery as well as to employment related matters (e.g. transfers, promotions, pensions, pay fixation).

For the purpose of Sevottam compliance, GRMs include systems to manage grievances received in respect of service delivery and its standards as included in the Charter. Such grievances are generally received from the public, but in some cases these could also be received from client departments / employees or retired employees or other stakeholders. For example, Directorate of Estates is responsible for allocation of residential accommodation to central government officers. This is a service delivery issue and not a service matter, and, therefore, will get covered under Sevottam compliance by Directorate of Estates. Similarly, Department of Pensions and Pensioner's Welfare is responsible for issuing clarifications regarding interpretation of pension rules. This is also a service delivery issue and will be covered under Sevottam compliance by DoPPW. A single window disposal system used by many Ministries/Departments having a very large public interface is the system of organizing and simplifying service delivery. As this is citizen focused, it is also a Sevottam matter.

















In practice, GRMs in Government of India Ministries/Departments have been partly functional. The practice has been to maintain 'Registers for Grievances', in which all written grievances received are entered. Thereafter, photocopies are made and a copy of the grievance is forwarded to the Divisional Head concerned or to the field organization concerned, for redress and response. In the division or the field office, it is marked down the hierarchy, to the dealing hand who is expected to check the relevant records and propose corrective action for approval to the appropriate authority. The corrective action is the process of redress. After approval the redress response is issued directly to the citizen and action taken thereon flows back to the nodal department. However, the maintenance of such manual grievance registers is decentralized, and practice of issuing acknowledgements to complainants, classification of complaints, setting time norms for their disposal, and tracking them through to final resolution are not uniform. With the availability of computerized systems, an online system called Centralized Public Grievances Redress and Monitoring System (CPGRAMS) has been created and made functional in all 82 Ministries / Departments. A note on CPGRAMS follows.

CPGRAMS: An upgraded version of the Centralized Public Grievance Redress and Monitoring System (CPGRAMS) has been inaugurated in September, 2010. CPGRAMS is an online internet based facility for citizens to lodge their grievances from any part of the country or the world. It is accessible at http://pgportal.gov.in and also through www.darpg.nic.in. It is also a tool for effective monitoring of redress of grievance received through the Grievance Redress Mechanism, established in Government of India. The System networks all Central Ministries / Departments / Organizations including over 5000 responsibility centres under them, that are located across the country.

Through the CPGRAMS citizens can lodge complaints online and immediately get a unique registration number for further reference. The number is useful for checking the progress on redress of their grievance and for sending reminders. Citizens have a choice to lodge the grievance directly with the Ministry / Department concerned or to send it to DARPG. The grievances received in PG Division are forwarded online to the Ministry / Department concerned for redress. Reports can also be generated through the System for analyzing grievance prone areas for taking remedial action for preventing similar grievances from arising in future.

















1.4 Concept of Service Delivery Capability

The common meaning of 'capability' is 'the ability to do something'. 'Service Delivery Capability' means the capability of an organization to deliver services as per standards promised in the Charter. Capability of an organization also means its ability and capacity expressed in terms of use of its Resources. Resources available with an organization include the following:

- 1) Human resources: their number, quality, skills, and experience,
- 2) Physical and material resources: equipment, machinery, building, furniture and fixtures,
- 3) Financial resources: ready finance, access to sources for additional finance when needed,
- 4) Information resources: pool of knowledge, databases, and
- 5) Intangible assets: process designs, image and goodwill, patents, etc.

Organizations need to <u>build new capabilities</u> and <u>upgrade existing ones</u>, in order to ensure that they are able to fulfill the purpose for which they have been set up. In general, when organizations are created, they have limited resources at their disposal, and one of the activities that they must do is to find ways and means to access additional resources to improve their performance over time. With changes in the external environment of an organization, new methods to acquire new resources have to be tried out. Over a period of time, organizations that are not able to deliver high quality services, due to limitations on their current resources, must find out legitimate ways to augment their resources, so that they can deliver. This brings us to the issue of how to define 'high quality service' or 'service quality'.

Service Quality and its measurement

The word 'Quality' is generally associated tangible products that can be measured in terms of quality of its physical attributes such as (i) dimensions,(ii) angles, (iii) weight (iv) power (v) hardness, (vi) tensile strength,(vii) color, and many other physical characteristics. Understanding the aspects of 'Quality' in the context of

















services is comparatively more difficult, as there are no measurable physical or tangible attributes. Even where they exist they may not be directly effecting the essential nature of service. Therefore, Quality in Service is about 'what really matters to the service recipient'. Although this is the case with both goods and services, it acquires a special significance in the context of public service delivery in general, and service delivery under the Sevottam framework, in particular.

There are several methods already developed to measure quality of service. For measuring and certifying quality of service delivery by Public Service Organizations, a special standard has been created by Bureau of Indian Standards, called Indian Standard 15700:2005. The Standard defines -

- i. 'Public Service Organization as 'An organization which provides service (s) to public at large and /or whose activities influence public interest. Example: Government ministries and departments, Regulatory bodies, Public utility service providers etc.
- ii. 'Quality' as 'Degree to which a set of inherent characteristics fulfils requirements' A Note given below this definition states: (1) The 'requirements' include product and /or service requirement. (2) 'Inherent' as opposed to 'assigned' means existing in something especially as a permanent characteristic.
- iii. 'Service' as ' The results generated, by activities at the interface between the organization and the customer and by organization's internal activities, to meet customer requirements'
- iv. 'Service Delivery' as 'The organization's activities including those at the customer interface, necessary to provide the service.'
- v. 'Service Quality Objective' as 'something sought, or aimed for, related to service quality'

For details please see the Indian Standard 15700:2005, and Training Manual on Implementation of Assessment- Improvement Framework accessible under Sevottam drop-box on www.darpg.nic.in





In management theory, among the best known management method developed in the 1990s is called SERVQUAL¹. This builds on the idea that quality of service is 'what really matters to the service recipient' more than anything else. The premise of this framework is that what matters really is the gap between service recipient expectations and experience. Therefore, the same standard of service could be high quality or low quality, depending on whether service recipient expectations are higher or lower than the standard. SERVQUAL was originally measured on 10 aspects of service quality that included:

- i. Reliability,
- ii. Responsiveness,
- iii. Competence,
- iv. Access,
- v. Courtesy,
- vi. Communication,
- vii. Credibility,
- viii. Security,
- ix. Understanding the customer
- x. Tangibles.

In the above, **communication** refers to communicating with the service recipient so that the recipient knows <u>what to expect</u>. This element became the focal point in the public service delivery domain through the Citizen's Charter, and in several other respects through the Right to Information Act 2005.

¹ The original publication on SERVQUAL is cited as Zeithaml, V. A., Parasuraman, A. & Berry, L. L. (1990), Delivering Quality Service: Balancing Customer Perceptions and Expectations. New York: Free Press. By the early nineties the authors had refined the model and represented it through the acronym RATER which stands for: Reliability, Assurance, Tangibles, Empathy, and Responsiveness.

















PARAMETRES FOR QUALITY IN PUBLIC SERVICE DELIVERY:

In the implementation of Sevottam framework, three main areas have been found as the most common <u>causes of inability</u> to deliver services <u>as per standards included</u> <u>in the Charter</u>, and /or to meet expectations of service recipient citizens / clients. These are:-

- i. Absence of or incorrect understanding of citizen / client expectations,
- Lack of motivation and training of employees, involved in the service delivery and
- iii. Non-availability of adequate Infrastructure for service delivery.

Under Sevottam, it is the responsibility of ministry / department / organization to examine its current position in respect of the three parameters and work towards bridging the existing gaps observed therein. For example, if the staff dealing with service recipients is not trained to deliver services as per standards in the charter, the organization has to arrange for the required training, either internally or externally, and also have a system of induction training for those who join the organization later on from time to time.

1.5 Publications / Guidelines / Instructions on Charter / GRM / IFC / Sevottam Service Delivery Issued till September 2011

- All Guidelines on Citizen's / Client's Charter, as well as State Governments/ Union Territories Administrations, including duties of 'Nodal Officer for Citizen's / Client's Charter are available in the 'Compilation of Guidelines for Redress of Public Grievances August 2010'. Its soft copy is accessible on DARPG website www.darpg.nic.in Its hard copy can also be obtained on request, from DARPG.
- 2. The Compilation of Guidelines for Redress of Public Grievances, August 2010, contains all the major guidelines issued since 1985 for the creation of Grievance Redress Mechanism in all Ministries/Departments /Organization of Government of India.

















- 3. The 2010 Compilation also includes separate sections containing all the original orders issued since 1997 on Information Facilitation Counters in Government of India
- 4. Guidelines for Sevottam Compliance June 2010
- 5. Citizen's Charter A Handbook
- 6. Citizen's Charter Framework
- 7. IIPA report on Citizen's Charter Formulation, Implementation and Evaluation
- 8. Brochure on Sevottam
- 9. Brochure on CPGRAMS
- 10. A multimedia CD on CPGRAMS
- Guidelines for Designing and Implementing Sevottam Compliant Citizen's / Client's Charter and Grievance Redress Mechanism In Central Ministries / /Departments, August 2010
- 12. DARPG OM No. K- 11017/5/2010-PG dated 12.11.2010 on 'Instructions regarding Sevottam Compliant Grievance Redress Mechanism under Results Framework Document, 2010-11' is available on DARPG website

1.6 Help Desk Facility for Sevottam and CPGRAMS

All queries relating to Sevottam Implementation may be sent to sevottam@nic.in. Queries relating to CPGRAMS can be sent to cpgrams-darpg@nic.in.



















CITIZEN'S / CLIENT'S CHARTER

2.1 Format of Citizen's Charter

The Citizen's Charter for a Ministry / Department should contain the following nine sections:

- i. Cover Page
- ii. Vision
- iii. Mission
- iv. Service Standards
- v. Grievance Redress Mechanism
- vi. Stakeholders / Clients
- vii. Responsibility Centers
- viii. Indicative expectations from service recipients'
- ix. Month and Year for next review of the charter

In what follows, each section is described briefly.

i. Cover Page

To ensure instant recognition and user-friendliness, it is important that all Citizen's / Client's Charters have a uniform cover page as given below:

National Emblem

Logo (if any)

CITIZEN'S / CLIENT'S CHARTER

NAME OF THE MINISTRY / DEPARTMENT

(Name of the Ministry to which the department belongs)

Address with website ID

Month and Year of issue

















ii. Vision

This should be consistent with the Vision in the Results-Framework Document.

iii. Mission

This should be consistent with the Mission in the Results-Framework Document as well as Departmental Strategy.

iv. Service Standards

The information in this section should be presented in the following format.

SERVICE STANDARDS

S NO.	MAIN SERVICES*	Timelines*	Officer responsible for delivery of service	Contact details of the officer

^{*} Main Services include services that are being provided on a regular basis to the Ministry / Department's service recipients. Departmental Services rendered occasionally under exceptional or extraordinary circumstances should not be a part of Main Services. These services should also have supporting grievance redress processes.

^{*} Timelines are the most common form of service standard

















v. Grievance Redress Mechanism

This section should contain information relating to the following items:

- a. Name and contact details of Public Grievance Officer:
- b. Helpline number/Website URL to lodge grievance
- c. Response to be expected by person lodging the grievance
- d. Timelines for redress

vi. Stakeholders / Clients

This section should contain the list of stakeholders / clients who have been consulted for setting service standards. The stakeholder consultations done for the Strategy development process may be used for the purpose of setting standards as well.

vii. Responsibility centers and Subordinate organizations

This section should contain a list of the Responsibility Centers and Subordinate Organizations under the administrative control of the Ministry/Department. Information in this section should include references to the service standards of the Responsibility Centers and Subordinate Organizations, how to lodge a grievance against them, and the role of the Ministry/Department in ensuring that they have set standards for service and are delivering services accordingly.

viii. Indicative expectations from service recipients

This section should contain responsibilities of the Citizens / Clients if they are to avail efficient service delivery at the standards stated in the Charter. Examples of this would include submitting completed application forms along with all the required enclosures, duly attested where required; cross-checking for information or the latest position on a matter on the Department's website before raising a query or a grievance etc.

















ix. Month and Year for the next review of the Charter

This section should indicate the month and year for the next review of the Charter. This allows the citizens to be patient till the next major revision. The next date of review should not be too distant. Upper time limit of once in a year or once in two years may be prescribed.

2.2 Concluding Remarks on Charter Format

The formats in this Chapter is the standard format for the Citizen's Charter for printing and dissemination by all Central Ministries/Departments. Additional information if any, needed by an organization, may to included within the standard format. It is imperative that the Citizen's Charter be kept user friendly as well as concise.

2.3 Requirements on Publication of Charter

Mandatory Requirements for Charters of Central Ministries/Departments are as follows:

- The Charter is to be made in bilingual version as per requirements of the Official Languages Act and approved by Minister-in-charge before publication.
- After publication twenty copies are required to be sent to the Librarian, Parliament Library, Parliament House Annexe, Sansad Marg, New Delhi 110001. In addition, a soft copy is to be sent to Department of Administrative Reforms & Public Grievances at sevottam@nic.in
- The Charter needs to be placed on the Ministry / Department's website. It may also be publicized in select newspapers / media to ensure wide publicity if required by the nature of work allocated to a ministry / department
- In offices located in Region 'C' it should also be published in the local language in addition to English and Hindi for circulation in the region
- A single page containing extracts of main services and standards from the charter can be displayed at the reception and other prominent places in the Ministry / Department



















CHARTER DESIGN AND IMPLEMENTATION PROCESS

3. Citizen's Charter Design and Implementation Process

This section describes the step by step process for formulation of service standards by Ministry/Departments and their Responsibility Centers including stakeholders' consultation process and stakeholders' expectation for the preparation of Citizen's Charter (CC).

Step 1: Collect information on service standards achieved / can be achieved by Ministry / Department

This step explains the information regarding the services provided by the Ministry/Department that is required for inclusion in the Charter, and how it is identified and collected. This step consists of four tasks described below:

Task 1: Identify services delivered

Prepare a complete and exhaustive list of the services offered by the Ministry/ Department. This will help the service recipients to know the services they can receive. Out of this exhaustive list, the main services are filtered out for inclusion in the Citizen's Charter. Main services include services that are being availed in routine by a large majority of service recipients. Services rendered occasionally under exceptional or extraordinary situations are not part of main services. However, if the Ministry/ Department provide a very large number of services, then the main services are prioritized according to frequency of use. The most frequently availed services are included in the Charter and a reference is made in the Charter to the document or website where a more exhaustive list is available.

Refer Appendix I for an example of how services are listed and classified in Kendriya Vidyalaya Sangathan.





Task 2: Identify indicators to measure service standards

Identify the indicators on which standards for each service are laid down. This will help the Ministry/Department measure its current service standards. If the Ministry/Department does not have service standards currently in use, then the indicators are to be defined first so that service standards can be laid down on basis of such indicators.

Refer Appendix II for an example of indicators on which service standards are laid down in Central Board of Excise and Customs.

Task 3: Estimate current service standards

Estimate the service standards being achieved at present using the indicators identified in Task 2. This will help the Ministry/Department to set realistic service standards. The estimate is prepared on the basis of internally available data. In case there is no mechanism to collect this data at present, a rough estimate is created through consensus among senior officers who have first hand experience of the service standards being achieved.

Refer Appendix III for an example from Central Board of Excise and Customs, where very little internal data was available to estimate current service standards.

Task 4: Document the current service standards

Create a formal document with exhaustive list of services offered along with the service standards that the Ministry/Department believes that it are achieving. This will help the Ministry/Department to set realistic service standards for inclusion in the Citizen's Charter. This document forms the baseline of the current service standards and is used to make improvements going forward. Improvements are in the form of addition of new / deletion of outdated services, addition of new / deletion of outdated indicators, more stringent standards for same services / indicators.

Refer Appendix IV for format of a formal document created by Central Board of Direct Taxes.

















Step 2: Collect information on service standards achieved by Responsibility Centres

This step explains the information regarding the services provided by its Responsibility Centres that the Ministry/Department requires for inclusion in the Charter, and how it is identified and collected. Some Ministries/Departments may not have any Responsibility Centres under their administrative control. In such cases Step 2 is not applicable to them.

Task 1: Prepare list of Responsibility Centres

Prepare a list of the responsibility centres under the administrative control of the Ministry/ Department. This will help the Ministry/Department to include the relevant information in its Citizen's Charter and to ensure that the entire chain of vertical service delivery is covered.

Refer Appendix V for a real life example of list of Responsibility Centres as given in the Citizen's Charter of the Ministry of Labour & Employment.

Task 2: Prepare list of services offered by Responsibility Centres

Prepare a list of the services offered by Responsibility Centres under the administrative control of the Ministry/Department. This will help provide complete information to all service recipients and to the public at large about the complete gamut of services under the Ministry/Department. This list is prepared in consultation with the Responsibility Centres.

Task 3: Estimate current service standards achieved by the Responsibility Centres

Prepare a document on the service standards being achieved by the Responsibility Centres. This will help the Ministry/Department to decide whether or not the service standards are adequate and the improvements needed in them. This document is prepared in consultation with the Responsibility Centres.

Task 4: Document role of Ministry/Department in service delivery by Responsibility Centres

Decide and document the role of the Ministry/Department in ensuring service delivery by each of its Responsibility Centres. This will help the Ministry/Department

















to fulfill its own responsibility vis- à-vis service standards at the Responsibility Centres. This is documented in consultation with the Responsibility Centres. It includes, among others, identification of services, setting of service standards, establishing public grievance redress mechanism at the Responsibility Centres.

Step 3: Plan for stakeholder consultations on service standards of Ministry/Department and its Responsibility Centres

This step explains how a plan for receiving stakeholder inputs for setting service standards is to be drawn, as it is important that service standards are determined in consultation with the service recipients, employees who deliver the services, and external experts / practitioners in relevant domains.

Task 1: Identify stakeholder groups to be consulted

Prepare an exhaustive list of all stakeholder groups that should be consulted before setting standards for services delivered by the Ministry/Department and the Responsibility Centres under its administrative control. This will help in prioritizing the stakeholders and develop a plan for receiving critical inputs within a specified time frame.

Refer Appendix VI for a real life list of various stakeholders for some Central and State GovernmentDepartments.

Task 2: Prepare plan to receive stakeholder inputs

Prepare a detailed survey plan including information on whether it will be a survey on mail, or data will be collected through open house discussions, or through open advertisement, the timelines for the survey, number of beneficiaries to be surveyed, location (number of places) etc. This will help in scheduling stakeholder consultation meets or receiving stakeholder inputs through any other means. The sample includes service recipients of all services rendered by the Ministry/Department and its Responsibility Centres.

Refer Appendix VII for a real life survey plan used by Department of Posts.

















Task 3: Design tool to collect data on service recipient expectations

Develop a tool to capture service recipient expectations vis-à-vis Ministry/Department services. This tool will help capture the specifications of how, where and when the services are preferred to be received by the service recipients, and from whom. Service recipient expectations can be gathered through multiple methods, e.g. survey to capture beneficiary expectations on the standards, open house discussions, soliciting public views through advertisements, analysis of complaints/grievances.

Refer Appendix VIII for a real life tool used by Department of Woman & Child Development, Government of Karnataka to capture citizen/client expectations

Task 4: Design tool for internal stakeholder consultations on services and service standards

Develop a tool to capture views of internal stakeholders on services and service standards. This tool will help consultations with officials and staff involved in service delivery while determining the service delivery standards. Internal stakeholder consultations are primarily through focus group discussions of different levels of officials and field level functionaries. Separate discussions with different levels will enable a better understanding of the key issues from varied perspectives and also prevent dominance of higher level groups to overshadow concerns of lower level functionaries.

Refer Appendix IX for a real life tool used to capture employees' inputs on service standards in Department of Posts

Task 5: Design tool for external expert consultations on services and service standards

Develop a tool to capture views of external stakeholders other than service recipients, e.g. experts / Academicians / practitioners in relevant sectors / officials from related departments. This tool will help consultations with all remaining stakeholders. External expert consultation is primarily through focus group discussions and workshops where representatives of the identified stakeholder groups are invited. The key objective is to obtain inputs from sector experts in setting service delivery standards. Written inputs are sought from the experts using





the tool prepared for the purpose so that appropriate records are available for reference as needed.

Refer Appendix X for a real life tool used by Department of Woman & Child Development, Government of Karnataka to capture external stakeholder inputs on service standards.

Step 4: Receive inputs through stakeholder consultations

This step explains how inputs from various stakeholder groups are collected for setting service standards.

Task 1: Administer survey tools as per survey plan

Collect data as per requirements identified in the survey tools from service recipients, internal staff, and external experts / practitioners. The task of actually conducting the survey is done with the involvement of concerned staff, Responsibility Centres and field level implementation teams at the locations specified in survey plan.

Task 2: Analyze data collected through survey tools

Compile results of the survey and identify the key expectations of stakeholders' visà-vis service standards of the Ministry and its Responsibility Centres.

Task 3: Prioritize stakeholder expectations

Decide which of the key expectations of stakeholders are to be incorporated into the service standards to be laid down now.

Step 5: Consolidate internal information and stakeholder consultation results

This step explains the process of finalisation of the sector standards after taking into account the current standards and the standards expected by stakeholders.

















Task 1: Compare existing service standards with stakeholder expectations

Identify the key variations between existing service standards documented through Steps 1 and 2 and stakeholder expectations summarized through Step 5.

Task 2: Finalise standards of service delivered by Ministry/Department

Finalise service standards after taking into account the variations between existing service standards and stakeholder expectations, and the decisions relating to how these variations are managed.

Step 6: Prepare Charter and get approval

This step explains tasks involved in the actual preparation and launch of the Citizen's Charter.

Task 1: Prepare draft Citizen's Charter

Prepare Citizen's Charter for Ministry / Department consisting of nine sections described previously. The vision and mission statement included in the Charter should be consistent with the same given in the Results Framework Document. This should also include the Grievance Redress Mechanism which has been described in detail in the Chapter 4.

Task 2: Circulate draft Citizen's Charter for comments

Circulate the draft Charter among internal and external stakeholders for a final round of feedback.

Task 3: Finalize Charter

Consider the feedback received through circulation of draft Charter before finalizing the Charter and getting it approved from the competent authority.

Task 4: Make Hindi version of final charter

A public document is required to be published in bilingual version as per the mandatory requirement of Official Languages Act.





Task 5: Get the Charter approved by Minister-in-charge

Approval of the Charter in bilingual version by the Minister-in-charge is mandatory.

Step 7: Publish Charter in public domain

Task 1: Upload the Charter on website.

After approval of the Minister-in-charge the Charter must be placed on the Ministry / Department's website immediately. Thereafter it may be got printed for dissemination.

Task 2: Provide Printed copies of Charter

Twenty copies of the printed Charter are required to be sent to the Librarian, Parliament Library, Parliament House Annexe, Sansad Marg, New Delhi. Copies of the Charter can also be sent for information to members of the Department Related Parliamentary Standing Committee or be given to them during the next meeting. Another copy is to be delivered to Department of Administrative Reforms & Public Grievances, Sardar Patel Bhawan, Sansad Marg, New Delhi, with a soft copy sent to sevottam@nic.in

Task 3: Disseminate Charter contents

The Charter should be circulated to stakeholders in printed or soft copy form as appropriate. Copies of the Charter should be available for free distribution to the Citizen's / Client's through the Ministry's / Department's Reception and /or the Information Facilitation Counters, where ever functional. The main aspects of the Charter may be displayed in the Reception / waiting area of the Ministry / Department or display the contact details of the person from whom a copy of the Charter can be obtained.

Step 8: Ensure implementation of Charter by staff

This step explains the tasks required for ensuring that staff of the Ministry/Department delivers services in accordance with the service standards laid down in the Charter.

















Task 1: Send communication to all staff

Send a communication to all staff members enclosing the Charter and advising them on how they will be delivering services in accordance with standards laid down in the Charter.

Task 2: Conduct training/orientation sessions for staff on Citizen's Charter

Ensure that all the functionaries within the department throughout the vertical chain must be aware of the contents and use of the charter through training. A presentation on the contents of the charter can be prepared centrally, and then presented to the functionaries at various levels through the hierarchy. E.g. the head office makes a presentation to the state level, state level makes a presentation to district level and district level officials present to block level, block level officials present to lower level functionaries etc.

Step 9: Initiate process for Sevottam compliance by Responsibility Centres

This step explains the responsibility of the Ministry/Department in ensuring that the Responsibility Centres under its administrative control also achieve Sevottam compliance.

Task 1: Provide inputs to Responsibility Centres

Provide inputs to Responsibility Centres to design and implement Sevottam compliant Citizen's Charters.

Task 2: Agree roadmap with Responsibility Centres

Discuss and agree on a roadmap with Responsibility Centres on achieving Sevottam compliance by the Responsibility Centres.



















Citizen's Charter Design and Implementation Process At a Glance

Step 2: Collect	Step 3: Plan for	Step 4:	Step 5:	Step 6:	Stop 7:	Chara O	
	Plan for			Step o.	Step 7:	Step 8:	Step 9:
nformation on		Receive	Consolidate	Prepare	Publish	Ensure	Initiate process
illorillation on	stakeholder	inputs	internal	Charter and	Charter in	implement-	for Sevottam
ervice	consultations	through	information	get	public	ation of	compliance by
standards	on service	stakeholder	and	approval	domain	Charter by	Responsibility
chieved by	standards of	consultati-	stakeholder			staff	Centers
Responsibility	Ministry/	ons	consultation				
Centers (RC)	Department		results				
	and its RC						
		-		-			
Step 1:	Step 1:	Step 1:	Step 1:	Step 1:	Step 1:	Step 1:	Step 1:
Prepare list	stakeholder groups to be	Administer survey tools as per survey	Compare existing	Prepare draft Citizen's	Upload the Charter on	Send communicati	Provide inputs to Responsibi- lity Centers
S	candards chieved by esponsibility enters (RC) citep 1: crepare list	on service standards of Ministry/ Department and its RC step 1: Identify stakeholder groups to be	stakeholder consultations which is the properties of RC on service standards of Ministry/ Department and its RC step 1: Itep 1: Identify stakeholder groups to be standards of consultations Step 1: Administer survey tools as per survey	standards on service standards of Ministry/ Department and its RC Step 1: Identify stakeholder groups to be groups to be standards of Ministry/ Department and its RC Step 1: Compare existing per survey tools as the survey tools and the survey tools as the survey tools as the survey tools as the survey tools and the survey	standards on service standards of Ministry/ Department and its RC Step 1: Identify stakeholder groups to be groups to be standards of Ministery ons approval stakeholder consultation results and stakeholder consultation results stakeholder consultation results Step 1: Compare existing per survey tools as per survey Step 1: Compare existing citizen's	standards on service standards of Ministry/ Department and its RC Step 1: Identify stakeholder groups to be RC Step 1: Administer survey tools as per survey Stakeholder consultation results Step 1: Compare existing clitten's Charter on stakeholder consultation results Step 1: Compare existing clitten's Charter on stakeholder consultation results	standards on service standards of consultations esponsibility enters (RC) Step 1: Identify stakeholder groups to be groups to be groups to be groups to be chieved by standards of consultation ons stakeholder consultation stakeholder consultation results Step 1: Step 1: Compare existing critical stakeholder consultation results Step 1: Compare existing critical stakeholder consultation results Step 1: Step 1: Step 1: Step 1: Compare existing critical stakeholder communication results

Step 2: Identify indicators to measure service standards

Step 3: Estimate current service standards

Step 4: Document the current service standards

Step 2: Prepare list of services offered by RC Step 3: Estimate

current service service standards recipient achieved by the RC Step 4: Step 4: internal Document role of Ministry/ Department standards in service Step 5: delivery by RC

consulted Step 2: Prepare plan to receive stakeholder inputs Step 3: Design tool to collect data on expectatio-ns

Design tool for stakeholder consultations on services and service Design tool for external expert consultations on services

and service standard

plan

Step 2: Analyze data collected through survey tools

Step 3: Prioritize stakeholder expectatio-ns Step 4: Design tool for

internal stakeholder consultationson services and service standards Step 5:

Design tool for external expert consultations on services and service standard

standards with stakeholder expectatio-ns

Step 2: Finalize standards of service delivered by Ministry / Department standards

Step 2: Step 2:

Charter

contents.

Circulate Provide draft CC for printed comments copies of Charter Step 3: Step 3: Finalize Disseminate

Charter Step 4: Make Hindi version of final Charter Step 4:

Get the Charter approved by Minister-incharge

Step 2:

Conduct training/orie ntation sessions for staff on Citizen's Charter

Step 2: Agree roadmap with Responsibility Centers



















GRIEVANCE REDRESS MECHANISM

4.1 Formats for Grievance Redress Mechanism

The Grievance Redress Mechanism for a Ministry/Department/ Responsibility Centers should cover the three processes of receipt, redress, and prevention and should contain information in the following sections:

- i. Information on receipt
- ii. Communication to complainant
- iii. Criteria for classification
- iv. Time norms for redress
- v. Level of responsibility for Redress
- vi. Analysis and prevention

In what follows, each process section is described briefly.

i. Information on receipt

Every Ministry/Department/Responsibility center shall identify the place, time, and personnel for receiving grievances brought personally by the complainant, received by post or any other means. Such a person should ideally be a part of the information facilitation counter or the reception or as an arrangement in the form of an internal desk/unit/section/division in an office. He/she would be responsible for receiving the grievances, issuing the acknowledgment receipt simultaneously and maintaining the record in the format given below. In case of online system, the acknowledgement should be sent automatically.

To ensure that all relevant particulars are available for further actions to be taken, full details must be recorded at the time of receiving a grievance or complaint as shown below and an additional column should be provided for tracking date of redress:



















		Particulars of Citizen / Client				Particula	rs of the	Grievance	
#	Date of Receipt	Name	Address	Landline/ Mobile / Email	Whether Acknowledgem- ent given at the time of receipt	Subject of the grievance	Office	Brief Description	Date of Acknowle- dgement Date of Redress
1	2	3	4	5	6 (yes/No)	7	8	9	10

Information under Chapter 4, Section (ii) c, of these guidelines must also be furnished.

ii. Communication to complainant

At the time of acknowledgement, the complainant should be provided with the following information:

- a. Grievance number to facilitate monitoring and reminders by complainants
- **b.** Expected time of redress (Prescribed maximum time limit for completion of redress is three months)
- c. If not addressed within expected time, action to be taken by complainant

If the grievance is not redressed within the expected time, the complainant should be provided with the following information by the person responsible for receiving the grievances:

- a. Information on reasons for delay
- **b.** Updated expected time of redress

At the time of final redress, the complainant should be provided with the following information by the office responsible for redress of the grievances:

- a. Action taken for redress
- **b.** If not satisfied with the redress action, avenues for pursuing the matter further

The information should be given in the same letter/order through which the final decision on redress is conveyed to the complainant.

















iii. Criteria for classification

Different types of grievances or complaints need different responses or ways to respond to them. Therefore the grievance must be categorized to facilitate action appropriate to the type of grievance. The Department of Administrative Reforms and Public Grievances has provided five broad suggestive criteria under which the Ministry/Department can categorize their grievances. These five criteria can be listed in the following format:

#	Criteria	Grievance Category
1.	Charter related	
2.	Policy related	
3.	Personnel related	
4.	Pensioners' related	
5.	Vigilance related	

iv. Time norms for redress

Based on the criteria listed as above, time norms for redress must be laid down as shown below:

#	Grievance Category	Time Norm for Redress

v. Level of Responsibility for Redress

In order to ensure that grievances are addressed within prescribed time norms, the GRM should define the levels of responsibility for redress of each category of grievance and its time norm. In case the grievance is not redressed at a particular defined level then an avenue should be available to the complainant to approach



















the next higher authority. The responsible officials at each level should alert their next superior official well in time if a grievance is likely to exceed the prescribed time norm. The next higher authority should call for a report to redress escalated grievances and take appropriate action without the complainant having to repeatedly remind or pursue the issue.

The table for level of responsibility for redress must contain the following information as applicable:

#	Type of Grievance	Time line for redress at Level 1	Time line for redress at Level 2	Time line for redress at Level 3	Time line for redress at Level 4

vi. Analysis and Prevention

Grievances can be viewed as free inputs to organizations, to understand the expectations of service recipients better and initiate systemic reforms to meet those expectations. Ministries/Departments must analyze why they are receiving particular types of grievances more frequently than others. Such grievance prone areas need to be identified and analyzed for bringing about necessary changes proactively.

A format for analysis of grievance prone areas is as follows:

#	Date aand description of Grievance	Grievance prone areas identified	Systeamic Causes identified	Action required to improve system	Planned date and Authority responsible for taking action	Action taken date

















4.2 Periodic Review

The Ministry/Department should have a system in place to call for monthly reports on grievance redress from Responsibility centers. The report should also contain information regarding the status of unaddressed/ unresolved grievances. In case of an automated system the monthly report should be able to automatically generate this information. All Ministries/ Departments should also consolidate the grievances redressed and pending at their own level on a monthly basis. The Director of Public Grievances of the Ministry/Department should review the grievances pending at own level and with the Responsibility centers periodically.

4.3 Concluding Remarks

The above formats show the minimum format requirements for GRMs. Ministries/Departments can improvise and add on to the above formats to make their GRMs more efficient and effective. Although it is theoretically possible to maintain these formats manually, in order to implement them practically in situations where the volume of grievances is very large, it will be necessary to install an electronic system for recording receipt of grievances, issuing alerts when prescribed time norms are exceeded and retrieving data at periodic intervals for conducting root cause analysis of grievances. A web based system (CPGRAMS) is being used in the Central Government to manage grievances received by the Department of Administrative Reforms and Public Grievances (DAR&PG) and President's Secretariat, Directorate of Public Grievances (DPG) under Cabinet Secretariat. This system is designed and managed by the DARPG. A large percentage of such grievances received at the highest level are redressed at local/subordinate level. This system facilitates the higher organizations to send such grievances at a nodal point in each Ministry/Department from where they are further sent to the concerned office where it eventually gets redressed.

The Director of Public Grievances (a JS level officer) in each Ministry/Department is using the system by accessing it through a user name and password given by DARPG. All grievances received by the President's Secretariat, Directorate of Public Grievances (DPG) under Cabinet Secretariat and DARPG are forwarded electronically to the concerned Director of Public Grievances. The Prime Minister's office will also be shortly connected to this system. The CPGRAMS has a facility for the Director of

















Public Grievances to create similar accounts for their subordinate offices and Responsibility centers that can further create their account till the last level. A facility is also provided for categorization and classification of grievances. The grievances are normally redressed at a decentralized level and higher formations that receive them can monitor the progress of redress on a specially designed monitoring desk. A new upgraded version of CPGRAMS will be launched shortly and a multimedia CD on "How to use the CPGRAMS" can be obtained from DARPG. A copy is also available on the website www.pgportal.gov.in through the helpdesk link. Any query about the CPGRAMS can be sent by email to cpgrams-darpg@nic.in. Many organizations having a large public interface may require special arrangement at local level to deal with grievances within their domain. In such cases CPGRAMS may not be useful for their purpose and may require installation of special software for their own use.



















GRIEVANCE REDRESS MECHANISM DESIGN AND IMPLEMENTATION PROCESS

5. Grievance Redress Mechanism

This section describes the step by step process for managing the GRM.

Step 1: Design of GRM

This step explains the information required for setting up new GRM/reviewing existing GRM, and how it is identified and collected. This step consists of two tasks described below.

Task 1: Prepare list of data items to be captured in the GRM

Prepare a complete list of data items required in the system for both static and dynamic data elements. Static (or master) data includes information on the offices, responsibility centers, and all subordinate offices for which grievances are received in the Ministry/Department either through post or online or manually. A list of all possible types of grievances that are expected to be received in the Ministry/Department, categorization of grievances as per criteria defined above, level of responsibility for redress and timelines for redress for each level is also a part of the static data. For dynamic (or transaction) data, prepare a list of the data elements that need to be captured for each complainant at the time of receipt including complainant details, complaint description, and any other information to be provided by the complainant.

Appendix XI shows information to be collected on receipt of grievance - Example from Central Board of Excise and Customs

Task 2: Prepare the internal process flow chart for GRM

Prepare a process flow for grievances to enter and flow through the organizational hierarchy of the Ministry/Department up till the final point where it will be redressed. It must be ensured that the process does not make it cumbersome for the

















complainant to lodge a grievance and track it while it is pending for redress. It must also be ensured that the process is optimized to ensure fastest possible redress. At a very high level, the process flow will be the same for all grievances that flow through the GRM. However, the actual process for redress after it reaches the dealing hand may be different depending upon the type of service to which the grievance is related. For the purposes of GRM process flow, only the high level process flow chart needs to be prepared. It is assumed that the process flow for redress at the level of the dealing hand is known to the dealing hand and that process is specific to each dealing hand.

Step 2: Implementation of GRM

This step explains how the GRM is to be implemented across all offices, divisions, Responsibility Centers and Subordinate offices of the Ministry/Department.

Task 1: Implement the process flow through existing systems

The existing system requires that each Ministry/Department should designate a JS level officer as Director of Grievances. The Director of Grievances should ensure that nodal officers of grievances are nominated at each of the Responsibility Centers. Account of The Director of Grievances has also been assigned under the CPGRAMS. Grievances received on the CPGRAMS by DARPG, DPG Cabinet Secretariat; President's Secretariat and directly by Ministry/Department through the web should be directed to this account. Furthermore, the system is implemented through manual; semi- automated, fully automated system whatever is available at present.

Task 2: Training/Workshops on GRM

Identify the officials at the apex level who will be implementing the process documented as above and ensure that they are aware and trained in respect of their role in implementation of the process flow.

Task 3: Initiate process for automation related decisions

Take a view on the feasibility of implementing the process in its entirety through a manual, semi- automated, or fully automated system and initiate actions required for automation as appropriate. The process for the ongoing GRM activities will vary

















with the degree of automation. Furthermore, actual implementation of the complete process flow documented as above is aligned with the automation plans of the Ministry/Department.

Task 4: Launch the GRM

Ensure that the GRM is working as laid down in the process flow charts and approved for implementation so that when the GRM is publicized and service recipients actually try to use it, it actually works. If the task involved in implementing the entire process flow is too huge to take up in one go, the same may be taken up in phases within the outer limit of 1 year.

Task 5: Publicize the GRM

Conduct a publicity campaign to make service recipients aware of the GRM in alignment with the process flows in the GRM that are actually working as in above task. The basic information regarding GRM is also made available through the Citizen's Charter.

Task 6: Periodic Review of GRM

A periodic review of GRM is to be done to remove shortcomings if any, and ensure its effectiveness under the prevailing circumstances.

Step 3: Grievance Prevention

This step explains how grievances are analyzed in order to make the GRM efficient as well as effective.

Task 1: Conduct systemic analysis

Retrieve data on all grievances received during the last month or quarter as appropriate for your Ministry/Department. Using the information on grievance description and subsequent redress provided to the complainant, identify the root cause behind each grievance.

Task 2: Identify grievances prone areas and remedial actions

Identify the most frequent types of grievances and the most frequent causes behind the grievances. Also identify remedial measures on how the Citizen's Charter, the service delivery system and/or the GRM need/s to be modified in order to prevent the root causes from recurring.

















Appendix XII shows an example of how grievance prone areas and remedial actions were identified for Employees Provident Fund Organization.

Task 3: Take follow up action to address grievance prone areas

Assign the remedial actions identified to appropriate personnel depending on the nature of action which could range from localized process improvements to apex level policy changes. Appropriate decisions are required for policy level decisions and these are referred to the competent authority for further action. Localized process improvements are to be identified and implemented quickly in a time-bound manner with clear responsibilities assigned to appropriate functionaries. Every quarter, results of the previous quarter's analysis should be reviewed to ensure that there is no backlog in the localized process improvements.

















GRM Design and Implementation Process - At a Glance

Step 1:

Design of GRM



Step 1:

Prepare list of data item sto be captured in the GRM

Step 2:

Prepare the internal process flow chart for GRM

Step 2:

Implementation of GRM



Step 1:

Implement the process flow through existing systems

Step 2:

Training/Workshops on GRM

Step 3:

Initiate process for automation related decisions

Step 4:

Launch the GRM

Step 5:

Publicize the GRM

Step 6:

Periodic Review of GRM

Step 3:

Grievance Prevention



Step 1:

Conduct systemic analysis

Step 2:

Identify grievance prone areas and remedial actions

Step 3:

Take follow up action to address grievance prone areas



















SERVICE DELIVERY CAPABILITY

Introduction

In order to deliver quality standards based services, an organization needs to manage well the key ingredients for good service delivery. It has also to build its capability to continually improve its service delivery. The most common gaps observed in public service delivery are found in the following three areas:

- I. Understanding of **Customer** Expectations
- II. Motivation and training of Employees
- III. Availability of adequate hard and soft Infrastructure for service delivery

In general, many government Ministries/Departments are deficient in the above three aspects, but a few need to pay more attention to one particular aspect as compared to the other two. Also, it may not always be possible to take up improvement in all three aspects at once. As such, some prioritization may be needed. The different kinds of improvements needed could be achieved through exercises such as (i) Training needs identification, that should precede the actual training, (ii) Process improvement through incremental improvement as in Kaizen, (iii) Elimination of wastage of time, manpower and other resources through application of principles such as Lean six sigma or through project approach etc.

Before actually initiating action to address the above three gaps, some minimum data collection and its analysis is necessary to arrive at a course of action for improvement. In the Sevottam framework context, this activity is called 'Assessment'. The following list is of different kinds of assessments that need to be undertaken for identifying the three gaps listed above:-

- 1. Baseline Study / AS IS Study
- 2. Process Mapping
- 3. Gap Analysis for identifying improvement opportunities

















- 4. Root Cause Analysis (RCA) for non-achievement of service standards
- 5. Information Needs Assessment (INA) for Effective Communication
- 6. Stakeholder feedback on services standards
- 7. Resource Base Assessment (RBA)
- 8. Office Management System Assessment

The results from the above listed assessments are to be taken into account for determining what kind of project for improvement of service delivery processes is needed.

1. Baseline Study / AS - IS study:

Baseline Study is like a foundation stone of any improvement exercise. It identifies the current status and serves as a reference point for monitoring and measurement of results in future. Improvement actions taken up without a clear idea of the baseline are likely to be haphazard and it will be difficult to say whether or not desired results have been achieved. The simplest way to create a baseline is to identify which **requirements** are fulfilled and which ones are not. For certain cases, the requirements may be partially fulfilled.

Requirements

For Sevottam implementation, specific requirements have been identified to undertake a baseline study. In general, citizens / clients / and other service recipients are not fully informed about (i) the full range of services provided by a public organization, (ii) the relevant service standards for each and (iii) the conditions to be fulfilled by the citizens for receiving the services. This information gap between the service provider and service recipients exists in a very large number of public service delivery organizations in India. Therefore, service recipients tend to expect much more than what the public service provider delivers. This results in widespread dissatisfaction as well as a low perception about public services. Very often, this information may not be available even with concerned staff members in the organization. Combining this observation, with widely acknowledged essentials of Quality Management systems, the requirements for Sevottam Baseline / AS-IS study is grouped into five categories as shown in the following table:

















REQUIREMENTS		CRITERIA	
NEQUILENEIVIO	Fulfilled	Partially Fulfilled	Not Fulfilled
Availability of Clear Documentation			
1			
N			
Service Quality Monitoring Mechanism			
1			
N			
Feedback and Review Mechanism			
1			
N			
Use of Technology			
1			
N			
Top Management Focus			
1			
N			

GUIDELINES FOR IMPLEMENTING SEVOTTAM













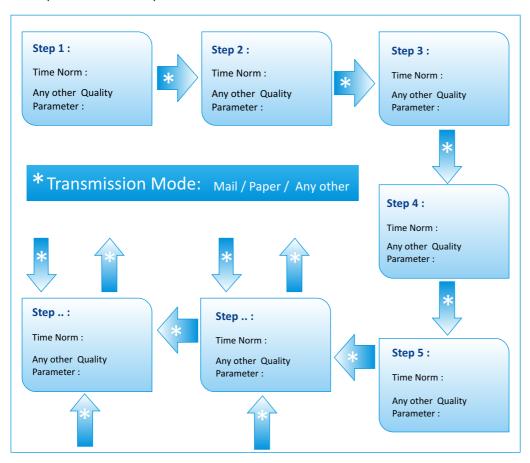




2. Process Map

Process map documents the workflow of any activity and is created to bring about a clearer understanding of an activity or series of parallel activities. A good process map shows exactly what steps are included, who is responsible, how a standard process should be completed and how to determine whether it has been completed successfully. In the context of Sevottam, once this is clearly documented for each of the services listed in the Citizen's Charter, uncertainty over meeting the service standards listed in the Charter will be reduced.

A simplified Process Map is shown below:



However, if a service provider organization initially has some difficulty in creating process maps in the form of diagrams, the simplified format shown below can be substituted.

















Service Name:	<to be="" charter="" citizen's="" from="" taken=""></to>
Process Name:	
Step 1 Name:	
Time to Completion:	working hours/working days
Dealing staff name and designation:	
Process completion output:	<e.g. acknowledgement="" receipt=""></e.g.>
Process quality criteria:	<e.g. acknowledgement="" and="" date="" has="" identification="" legible="" number=""></e.g.>
Is any internal record created?	Yes/No
If yes to above, please mention name/s of records:	
Is any checklist used?	Yes/No
If yes to above, please mention name/s of checklist/s	
Process Mapping done by:	(Name)
Date of Mapping:	<date></date>

The tables as above can be arranged in a sequential manner so as to give an overview of dependence of one step on the other and on the fulfillment of prescribed requirements. Using the information contained therein, service providers can work towards ensuring that the right process is followed every time, and that the process is periodically reviewed and improved to ensure that it is fast and efficient.

















3. Gap Analysis for identifying improvement opportunities

Gap analysis means taking stock of current weaknesses in the system and includes (i) determining, (ii) documenting, and (iii) formally recognizing, the variation between what the AS-IS status is and what the organization wants to achieve. For this reason, the Baseline /AS-IS Study is a precursor for Gap Analysis. In the Baseline study the requirements identified and tabulated as 'Not Fulfilled' and 'Partially Fulfilled' provide the initial basis for identifying weaknesses in the service delivery processes and for arriving at the exact gaps.

Potential Gaps

As mentioned earlier, one basic issue in many public service delivery organizations is the existence of 'Information or Communication gap' between the service providing organization and its service recipients. There could be several reasons for this lack of communication or understanding. For example lack of clarity or clear instructions in decisions on a substantive issue that involves concurrence of authorities concerned or regulator, if any. In cases where decisions are clear these may not have been clearly documented or made available in the form of a ready reference document freely accessible when needed. Even where clear documentation exists, its contents may not have been communicated to all levels of staff members concerned, within the organization, and/or these may not be made freely available to the public. Furthermore, even if the contents have been communicated and disseminated, the process may still not be used. Therefore the last part is to check that the process is being implemented and/or the information is actually being used by the service recipients.

For example, recently a query was received on Sevottam helpdesk, from a citizen in Gujarat, who wanted to know if it was mandatory for a State Government organization to make available a copy of the Citizen's Charter on request. The stand taken by the organization concerned was that after having placed the Citizen's Charter on its website, it was not necessary to make a copy available to a citizen even on request. This is a common sense situation that was needlessly complicated by the organization's refusal to give a copy. As per guidelines on the subject, the Citizen's Charter is to be well publicized and copies placed at the reception for proactive dissemination to citizens. At the point of organization-citizen interface, everything cannot be mandated in advance, and such matters need to be included as part of the staff training and general awareness.

















For Sevottam implementation, Gap Analysis format takes the above possibilities into account and shows an assessment under five categories as shown below.

	CRITERIA				
REQUIREMENTS	Not Prepared	Prepared but process not documented	documented documented but not and freely disseminated available		Process understood and implemented by all users
Issues to be add	lressed whi	le Setting Star	ndards		
1					
N					
Systems needed	d for Smoot	h Delivery of	Routine Servi	ces	
1					
N					
Systems needed	d for Contir	uous Improve	ement in Servi	ce Delivery	
1					
N					

4. Root Cause Analysis (RCA) for non-achievement of service standards

Root Cause Analysis (RCA) is a method, adopted to identify the source or root of any problem so that appropriate steps for removing the source or the root cause can be taken, instead of allowing the same or similar problems to continue to occur repeatedly. RCA is a method for prevention of a problem and helps to develop the problem-solving capabilities in an organization.















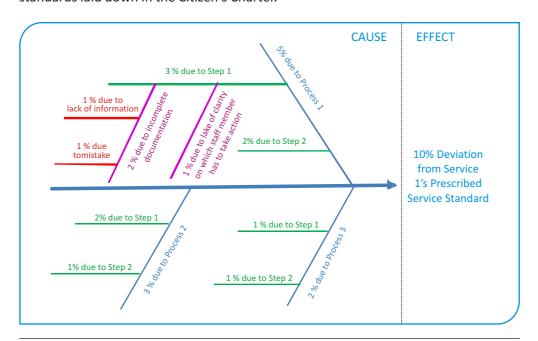


The term 'Five Why's' is used to explain 'Root Cause Analysis' method This means that when a problem is identified, if the question 'why the problem has occurred?' is asked five times, with reference to the last answer, then the source or root of the problem is reached or it gets uncovered. The most common format used to conduct a Root Cause Analysis is called the "Ishikawa" or "Fish Bone Diagram".²

The role of RCA in implementation of Sevottam framework is to identify the critical areas where focused attention is needed. This focus also then prevents deviation from service standards as included in the Citizen's /Client's Charter.

The RCA method should be used after Process Mapping for each service given in the Charter has been completed, and after all the interdependencies among the processes and steps in each service or sub-service have been clearly brought out.

Service delivery problems can arise or recur due to unresolved grievances, or non-analysis of citizen feedback or non-consideration of internal monitoring reports or no action on Citizen's Charter assessments etc. These can be clearly traced and identified through RCA after which remedial steps must be taken. RCA must also be used to uncover and identify systemic deficiencies that hinder service delivery as per standards laid down in the Citizen's Charter.



²Generally an Ishikawa diagram looks for five categories of causes behind any problem, i.e. Men, Material, Method, Machine, and Environment.









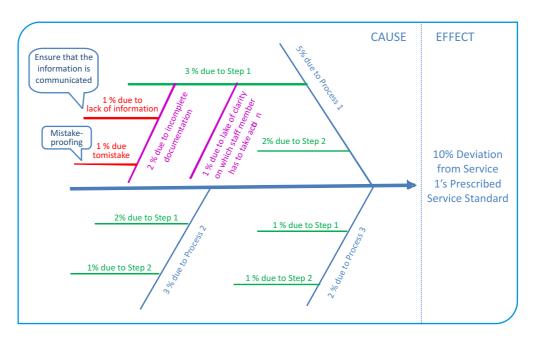








Although a typical RCA does not explicitly show the solutions, once the root cause has been identified, the possible solutions starts becoming obvious. The following figure shows how solutions can be found using an RCA diagram.



If a service provider organization finds it difficult to document the RCA in a diagrammatic form, the tabular format shown below can be used.

Service Name:	<to be="" charter="" citizen's="" from="" taken=""></to>
Process Name:	<to be="" from="" map="" process="" taken=""></to>
Step Name:	<to be="" from="" map="" process="" taken=""></to>
Problem Name:	
Major Cause of Problem (A)	
Major Cause of A (B)	
Major Cause of B (C)	
Major Cause of C (D)	
Major Cause of D (E)	
Solution to E	

















5. Information Needs Assessment (INA) for Effective Communication

Information Needs Assessment (INA) includes the needs of service providing organizations to know what kind of information must be given by service recipients, in order to avail its services in the best possible manner. Today almost all service providers communicate information about their products and services through their websites, and display boards in their offices where interface with service recipients takes place.

However, it is possible that the information provided to service recipients is incomplete or even if complete; it is not understood clearly by the service recipients. As a result, service recipients may not come forth with the most relevant information, needed to avail the services at the optimal level. Even if information requirements are clearly understood by service recipients, new information gaps may arise due to addition of new services or introduction of new ways of delivering services or at times, new groups of service recipients may start availing the services of an organization. All these situations help to highlight the fact that information needs of the service recipients are likely to change over a period of time. Therefore, service providers need to keep track all such changes and enable service recipients to avoid facing harassment at the interface point or waste time due to lack of **proper information**.

A Proper System for Assessing Information Needs of Service Recipients

Among the most frequent situations faced by citizens to avail public services is that they have to "run from pillar to post" for availing services from any government organization. This perception prevails when there is lack of clarity on what is to be done to avail which service? In the first instance, it is the onus of the organization to inform citizens about: Where to start? How many steps are involved? Who is authorized for the various steps or stages?

When the service recipient visits an office or completes one step, he/she finds out about the need to visit another office and/or complete another step. Therefore, service providers need to have a system through which they can periodically assess service recipients' information needs.





Information Needs Assessment format should consists of questions and statements that can bring out the areas of ignorance of service recipients, so that required information can be provided without asking.

Typical areas where proactive information must be provided by service recipients are shown below:

- Location of office under whose jurisdiction the concerned area falls
- Location of Information and Facilitation Counter (IFC) for the concerned service
- How, where and when to obtain forms for making service request
- Last dates (if any) for submitting a particular service request
- Statutory requirements applicable for the concerned service
- Documentation required for making a service request
- Amount of fees to be deposited for each service, how, where, and when

6. Stakeholder Feedback on Service Standards

The Citizen's Charter is to be viewed as a dynamic document. It is not a static onetime creation and its contents need to keep pace with changes impacting the delivery of services by a public organization. The Charter needs to be reviewed periodically and a rain check is needed to ensure that the contents are in tune with service recipient requirements as they change from time to time. This has also been discussed under Information Needs Assessment (INA)

Along with INA, Stakeholder feedback³ helps the service provider to ensure relevance of services included in the Charter. It provides answers to questions such as (i) whether the more frequently availed services have been included? (ii) Whether new services are needed? (iii) Whether the quality standards are appropriate etc.

³ Stakeholder feedback is distinct from the initial consultation that is done before formulation of Charter.

















Stakeholder feedback however, does not mean posing general questions to service recipients on the changes needed in the Charter. The questionnaire for the feedback should be specific and addressed to and focused only at those groups who are stakeholders / service recipients for a specific service(s). Similar or related services may be grouped for one Questionnaire, but in cases where different services have different service recipients, the questionnaires too have to be separately focused. General discussions on what is wrong with the country, the government, the polity, the bureaucracy, the citizenry, etc. should be strictly avoided.

For implementation of Sevottam, Stakeholder Feedback should be focused on gathering information from the service recipients on (a) Services and service standards mentioned in the Citizen's / Client's Charter (b) Additional services that can be included in the Charter (c) Suggestions for improvements in Service Standards and any other issue(s) that the organization may consider relevant, for improving its service delivery. A suggested format for obtaining Stakeholder Feedback on Service Standards could be as shown in the following pages:

















STAKEHOLDER FEEDBACK FORM OF MINISTRY / DEPARTMENT OF ---------- Date of filling the form: ------

Note: Please try to complete this simple form as it will not take more than five minutes of your time, but your valuable input will help us improve our service delivery

A. Which of the following services is needed by you from <Name of Department>? Please fill **Yes** for the services needed and **No** for services not needed in the column **Relevant**.

Sl. No.	Service	Relevant (Yes/No)
1	<to be="" charter="" citizen's="" from="" taken=""></to>	
	<to be="" charter="" citizen's="" from="" taken=""></to>	
n	<to be="" charter="" citizen's="" from="" taken=""></to>	

B. Out of the services relevant to your organization(as per services selected in the above table), do you think the time norms laid down by <Name of Department> under the column Service Standards and grievance redress are reasonable for your needs? If you think that the norms are not reasonable, please mention specific service and the norms that you think are reasonable.

Sl. No.	Service needed	Reasonable Norm
1		
n		

C. Are there any services that you need from this Ministry / Department that are not included in the Citizen's / Client's Charter?

Yes / No

















D If **Yes**, please list here the services you wish to get included in the Charter:

Sl. No.	Additional Service needed	Reasonable Norm
1		
m		

E. Would you like to be part of a <Stakeholder Group Name> to engage with this Ministry / Department for updating their services and service standards?

Yes / No

F. Would you like to be invited for stakeholder consultation for review of the Citizen's / Client's Charter of this Ministry / Department>?

Yes / No

If yes, please give your complete postal addresses / email ID

G. Any additional Inputs or Issues not covered above?

















7. Resource Base Assessment (RBA)

The implementation of QMS Sevottam framework involves resources that are required to ensure that services are delivered as per quality standards laid down in the Charter. The purpose of undertaking a Resource Base Assessment (RBA) is to highlight the minimal resource needs of a unit for ensuring a consistency between what is promised in the Charter and what the unit can deliver. The existing gap between the current resources available with the service delivery unit and resources actually needed for the promised service quality and delivery gets documented through the RBA. As such, the Resource Base Assessment can be utilized as a basis for long term strategic planning and for augmentation of resources plans. RBA should be used to assess the gap between resources required and resources available. In case of a wide gap, a view needs to be taken whether the service provider will close the gap by acquiring more resources for its service delivery unit or will close it by lowering down the service standard or by making changes in the ways in which the services are currently delivered.

For Sevottam, the three main areas for which an RBA is to be undertaken are:

- Human Resources
- Financial Resources
- Technical Equipment and Infrastructure

The following formats show indicative aspects on the basis of which an RBA for above areas is to be undertaken:

Human Resources:

- Technical training needs to impart knowledge about the job
- General training needs to build soft skills
- Delegation of powers needs for speedier decision making
- Rewards and recognition practices to enhance individual and team motivation
- Disincentives to discourage underperforming/dishonest practices

















Financial Resources:

- Revenue budget for day-to-day expenses
- Allocation of funds to various heads of activity
- Cash flows /pending release of budgets
- RBA based capital budget for long term planned improvements
- Analysis of lapsed budgets in previous 5 years

Technical Equipment/Infrastructure:

- Comfortable Sitting/Waiting space for service recipients/visitors with facility for drinking water
- Space for staff seating and minimum essential records
- Hardware: Computers, printers, fax machines, etc.
- Software: File movement system, Grievance redress system, etc.
- Connectivity and Bandwidth

It is assumed that the items mentioned above will be in working order.

8. Office Management System Assessment

Cleanliness and orderliness of office space and environment makes the first impression on any outsider visiting a government office. Cleanliness also leaves a lasting impression and adds to the perception of quality of service delivery. On the other hand, an unclean work place has a negative impact on both the service provider as well as the service recipients. Cleanliness and a neat look is a luxury that all public service delivery units can afford to provide as a minimal requirement of service quality. The only investment needed for this is a little more consciousness of its importance and some effort.

One of the common tools to improve cleanliness and encourage appropriate storage practices is known as "5S"⁴. In this each 'S' stands for an English word signifying a stage in the exercise, that improves the physical surroundings and the ways of working in an office. These five words are:

⁴ This is based on the Japanese concept of "Kaizen" which means elimination of waste. Kaizen is a technique to improve functioning and solving problems without throwing money at them.

















- Sort
- Stabilize
- Shine
- Standardize
- Sustain

These five words when implemented regularly have improved the work environment in an office, motivated personnel and raised their morale without any additional expenditure. For this reason cleanliness in office has been called a 'luxury' that can be afforded by all. **5S** have been used for weeding out old records, reducing pressure on physical space and eliminating wastage of time in searching for documents, making relevant and updated records available at the time they are needed. Many organizations have used **5S** tools to achieve "30-second search time" for documents and files, both in physical and electronic form.

As the needs vary across Ministries / Departments, specifically designed forms may need to be created. However, in order to identify opportunities for improvement and assess how an exercise of **5S** can help in bringing improvements continually, the following format can be used:

Activity 1- Sort

	· I			
S .No	Description	Score	Remarks	Date
1.1	There are no unusable office work aids/consumables in the area - E.g. file covers, pens, paper, calculators, etc.			
1.2	There is no unused or defective office machinery in the area - E.g. PC, printer, fax, scanner			
1.3	There are no unnecessary materials in the work area E.g. cartons, packaging, containers, catalogues, filing baskets, samples, etc.			
1.4	There is no unused furniture in the area - E.g. chairs, stools, tables, cupboards, shelves, info boards, pin boards			
1.5	There are no documents containing unnecessary or outdated information in the work area - E.g. old records, expired notices, guidelines, work instructions, work results, files no longer used			
	Total			

















Activity 2 -Stabilize

S .No	Description	Score	Remarks	Date
2.1	All office work aids are either in use or are lying in the place assigned/marked for them			
2.2	All office work aids have an assigned place for storing them when not in use			
2.3	There are recognizable markings in the work area have been made for places to put work aids, incoming post, etc.			
2.4	There are recognizable markings in the work area for office machinery (PC, printer, scanner, fax) to identify who uses it			
	Total			

Activity 3 -Shine

S. No	Description		
3.1	All work aids are clean/free of dust and dirt		
3.2	All office equipment and work places are well cleaned and free of dirt/dust		
3.3	The working environment, i.e. floors, walls, window sills, windows, doors, free of dirt		
	Total		

Activity 4- Standardize

S. No	Description		
4.1	There are standard practices for routine office activities e.g. phone call/letter responses, filing system, team communications on important issues		
4.2	There are standard practices on destruction/removal of redundant material from daily work area and storage spaces		
	Total		

Activity 5 -Sustain

S. No	Description		
5.1	Every staff member is adhering to the rule "Everything in its place and a place for everything"		
	Total		

Score Measure	Score
Strongly agree	3
Somewhat agree	1
Disagree	0



















CAPABILITY ASSESSMENT AND ENHANCEMENT PROCESS

This chapter describes the step by step process, for assessment-improvement actions to be initiated for institutionalizing a system to manage quality of services delivered by the organization.

Step 1: Baseline / AS - IS Study

This step explains how a Baseline / AS - IS study can be used for gauging and assessing the currently existing system, for managing the quality of services delivered.

Task 1: List the documents containing information necessary for managing service quality

- a) As per requirements of a QMS framework like Sevottam, the following information should be clearly indicated in the Citizen's / Client's Charter:
 - i. Main services offered
 - ii. Minimum standards prescribed for these services
 - iii. Expectations from service recipients
 - iv. Process for lodging complaints/grievances
 - v. Time norms for acknowledgement, intermediate progress (if required) and final closure of complaints

If the organization is delivering services across a counter, then maximum waiting time for each counter service needs to be provided in a documented form, either in the Charter or well displayed in local language at the counter.

b) In order to ensure that the service standards contained in the Citizen's / Client's Charter are neither unrealistic nor excessively stringent, they need to be compared with standards that are generally considered acceptable for the similar services in the public sector.

















- c) Furthermore, the service standards need to be aligned with the expectations of service recipients. Therefore the following aspects also need to be available in documented form:
 - i. Best practice standards relevant for services listed in Citizen's /Client's Charter
 - ii. Expectations of service recipients while availing services as collected through oral or written feedback
- d) In order to ensure that the time norms for grievance redress are neither unrealistic nor excessively stringent, grievances need to be categorized according to the expected time taken to resolve them. Therefore, a classification of grievances and the differential time norms for their redress should be developed and made available to the service recipients in a documented form.
- e) In order to ensure that the service standards contained in the Citizen's / Client's Charter are consistently met, it is necessary to ensure that minimum infrastructure requirements for meeting those standards are consistently available. Therefore, the minimum infrastructure requirements for delivery of services as per standards should be available in documented form so that their availability can be confirmed at any point in time.
- f) In order to ensure that the service standards contained in the Citizen's / Client's Charter are consistently met, it is necessary to ensure that staff members who are engaged in delivering those services, have the necessary skills and knowledge required for delivering them. Therefore, the minimum requirements for awareness/training of staff coming in contact with service recipients or engaged in other supporting activities should be available in documented form, so that awareness sessions and trainings are conducted accordingly.

Task 2: List the activities needed to monitor achievement of standards contained in the Charter

In order to ensure that any deviation between actual service standards and service standards contained in the Citizen's Charter is detected and controlled, it is necessary to have an internal monitoring mechanism to regularly verify that:





- i. Prescribed service standards are being met
- ii. Time norms for acknowledgement, intermediate progress (if required) and final closure of grievances, are being met
- iii. Online system for lodging of grievances is fully functional on a 24x7 basis
- iv. Telephone numbers provided for grievance lodging, are promptly responded to
- v. Minimum infrastructure requirements for delivery of services as per standards is available and in working order
- vi. Minimum required awareness/training is given to staff

Task 3: List the activities to progressively improve service standards

In order to ensure that there is improvement in service standards over a period of time, it is necessary to take up initiatives that are aimed at:

- Bringing prescribed standards closer to service recipients' expectations
- Bringing prescribed standards closer to national or known benchmarks and best practices

Task 4: List the periodic checks needed to ensure effectiveness of communications

In order to ensure that the contents of documentation and other activities in above tasks are effectively utilized for service delivery improvement, it is necessary to periodically check if:

- Service recipients are aware of Citizen's / Client's Charter
- Service recipients understand how to avail services, most conveniently
- Staff understands the purpose and content of the Citizen's / Client's Charter
- Staff is following basic courtesy and punctuality requirements in dealing with service recipients
- Staff understand how their day-to-day working is linked to achievement of service standards





 Staff understands what they need to do for success of initiatives that are aimed at bringing prescribed standards closer to service recipient expectations, and bringing prescribed standards closer to benchmarks/best practice

Task 5: List the areas where use of technology is known to improve service delivery

In order to ensure that the activities related to service delivery are performed with efficiency and accuracy, it is necessary to use technology through:

- Phone/Internet for availing services possible without physical visit by service recipients
- Help lines for registering complaints/grievances
- Electronic system to monitor time taken/other standards to provide services listed in Citizen's / Client's Charter
- Electronic system to enter and transmit complaints received, to concerned functionaries
- Escalation of complaints not redressed within norms

Task 6: List prizes/awards for motivating staff to provide better services

In order to ensure that staff is motivated to progressively deliver better services, it is necessary to have motivational schemes to promote healthy competition by recognizing and encouraging:

- Outlets and units excelling in service delivery
- Individual staff members contributing to high standards of service delivery
- Individual staff members providing implementable process improvement suggestions





Task 7: List the activities which are commonly used to receive service recipient feedback

In order to ensure that service delivery is aligned with service recipient expectations, service recipient feedback needs to be gathered through:

- Service recipient surveys
- Analysis of grievances received
- Observations through surprise visits / official visits and periodic inspections
- Periodic consultations with citizen representatives groups / stakeholders

Task 8: List the areas for periodic review to keep up with changing environment

In order to ensure that the Citizen's / Client's Charter is actually fulfilling its purpose and data from Grievance Redress Mechanism is being used for removing common causes of complaints, it is necessary to periodically cross check / review / analyze:

- Citizen's / Client's Charter to improve its effectiveness
- Grievances received to identify and control grievance prone areas

Task 9: List service delivery improvement areas for regular review by top management

In order to ensure that service delivery improvements receive due priority, it is necessary for top management to include the following objectives in their periodic reviews:

- Reducing causes of complaints
- Redressing maximum complaints immediately on receipt
- Increasing resource availability for improved service standards
- Introducing new, efficient methods to improve services and standards
- Eliminating fire-fighting style of working
- Reviewing outdated activities and methods

















Task 10: Modify the list to make it relevant for your organization

The lists as above should be scrutinized to ensure that items not relevant for your organization are deleted, specific items relevant for your organization are added, and the language of phrases used for the listing is appropriate in the context of your organization.

Task 11: Compile the list in tabular form

The combined list of documentation and other activities should be converted into a table with five columns with following headings: Sr. #, Item Name, Completely Fulfilled, Partially Fulfilled, and Not at All Fulfilled.

Sr. no	Item Name	Completely Fulfilled	Partially Fulfilled	Not Fulfilled at all

Task 12: Mark each item as Completely, Partially or Not at All Fulfilled

The combined list of documentation and other activities should be examined to check which of the requirements are completely, partially, or not at all fulfilled in your organization. The resultant document constitutes the Baseline Study for your organization.

Refer Appendix XIV for an example of how the Baseline Study should look like. The items that get identified as partially fulfilled or not at all fulfilled should be treated as deficiencies and probed further to identify actions for removing them.

Step 2: Process Mapping

This step explains a simple method to create a process map which can be used to identify potential bottlenecks in an existing service delivery process.

















Task 1: Break up the service delivery workflow into distinct steps

For each service listed in the Citizen's Charter, break it up into small steps each of which is performed by one particular staff member.

Task 2: Gather information needed to improve and standardize each step

For each step identified, compile the following information:

- Time to completion
- Dealing staff name and designation
- Step completion output
- Step quality criteria
- Is any internal record created?
- If yes to above, please mention name/s of records
- Is any checklist used?
- If yes to above, please mention name/s of checklist/s
- Time to transition to next step

Task 3: Aggregate the total time to completion and transition for each service

For each service listed in the Citizen's / Client's Charter, add the time to completion and transition for each step. Make adjustments for steps that may be taking place simultaneously and compare the total with the time norm laid down in the Citizen's Charter.

Task 4: Identify Improvement Opportunities

Through the process map, identify potential bottlenecks and conditions which prevent or may at times prevent meeting the standards laid down in the Citizen's Charter. Identify potential actions to remove these bottlenecks and conditions.

Refer Appendix XV for a real life Process Map prepared by Ministry of Food Processing and Industries (MoFPI) for one of there services viz. disbursal of subsidy in the Fruit and Vegetable sector.

















Step 3: Gap Analysis for identifying improvement opportunities

This step explains how a gap analysis is to be undertaken for identifying improvement opportunities in the current system, for managing public service delivery. Although Baseline Study and Gap Analysis deal with the same issues, the purpose of baseline study is to assess the AS -IS current status whereas the purpose of Gap Analysis is to identify specific improvement opportunities in the areas where the organization is not satisfied with current status.

Task 1: List the issues to be addressed while setting standards

In order to set standards that are complete, realistic and aligned with service recipient expectations, there has to be clarity on the following issues:

- i. Main services offered
- ii. Minimum standards prescribed for these services
- iii. Expectations from service recipients
- iv. Process for lodging complaints/grievances
- v. Classification of grievances/complaints according to time required for their redress
- vi. Time norms for acknowledgement, intermediate progress (if required) and final redress and closure of grievances.
- vii. Maximum waiting times for counter services (if provided by the unit)
- viii. Standards that are generally considered acceptable for the services in public sector
- ix. Standards expected by service recipients

Task 2: List the systems needed for smooth delivery of routine services

In order to ensure smooth delivery of routine services, the following systems/practices have to be in place:

- i. Phone/Internet for availing services without physical visit by service recipients (wherever possible)
- ii. Telephone lines for lodging grievances/complaints

















- iii. Online system for lodging grievances/complaints
- iv. Minimum infrastructure requirements for delivery of services as per standards
- v. Minimum required awareness/training of staff coming in contact with service recipients
- vi. Electronic system to monitor time taken to provide services listed in Citizen's Charter
- vii. Escalation of complaints not redressed within norms

Task 3: List the systems needed for continuous improvement in service delivery

- a) Motivational interventions to recognize:
 - Outlets excelling in service delivery
 - Individual staff members contributing to high standards of service delivery
 - Individual staff members providing implementable process improvement suggestions
- b) Proactive seeking of feedback from service recipients through:
 - Customer surveys
 - Analysis of grievances
 - Observations through visits and inspections
 - Periodic cons.ultations with citizen representatives
- c) System improvement activities as priorities on top management's regular agenda
 - Bringing prescribed standards closer to service recipient expectations
 - Bringing prescribed standards closer to benchmarks/best practice
 - Improving the effectiveness of Citizen's / Client's Charter
 - Removing causes behind grievance prone areas

















- Redressing maximum grievances immediately on receipt
- Increasing resource availability for improved service standards
- Introducing new, efficient methods to improve services
- Eliminating fire-fighting style of working
- Reviewing outdated activities and methods

Task 4: Modify the above lists to make them relevant for your organization

The lists as above should be scrutinized to ensure that items not relevant for your organization are deleted, specific items relevant for your organization are added, and the language of phrases used for the listing is appropriate in the context of your organization.

Task 5: Compile the lists in tabular form

The four lists prepared as above should be combined into separate tables with six columns each. The columns should have the following headings: Sr. #, Issue Name, Not Prepared, Prepared but process not documented, Process documented but not disseminated, Process documented and freely available to all users and Process understood and implemented by all users.

SI. No.	Issue Name	Not Prepared	Prepared but process not documented	Process documented but not disseminated	Process documented & freely available to all users	Process understood & implemented by all users

Task 6: Assign color code to show Gap Analysis results

The lists of issues to be addressed should be examined to check the stage applicable in your organization for each issue. Use the following color scheme to show the applicable stage for your organization:

















Not Prepared: Red

Prepared but process not documented: Orange

Process documented but not disseminated: Yellow

Process documented and freely available to all users: Light Green

Process understood and implemented by all users: Dark Green

Sr. #	Issue Name	Not Prepared	Prepared but process not documented	Process documented but not disseminated	Process documented & freely available to all users	Process understood & implemented by all users
1	A					
2	В					
3	C					
4	D					
5	E					

The resultant document constitutes the Gap Analysis for your organization.

Refer Appendix XVI for an example of how the Gap Analysis should look like. The items marked in Red need immediate corrective actions for taking them towards Dark Green.

Step 4: Root Cause Analysis for non-achievement of service standards

This step explains how to identify the root causes behind non-achievement of service standards so that action can be taken to address the causes of the problem along with addressing the results.

Task 1: Identify the cases in which service was not delivered as per standards

Using the last monitoring report, shortlist the cases where service standards were not achieved.

















Task 2: Categorize the cases according to the reasons for not achieving standards

Find out the reasons for non-achievement of service standards in each case and arrange the cases according to the reasons. Find out the reason behind the first reason and repeat the exercise till the fundamental problem is identified for which corrective action needs to be taken to avoid recurrence of non-achievement.

Step 5: Information Needs Assessment for Effective Communication

This step explains how to find out if information is being communicated effectively to service recipients and what more needs to be done to provide them the correct information they need to avail services in an efficient manner.

Task 1: Identify service recipient groups who need to be better informed

Prepare a short list of service recipient groups (out of a long list of service recipients) who have difficulty in availing services due to lack of understanding of the right procedures to follow for availing efficient services.

Task 2: Develop methods to collect data on information needs of service recipients identified in Task 1

Develop a method to find out areas where service recipients need more information. These areas can be identified through multiple methods, e.g. citizen survey to capture beneficiary expectations on the standards, open house discussions, soliciting public views through advertisements, analysis of complaints/grievances.

Refer Appendix XVII for a real life tool used by Department of Woman & Child Development, Government of Karnataka, to capture citizen/client expectations.

Task 3: Collect and analyze data through identified methods

Collect data as per areas (where more information needs to be provided) identified in the survey tools and compile results to find out areas where communication effectiveness needs to be improved.

















Step 6: Stakeholder Feedback on Service Standards

This step explains how to receive feedback from stakeholders on service standards so that improvements can be made in accordance with stakeholder needs.

Task 1: Identify target stakeholders

Prepare a list of stakeholders from whom feedback is to be sought.

Task 2: Design a tool to collect data on information needs of service recipients identified in Task 1

Using the sample provided in Section 6 of Chapter 6, develop a tool to find out what the actual users of the services think about the service standards, and whether they require any additional services and the standards they expected for those services.

Task 3: Collect and analyze data through survey tools as per survey plan

Collect data using the tool and compile results to find out what changes actual users of the services need to the list of services and their standards.

Step 7: Resource Base Assessment

This step explains how to assess what resources are required to ensure that services are delivered as per service standards.

Task 1: Identify human resources related requirements

From the following checklist, pick up the ones that are relevant for your organization and identify specific needs:

- Technical training needs to impart job knowledge
- General training needs to build soft skills
- Delegation of powers to take quick decisions

















- Reward and recognition practices to enhance motivation
- Disincentives to discourage dishonest practices

For each item identify specific needs, such as name of training, schemes for delegation of powers and incentive/disincentive for improved service delivery.

Task 2: Identify finance related requirements

Examine the following checklist and add/delete items that are relevant for your organization:

- Capital budget for improvements targeted in near future
- Revenue budget for day-to-day expenses
- Allocation of funds to various heads
- Analysis of lapsed budgets in previous years
- Cash flows pending release of budgets

For each item identify specific needs, such as amounts to be budgeted, actions to be taken for avoiding budget lapse in future and for continuity of services pending release of budgets.

Task 3: Identify infrastructure related requirements

From the following checklist, pick up the ones that are relevant for your organization and identify specific needs:

- Sitting/Waiting space for service recipients/visitors
- Space for staff seating and minimum essential records
- Hardware: Computers, printers, fax machines, etc.
- Software: File movement system, Grievance redress system, etc.
- Connectivity and Bandwidth

















For each item identify specific needs, such as square feet area, number and specification of machines and software.

Task 4: Incorporate above needs into the Annual Plan and Strategic Plan

Compile the above lists and work out further details for incorporation into the organization's Annual Plan and other documents seeking budgetary allocations.

Step 8: Office Management System Assessment

This step explains how to assess whether the current practices in office management are up to the mark for supporting best possible delivery of services.

Task 1: List areas where office functioning requires improvement

Examine the following checklist and add/delete items that are relevant for your organization:

- Document storage system for old and current records
- Daily Cleaning of office premises
- Periodic maintenance checks
- Telephone etiquettes
- Document retrieval and return practices
- File naming convention for electronic data
- Identification markings on files and records
- Indication boards to facilitate quick identification of sections and counters/desks

Task 2: Action to implement improvements

Using the checklist provided in Section 8 of Chapter 6, conduct an audit of the current practices and identify improvement opportunities for implementation.











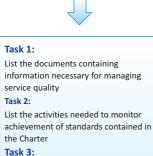






Service Delivery Capability Assessment and Enhancement Process At a Glance

Step 1:	Step 2:	Step 3:	Step 4:	Step 5:	Step 6:	Step 7:	Step 8:
Baseline /	Process	Gap Analysis	Root Cause	Information	Stakeholder	Resource	Office
As-Is Study	Mapping	for identifying	Analysis for	Needs	Feedbackon	Base	Management
		improvement	non	Assessment	Service	Assessment	System
		opportunities	achievement	for effective	Standards		Assessment
			of service	communica-			
			standards	tion			



List the activities needed to

progressively improve service standards Task 4: List the periodic checks needed to ensure effectiveness of communications

List the areas where use of technology is known to improve service delivery

List prizes/awards for motivating staff to provide better services

List the activities which are commonly used to receive service recipient feedback

List the areas where periodic review is required to keep up with changing environment

Task 9: List service delivery improvement areas for regular review by top management Task 10.

Modify the list to make it relevant for your organization

Task 11: Compile the list in tabular form

each item as Completely, Partially or Not at All Fulfilled

Task 1: List the issues to be addressed while setting standards

Task 1:

service

delivery

Task 2:

Gather

Break up the

workflow into

distinct steps

information

improve and

standardize

Aggregate the

completion

and transition

each step

Task 3:

time to

for each

Task 4:

Identify

improvement

opportunities

service

needed to

Task 2: List the systems needed for smooth delivery of routine services

Task 3: List the systems needed for continuous improvement in service delivery

Task 4: Modify the above lists to make them relevant for your organization Task 5: Compile the lists in tabular

form

Task 6:

Assign color

code to show

Gap Analysis results

Identify the cases in which service was not delivered as per standards

Task 1:

Task 2: Categorize the cases according to the reasons for not achieving standards

Develop methods to collect data on information needs of service recipients identified in Task 1 Task 3:

Task 1:

Identify

service

recipient

groups who

need to be

informed

Task 2:

better

Collect and analyze data through identified methods

Task 1: Identify target stakeholders Task 2: Design a tool to collect data

information needs of service recipients identified in Task 1 Task 3:

Collect and

analyze data

survey tools

as per survey

through

plan

Task 1 Task 3: Collect and analyze data through survey tools as per survey plan

Task 1:

Task 2:

on

Identify target

stakeholders

Design a tool

to collect data

information

needs of

recipients

identified in

service

Task 1: List areas where office functioning requires improvement Task 2: Action to

implement

improvements



















INSTITUTIONAL ARRANGEMENTS FOR DESIGN AND IMPLEMENTATION

8.1 Institutional Arrangements at Ministry/Department Level

Institutional Arrangements refer to organizational structures including delegation, distribution, or sharing of roles and responsibilities related to designing and implementing any organizational initiative. In the context of Sevottam compliance, institutional arrangements are the organizational structures needed to ensure that the compliance requirements are properly designed, deployed and monitored to suit the specific context of the Ministry/ Department. Ministries/Departments need to create new arrangements for the activities and tasks that are not being done at present, in alignment with the arrangements that exist for the tasks that are already underway.

The following sections explain the institutional arrangements at the Ministry/Department level required for the present purpose.

1. Steering Group at the Apex level

Steering Group is responsible for ensuring that appropriate policies and processes have been laid down in respect of design and implementation of Citizen's / Client's Charter and Grievance Redress Mechanism (GRM), and building capability for service delivery. This includes setting time frames for review and revision of the Charter and GRM so that the same is periodically updated in line with emerging requirements. It also includes assessing current capabilities and taking steps to enhance them for meeting and improving service standards.

Chairperson: Secretary heading the Ministry/Department

Members: Senior most functionaries responsible for policy and design of service delivery processes for all services delivered by the Ministry/Department, its Responsibility Centers and its Subordinate Offices.

















Member Secretary: A Joint Secretary level officer should be made the Nodal Officer, responsible for Sevottam compliance. The Member Secretary may also be designated as Sevottam Champion at the apex level.

<u>Member Secretary is responsible for</u> preparing the agenda and convening meetings of the Steering Group in order to get the required policy decisions taken for setting and achieving service standards by the Ministry/Department, it's Responsibility Centers, and it's Subordinate Offices.

2. Working Group/Task Force at the Apex level

Chairperson: Member Secretary of the Steering Group

Members: Divisional heads responsible for ensuring that service standards as laid down in the Charter are actually being implemented in the Ministry/Department, its Responsibility Centers, and its Subordinate Offices.

Member Secretary: Senior functionary to be appointed by the Chairperson for coordinating and communicating with various functionaries and/or committees responsible for delivery of services as per standards laid down in the Charter.

Member Secretary is responsible for preparing the agenda and convening meetings of the Working Group in order to disseminate the decisions taken by the Steering Group and to deliberate on implementation modalities.

3. Implementation Committees at the Ministry/Department level

There will be multiple implementation committees in each Ministry/Department depending upon the number of separate Divisions, Responsibility Centers, and Subordinate Offices under the Ministry/Department.

Chairperson: Departmental/Divisional, Responsibility Centre, or Subordinate Office, Head responsible for each service/group of services.

Members: Departmental/Divisional Head direct reportees responsible for ensuring implementation of service delivery processes for all services delivered by the Department/Division

















Special Invitee: Member Secretary of the apex level Working Group/Task Force will be a special invitee to all the Implementation Committees.

Special Invitee will be responsible for ensuring that the decisions taken by the Steering Group and the Working Group/Task Force at the apex level are communicated to the Implementation Committee for taking appropriate action at their level.

Member Secretary: Nodal Officer responsible for Citizen's / Client's Charter and Grievance Redress Mechanism at the Departmental/ Divisional, Responsibility Centre, or Subordinate Office level. The Member Secretary may also be designated as Sevottam Champion at the Departmental/ Divisional, Responsibility Centre, or Subordinate Office level as applicable.

<u>Member Secretary is responsible for</u> preparing the agenda and convening meetings of the Implementation Committee in order to disseminate the decisions taken by the Working Group and to deliberate on implementation modalities at the next level.

8.2 Implementation Committees at next level

Next level Implementation Committees may be formed at Responsibility Centres / Field offices depending on the need and the structure of the organization.

Appendix XIII shows a real life example of institutional arrangements at CBDT which has implemented Sevottam through the Aaykar Seva Kendras.



















ENSURING SEVOTTAM COMPLIANCE

9. 1 Ensuring Sevottam

Compliance

The Sevottam framework has been developed with the overarching objective of improving the quality of public service delivery in the country. The framework has three components: Citizen's Charter, Grievance Redress Mechanism and Service Delivery Capability.

The first component of the framework requires effective charter implementation thereby opening up a channel for receiving citizen's inputs into the way in which organizations determine service delivery requirements. Citizen's Charters publicly declare the information on citizens' entitlements; making citizens better informed and hence empowering them to demand better services.

The second component of the framework, 'Public Grievance Redress' requires a good grievance redress system operating in a manner that leaves the citizen more satisfied with how the organization responds to complaints/grievances, irrespective of the final decision.

The third component 'Service Delivery Capability', postulates that an organization can have an excellent performance in service delivery only if it is managing the key ingredients for good service delivery well, and building its own capacity to continuously improve delivery.

9.2 Compliance Assessment

This part of the assessment acts as a screening mechanism to filter out organizations that do not meet the basic requirements to even enter the assessment process. Currently it consists of 5 criteria that ascertain whether the organization has started applying some tools that can improve service delivery and is therefore likely to benefit from the assessment process. The criteria are articulated in the form of

















questions that offer binary choices ("Yes/No"). We go to the next level of assessment only after all questions in the first level have been answered in the affirmative:

Table 1: First level of Sevottam Compliance

		YES	NO
i.	Has the department published an approved Citizen's Charter?		
ii.	Has the department circulated the Charter among service delivery units?		
iii.	Has the department appointed a senior officer as Director of Public Grievances / Nodal officer for Citizens' Charter for the Department?		
iv.	Has the department set up a task force for formulation, implementation and review of Citizen's Charter as per standards & for conducting self-assessment with involvement of representative citizen groups?		
v.	Has the department published grievance lodging and redress procedure, and timelines for redress?		

9.3 Process Quality Assessment

This part of the assessment acts as a rating mechanism to assess the quality of tool application and its utilization for improved service delivery. It consists of 11 criteria for each of the modules, viz. Citizen's Charter, Public Grievance Redress Mechanism and Service Delivery Capability, thereby comprising 33 criteria in all. These criteria ascertain the extent to which the organization is applying service delivery improvement tools in a systematic manner and is able to learn from experience. The criteria are articulated in the form of questions that can invite rating on a five-point scale ranging from "ad hoc" to "systematic" action. The rating given in response to each question needs to be backed up by evidence attached with the application. Each Ministry/ Department should carry out a self assessment on the 33 criteria under the Sevottam Framework. An organization that scores well on these criteria deserves commendation for having understood the utility of service improvement tools and for putting this understanding to good use.

The following 33 questions listed in Table 2 on the next page need to be cleared adequately in the second level of Sevottam compliance.

















9.4 Submission of Charter and GRM for Assessment

The Ministry/Department's Charter and GRM can be submitted in the following manner:

- a Electronic copy to the following email: sevottam@nic.in
- b. Printed version delivered to DARPG at:

Department of Administrative Reforms & Public Grievances Sardar Patel Bhawan (5th Floor) Sansad Marg, New Delhi 110001

All queries relating to guidelines on Sevottam Compliance and Sevottam Implementation can be sent to sevottam@nic.in. Any query about the CPGRAMS can be sent by email to cpgrams-darpg@nic.in.

Table 2: Second Level of Sevottam Compliance

No.	Module/Criteria/Element	Systematic				Ad·hoc
		5	4	3	2	1
1	Citizens' Charter					
1.1	Charter Implementation					
1.1.1	How do you determine and/or distinguish the citizen groups as also your stakeholders and what services do you offer to them?					
1.1.2	How do you meet the service expectations of your citizen groups?					
1.1.3	How do you ensure that services and their standards as described in the charter are in accordance with expectations of citizen groups identified above?					
1.1.4	How do you ensure that preparation and/or review of the charter is participatory and inclusive of all your citizen groups?					
1.1.5	How do you ensure that frontline staff and citizen groups are aware of the charter and can understand its contents easily for compliance?					
1.2	Charter Monitoring					

















No.	Module/Criteria/Element	Systematic				Ad-hoc
		5	4	3	2	1
1.2.1	How do you measure and track service delivery performance of different outlets against charter contents?					
1.2.2	How do you communicate the gaps in service delivery to officer/team responsible for charter monitoring and to the outlets concerned?					
1.2.3	How do you fill the observed and/or reported gaps?					
1.3	Charter Review					
1.3.1	How do you find out whether your charter is serving its purpose and take measures to enhance its effectiveness?					
1.3.2	How do you incorporate legislative changes (e.g. introduction of Right to Information Act, etc.) and other relevant provisions/ developments in your charter revision process?					
1.3.3	How do you ensure that frontline staff and the citizens are aware of the basis for making changes as above?					
2	Grievance Redress Mechanism					
2.1	Grievance Receipt					
2.1.1	How do you prepare and implement guidelines for spreading awareness on public grievance process and ensure that citizens get the information they need?					
2.1.2	How do you prepare and implement guidelines for recording and classifying grievances?					
2.1.3	How do you prepare and implement guidelines for multiple channels of grievance redress such as toll-free telephone lines, web site, etc.?					
2.2	Grievance Redress					
2.2.1	How do you determine time norms for acknowledgement, and redress of grievances/ complaints received?					
2.2.2	How do you ensure that the time norms as above are adhered to?					
2.2.3	How do you continuously improve the system and use forums like Jan Sunwai, Lok Adalats and other single window disposal systems to expedite grievance redress?					
2.3	Grievance Prevention					

GUIDELINES FOR IMPLEMENTING SEVOTTAM

















No.	Module/Criteria/Element	Systematic				Ad-hoc
		5	4	3	2	1
2.3.1	How do you use grievance analysis while preparing annual action plans and strategy of the organization?					
2.3.2	How do you find out grievance prone areas and communicate them to the officer/team responsible for service delivery improvement and to the Public Grievance Redress Officer?					
2.3.3	How do you link grievance analysis to charter review and to other guidelines so that complaint prone areas are improved upon?					
2.3.4	How do you measure and track the progress on improvements required to reduce complaint prone areas?					
2.3.5	How do you ensure that frontline staff and the citizens are aware of improvements made in grievance redress mechanism?					
3	Service Delivery Capability					
3.1	Citizen Focus					
3.1.1	How do you improve the processes that significantly affect service delivery for the citizen?					
3.1.2	How do you measure and track citizen satisfaction across the organization and for particular service delivery outlets?					
3.1.3	How do you link citizen satisfaction results to improvements and revisions in the charter and other processes affecting service delivery					
3.1.4	How do you communicate guidelines to create a citizen focused organization to your service delivery outlets?					
3.1.5	How do you differentiate between service delivery outlets that are performing well and those that are lagging behind in citizen focus					
2.2	metrics					
3.2	Employee Motivation					
3.2.1	How do you deliver and encourage training on courteous, punctual, and prompt service delivery for your front line staff					
3.2.2	How do you empower front line staff to take decisions for better service?					
3.2.3	How do you create a performance culture among your staff and front line service delivery teams?					



















No.	Module/Criteria/Element	Systematic				Ad-hoc
		5	4	3	2	1
3.3	Infrastructure Management					
3.3.1	How do you design and communicate to your service delivery units' minimum standards at point of service delivery such as signage, waiting benches, drinking water and other needs relevant to your services?					
3.3.2	How do you plan and periodically monitor the resource needs for the organization taking into account service delivery pressure, current budgets, and current channels of service delivery?					
3.3.3	How do you design policies that encourage outlets to seek innovative use of their resources?					



















APPENDICES

Appendix I:

Listing and classification of services - Example of Kendriya Vidyalaya Sangathan

	List of Services
Type of Service	Service
	Scrutiny of registration forms received for admission by the Admission Committee
Admissions	Issue notification for admissions for the next academic year
	Issue of prospectus with registration forms to the parents desirous of admission of their wards.
Examination	Conduct Half yearly Examination based on the coverage of syllabus up to 31st October of the academic year
	Conduct Annual Examination based on the whole syllabus
	Conduct the 1 Pre Board Tests for classes X and XII

GUIDELINES FOR IMPLEMENTING SEVOTTAM

















Appendix II:

Indicators for service standards – Example of Central Board of Excise and Customs

RC	Service Name	Indicator
	Issue of acknowledgment receipt	Turn Around Time
Customs (Imports and General)	Clearance of Bill of Entry	Turn Around Time
	Grant CHA licences	Turn Around Time
	Issue G & H cards	Turn Around Time
	Registration of Bill of Entry	Turn Around Time
	Issue of acknowledgements for all correspondence received from a retired employee	Turn Around Time
	Provide final decision on pension claim for all retired employees	Turn Around Time
DGICCE Office	Issue of acknowledgement receipt for every public grievance	Turn Around Time
	Resolution of a public grievance	Turn Around Time
	Issue of Acknowledgements in all written communication including declarations, intimations, applications and returns like ER-I,ER-II, ER-III	Turn Around Time
Central Excise	Issue of Acknowledgements fo Registration, Refunds/Rebates, CT-1 applications, Undertakings/ Bonds/ SSI declarations	Turn Around Time
	Disposal of Rebates claims	Turn Around Time
	Disposal of Refunds claims	Turn Around Time
	Issue of deficiency memo in case any deficiency is noticed in the refund /rebate claim to the party	Turn Around Time
	Issue of Acknowledgements for Centralized Registration	Turn Around Time
Service Tax	Issue of deficiency memo in case any deficiency is noticed in the Registration form, to the party	Turn Around Time
	Provide Centralized Registration	Turn Around Time















Appendix III:

Estimation of current standards - Example of Central Board of Excise and Customs

RC	Service Name	Standard
Customs (Imports and General	Issue of acknowledgement receipt	7 days
	Clearance of Bill of Entry	48 Hours/2 days
	Grant CHA licences	1 month/ 30 days
	Issue G& H cards	1 month/ 30 days
	Registration of Bill of Entry	1 hour
	Issue of acknowledgements for all correspondence received from a retired employee	7 days
DGICCE Office	Provide final decision on pension claim for all retired employees	90 days
	Issue of acknowledgement receipt for every public grievance	48 hours
	Resolution of a public grievance	30 days
	Issue of Acknowledgements in all written communication including declarations, intimations, applications and returns like ER-I,ER-II, ER-III	24 hours
Central Excise	Issue of Acknowledgements for Registration, Refunds/Rebates CT-1 applications, Undertakings /Bonds/ SSI declarations	7 days
	Disposal of Rebates claims	3 months
	Disposal of Refunds claims	3 months
	Issue of deficiency memo in case any deficiency is noticed in the refund/rebate claim to the party	15 days/ 30 days
	Issue of Acknowledgements for Centralized Registration	7 Working days
Service Tax	Issue of deficiency memo in case any deficiency is noticed in the Registration form, to the party	7 Working days
	Provide Centralized Registration	15 Working days

















Appendix IV:

Formal documentation of service standards - Example of Central Board of Direct Taxes

Service Name	Standard
Allotment of PAN	Within 15 days of receipt of PAN application
Disposal of application for approval to a fund under Section 10(23AAA) of the IT Act	Within 3 months from the end of the month of its receipt
Disposal of application for approval to Hospitals in respect of medical treatment of prescribed diseases	Within 90 days of its receipt
Disposal of application for grant of approval to Institution under Section 80G 5(Vi) of the IT Act	Within 6 months from date on which application was made
Disposal of Application for grant of exemption or continuance thereof to institutions (Hospitals, School, University etc.) under Section 10 (23C) of IT Act	Within one Year
Disposal of Application for no deduction of tax or deduction of tax at lower rate	As early as possible but not later than 30 days of its receipt
Disposal of application for recognition/approval to Provident fund/Superannuation /gratuity fund	Within 3 months from the end of month of its receipt
Disposal of application for registration of Charitable or religious trust on institutions	Within 4 months from the end of month of its receipt
Disposal of Application for transfer of case	within 60 days of the receipt of application
Disposal of Application seeking extension of time for payment of tax or grant of instalments	Within 1 month from end of the month in which the application is received
Disposal of rectification application	Within 2 months from end of the month in which the application is received
Issue of refund including interest, if any arising from proceedings other than Section 143(1)	Within 30 days of its determination
Issue of tax clearance certificate under Section 230 of IT Act	On the date of receipt of application or latest by the following working day
Issue of Tax refund along with interest, if any	within 9 months from the end of the months in which the return complete in all respect is received
Redress/disposal of complaints/grievance	Within 2 months from the end of the month of its receipt

















Appendix V:

List of Responsibility Centers – Example of Ministry of Labour & Employment ATTACHED / SUBORDINATE OFFICES AND AUTONOMOUS BODIES

<u>Directorate General of Employment & Training (DGE&T)</u>: (http://dget.gov.in)

- Laying down the policies, standards, norms and guidelines in the area of vocational training throughout the country.
- Co-ordinating employment services.

Office of the Chief Labour Commissioner (Central): (http://labour.gov.in/clc)

- Prevention, investigation and settlement of industrial disputes in the Central sphere.
- Enforcement of awards and settlements.
- Implementation of labour laws in industries and establishments in respect of which, Central Government is the appropriate Government.
- Verification of membership of Unions affiliated to the Central Organizations of Workers for giving them representation on national and international conferences and committees.
- Enforcement of the provisions of the Minimum Wages Act in the Central Sphere establishments.
- Authorized to adjust Variable Dearness Allowance (VDA) every six months effective from 1st April and 1st October every year on the basis of 6 monthly averages Consumer Price Index for the preceding six months ending 31st December and 30th June respectively.

<u>Directorate General of Factory Advice Service and Labour Institutes (DGFASLI):</u> (http://dgfasli.nic.in)

- Safety, health and welfare in factories and docks.
- Coordinating implementation of the Factories Act, 1948 by the State Governments and formulation of model rules.

















- Administration of the Dock Workers (Safety, Health and Welfare) Act, 1986
- Undertaking research in industrial safety, occupational health, industrial hygiene, industrial psychology and industrial physiology.
- Providing training, mainly in the field of industrial safety and health, including a
 diploma course of one year duration in industrial safety which is an essential
 qualification for appointment of safety officers in factories, 3 months certificate
 course in industrial health (AFIH) for Doctors for their appointment as factory
 medical officers.
- Regular in-service training of factory inspectors.
- Implementing the Vishwakarma Rashtriya Puraskar (VRP) and National Safety Awards (NSA) Schemes.

Directorate General, Labour Bureau: (http://labourbureau.nic.in)

- Collection, compilation, analysis and publication of statistical data on labour related subjects like employment, wages, earnings, industrial relations, working conditions etc.
- Compilation and dissemination of the Consumer Price Index Numbers for Industrial and Agricultural/Rural Workers.
- Rendering necessary assistance to the State Governments in conducting training programmes in Labour Statistics at State/District/Unit levels.
- Updating the base of Consumer Price Index Numbers for:
 - i. Industrial Workers from base 2001=100 to 2010=100
 - ii. Agricultural/Rural Labourers from 1986-87=100 to 2004-05=100
- Updating the base of Wage Rate Index Numbers from 1963-65=100 to 2006-07=100.
- Improvement of Labour Statistics, Human Resource Development and Creation of Management Information System.

















Directorate General of Mines Safety (http://www.dgms.in)

- Enforcement of the provisions of the Mines Act, 1952 and Regulations framed there under {Coal Mines Regulations, 1957, Metalliferous Mines Regulations, 1961, Oil Mines Regulations, 1984, Mines Rules, 1955, Mines Vocational Training Rules, 1966, Mines Rescue Rules, 1985., Mines Crèche Rules, 1966, Coal Mines Pit Head Bath Rules, 1959}
- Enforcement of the provisions of the Electricity Act, 2003 and Indian Electricity Rules, 1956 and Allied Legislations {Factories Act, 1948 : Chapter III & IV, Manufacture, Storage & Import of Hazardous Chemicals Rules, 1989 – under Environmental Protection Act, 1986, Land Acquisition (Mines) Act, 1985, The Coal Mines (Conservation & Development) Act, 1974} as applicable to Mines and Oils fields.

Welfare Commissioners (9 offices):

Providing welfare facilities to the workers employed in the mica, limestone, dolomite, iron ore, manganese and chrome ore mines and in the beedi and cinema industries.

















Appendix VI:

Service Recipients/Citizens/Clients

Department of Posts: Service Recipients/Citizens/Clients

- 1. Walk-in Customers in Post Offices
- 2. Households receiving letters

CBDT: Service Recipients/Citizens/Clients

Tax Payers

Example from the Department of Women and Child Development, Karnaraka

The draft citizen charter was circulated to the following stakeholders for review:

- Working Group members
- State ATI, Mysore
- Selected NGOs
- Academicians
- **Health Department**
- UNICEF













Appendix VII:

Survey Plan - Example of Department of Post

	Forenoon (8am – 1pm)	Afternoon (2pm – 8pm)		
1 st Period	4 Teams (2 member each)	4 Teams		
2 days (Dates)	Day 1	Day 1		
	Team 1&2: PO 1	Team 1&2: PO 1		
	Team 3&4: PO 2	Team 3&4: PO 2		
	Day 2	Day 2		
	Team 1&2: PO 2	Team 1&2: PO 2		
	Team 3&4: PO 1	Team 3&4: PO 1		
	Frequency of Observations: Every 15 min			
2 nd Period	2Teams (2 member each)	2 Teams		
5 days (Dates)	Day 1	Day 1		
	Team 1: PO 1	Team 1: PO 1		
	Team 2: PO 2	Team 2: PO 2		
	Day 2	Day 2		
	Team 1: PO 2	Team 1: PO 2		
	Team 2: PO 1	Team 2: PO 1		
	Day 3	Day 3		
	Team 1: PO 1	Team 1: PO 1		
	Team 2: PO 2	Team 2: PO 2		
	Day 4	Day 4		
	Team 1: PO 2	Team 1: PO 2		
	Team 2: PO 1	Team 2: PO 1		
	Day 5	Day 5		
	Team 1: PO 1/PO 2 as per need	Team 1: PO 1/PO 2 as per need		
	Team 2: PO 1/PO 2 as per need	Team 2: PO 1/PO 2 as per need		
	Frequency of Observations: Every 15 min			

















Appendix VIII:

Tool to capture citizen/client expectations - Example from Department of Woman & Child Development, Government of Karnataka.

Survey of Citizens / Beneficiaries on Sector Standards in ICDS This survey is being conducted as part of the pilot project to implement "Sevottam" to improve the quality of service delivery at the Anganwadi centres. It is being done by representatives of PwC on behalf of the Department of Woman and Child Development, Government of Karnataka. Supplementary Nutrition Programme Which of the following beneficiaries must be given food at the anganwadi centre and how? Cooked & served at AWC Given as Take home ration Children (0-3 years) Children attending pre-school Pregnant women Lactating Mothers Adolescent girls (under KSY) AWW and AWH Others (Pls specify) How many number of days a week should food be provided at the anganwadi centre for children attending preschool? 1. All days including Sunday / 2. Weekdays only

- At the Anganwadi centre, how many times a day should food be provided for children attending pre-school and
- at what time?

 Once a day
 Time:
 Twice a day
 Time:
 Time:
- 4. For food being cooked & served at the AWC, which of the following items do you want? (Pls tick)

Food Item	Morning	Afternoon
Cooked food with curry (Rice and Sambar cooked with vegetables)		
Cooked food dish (Chitranna, Bisi Bele Bath, Khichdi etc)		
Amylase Rich Energy Food (AREF)		
Fortified Ready-to-cook food		
Cooked locally available food (Jowar, Ragi, Groundnut, Rice flour, Puffed Rice, Green Gram/ Bengal Gram Dal, Jaggery, etc.)		
Non-cooked foods (Fruits, milk, nuts etc)		
Energy rich snacks (milk peda, groundnut chiki)		
Others (please specify)		

- 5. How many times in a month should take-home ration be distributed at the Anganwadi Centre?
- 1. Once a week/ 2. Once every fortnight/ 3. Once a Month/ 4. Once in three months
- Which of the following foods do you want as take home ration? (Please specify quantity in kgs/ month in the boxes)

LICK	Food Item	0 - 3 years	PLM
	Amylase Rich Energy Food (AREF)		
	Fortified Ready-to-cook food		
	Non-cooked foods (Fruits, milk, nuts etc)		
	Energy rich snacks (milk peda, groundnut chiki)		
	Infant food Mix from Ragi Malt/ local food for 6m-3y children		
	Uncooked Rice / Wheat		
	Uncooked local food grains (Jowar, Ragi etc.)		
	Uncooked Dal		
	Others (please specify)		















	Supplement	Only children having severe malnutrition (Grade III and IV)	All children attached to anganwadi centre	All Pregnant women attached to anganwad centre				
Iron-	Folic Acid Tablets/ Syrup							
	De-worming tablets							
	/itamin A Supplement							
	ible fortified/ lodised Salt							
	Any other (PIs specify) you have any suggestion rega	dia - OND						
. 50	you have any suggestion regar	unig ord dervices?						
	nization – Administered to pare DPT I, II and III, Measles, Vita		PLM only					
1.	What should be the frequence (1. Daily/ 2. Twice a week/ 3	. Weekly/ 4. Fortnightly/ 5	Monthly/ 6. Others)					
2	(1. Anganwadi centre/ 2. Su.	b-centre/ 3. PHC/ 4. Taluk	or District hospital / 5. Oth	ers)				
3.	During what time of the day (1. Early Morning (8-10) / 2. 5. Evening (4-6) / 6. All Day	Morning (10-12) / 3. Mid-		ing (2-4) /				
4,	Who should be present durin (1. ANM/ 2. ASHA worker/							
5.	Do you have any suggestion	regarding Immunization s	services?					
	Check-up							
	(1. Weekly/ 2. Fortnightly/ 3.	What should be the frequency of health check-ups? (1. Weekly/ 2. Fortnightly/ 3. Monthly/4. Quarterly/ 5. Half yearly/ 6, Others)						
2.	Where should health check- (1. AWC/ 2. Sub-centre/ 3. F	PHC/ 4. Taluk or District he	profit Supplementary and the supplementary a					
3.	(1. Early Morning (8-10) / 2. 5. Evening (4-6) / 6. All Day	Morning (10-12) / 3. Mid- (10-4))		ing (2-4) /				
4.	Who should conduct the reg (1. ANM /2. LHV/ 3. Medical	Officer/ 4. Other)						
5.	Who should receive the hea (1. Malnourished or sick of Pregnant women/ 4. Lactatii	children/2. Mentally and		ildren/ 3.				
6	Do you have any suggestion	regarding Health Check-	up services?					
202000000000000000000000000000000000000	n Referral			n i , a m1				
1.	Should health referral service	e be provided at Anganwa	idi centre? (Y/N)					
2.	Should there be a fixed day (1. PHC / 2. Taluk or district		s from AWC at					
3,	Who should receive the hea (1. Malnourished or sick of Pregnant women/ 4. Lactatir	Ith referrals? children/ 2.Mentally and		ildren/ 3.				
4.	Company of the Compan							
Nutrit	ion and Health Education		H = H = 1 - E Lessificati	HELDER SELECT				
1.				rtment?				
2.	What should be the frequent		sions held by AWW?					

















3.	Where should NHE/ Mothers Meeting sessions be conducted? (1. Anganwadi Centre/ 2. Sub-centre /3. Any Other Location)	
4.	At what time of the day should NHE & Mother Meeting sessions be conducted? (1. Early Morning (8-10) / 2. Morning (10-12) / 3. Mid-day (12-2) / 4. Early Evening (2-4) / 5. Evening (4-6) / 6. All Day (10-4))	
5.	Who all should conduct Nutrition and Health Education sessions? (1. ANM/ 2, ASHA worker/ 3, Medical Officer / 4, AWW/ 5, Supervisor/ 6, LHV)	
6.	Do you have any suggestion regarding NHE services?	

Pre-School Education - Administered to parents of 3-6 yr children only

- 1. What should be the age group for children to attend PSE at AWC?
- 2. What should be the timing of the PSE classes conducted at the AWC?
- 3. What are your requirements for each child attending PSE?

	Yes (unprompted)	Yes (From list)	No
Report Card depicting child's progress			
Transfer Certificate (TC) for admission into primary school			
Uniform			
Footwear			
Books for children			
Children to be taught 3Rs (Read, Write and Maths)			
Slate and chalk pieces			
Playground at AWC			
Mats for children to sit on			
Benches for children to sit on			
Blackboard for children at AWC			
Toys			
Others (please specify)			

- 4. Which topics do you want to be taught as part of PSE?
- 5. Do you have any suggestion regarding PSE services?

1. Which of the following facilities should be available at all the AWCs? (Please tick as appropriate)

	Yes (unprompted)	Yes (From list)	No
Own Anganwadi Building			
Electricity			
Drinking water			
Functional toilets			
LPG cylinder and stove			
Water filter			
Utensils to cook and serve food			
Others (please specify)			
Address at the second and control of the Atlanta Atlanta	(C to		

2. What other services would you like the AWC to provide?

















Appendix IX:

	Tool to capture employees' inputs on service standards - Example of Department of Posts					
Dea	r staff member					
Plea wor	questionnaire has been designed to understand your perception of your job. ase tell us about the strengths and weaknesses of your work place and king environment. Your suggestions will be kept strictly confidential and will be d for service improvement only.					
The you	re are 2 parts to this questionnaire. Please answer all the questions relevant to .					
Tha	nk you for your co-operation					
	-sd- Sub post master/Postmaster SO/HO					
Nam	ne (Optional):-					
(1)	How do you rate the services provided to the customers by your post office?					
	Very good					
	Good					
	Satisfactory					
	Not satisfactory					
(2)	How can we better satisfy our customers?					
	By providing quick services					
	By courteous behavior					
	By efficient mail delivery]					
	Any other (please specify)					
(3)	Are you aware of the specialized value added services being offered by the post					

office? (List may be modified to suit the needs of the PO)

















Sa	Sale / processing of passport applications					☐ No		
Int	ernati	national money transfer					Yes	□No
Po	stal ID	al ID card					Yes	☐ No
SB	B cash delivery at doorstep through postmen					Yes	□No	
Sa	Sale of packaging materials						Yes	□No
E-p	E-payment of bills							☐ No
(4	(4) Which branch of this office needs immediate improvement?							
А	ns							
(5	5) V	/hat shc	ould be do	one to imp	orove above	referred	l branc	h?
А	ns —							
(6	6) What are your suggestions to improve quality of services towards the					es towards the		
		customers?						
А	ns —							
Questi	ons fo	r delive	ery staff					
Has the	public	approa	iched you	for purch	nase of stam	ips?		
		Yes	□ N	0 🗌	I am not a	ware of t	he sch	eme
(1	l) H	as the p	ublic app	roached y	ou for post	ing their	mail?	
		Yes	□ N	0 🗌	I am not a	ware of t	he sch	eme
(2	2) H	as the p	ublic app	roached y	ou for rece	iving SB	cash at	their door step?
		Yes	□ N	0 🗌	I am not a	ware of t	he sch	eme.
(3	3) V	/hat are	the prob	lems you	face while o	deliverin	g mail?	
		Incorr	ect addre	sses/miss	sent letters.			
		Non a	vailability	of forms	and station	ery.		
		Dealir	ng with th	e public.				
	Others (specify)							



(4)	Any other suggestions to improve delivery services:

THANK YOU

















Appendix X:

Tool to capture external inputs on service standards - - Example from Department of Woman & Child Development, Government of Karnataka.

Component	Sectoral Standards/ Targets	Performance Monitoring Indicators
Supplementary Nutrition Programme		
Kishori Shakti Yojana		
Non-formal Pre-school Education		
Health related services – Immunization		
Health related services – Health Check Ups		
Health related services – Referral Services		
Health related services – Nutrition Health Education		
Support services – Finance		
Support services – Human Resource Management		
Support services – Infrastructure		

















Appendix XI:

Information to be collected on receipt of grievance - Example from Central Board of Excise and Customs

Criteria for Classification

#	Criteria	Categories
		Clearance of Bill of Entry
1.	Charter related	Grant of CHA License
		Decision on Pension Claims

Time norms for redress

#	Grievance Category	Time Norm for Redress
1	Clearance of Bill of Entry	1 working day
2	Grant of CHA License	15 working days
3	Decision on Pension Claims	30 working days

#	Type of Complaint	Time line for redress at Level 1	Time line for Level 2	Time line for Level 3	Time line for Level 4
1	Clearance of	1 working	On 2 nd	On 3 rd	On 4 th
	Bill of Entry	day	working day	Working day	working day
2	Grant of	15 working	On 15 th	On 20 th	On 30 th
	CHA License	days	working day	working day	working day
3	Decision on Pension Claims	30 working days	At the end of 1 months	At the end of 1 month +1 week	At the end of 2 months

















Appendix XII:

Identification of grievance-prone areas and remedial action - Example of Employees Provident Fund Organization.

Example: Employees Provident Fund Organization:

#	Date and description of Complaint	Date of analysis and Root cause identified	Most frequent root cause	Action required to improve system	Planned date and Authority responsible for taking action	Action taken date
	15/03/10	31/03/10			15/04/10	
1	Claim not settled	Complainant not aware of time norms	Incomplete claim form	Sample of complete claim form	Regional	Actual
2	Claim not settled	Incomplete claim form		to be displayed at service	Provident Fund Commissioner	date when action is taken
3	Claim not settled	Incomplete claim form		delivery offices		33.1011

















Appendix XIII:

Example of institutional arrangements Central Board of Direct Taxes



















Appendix XIV:

Baseline Study

	(Pl. tick mark in column applicable)			
Item Name	Fulfilled	Partially Fulfilled	Not fulfilled	
There is clear DOCUMENTATION showing:				
What are the main services it offers	✓			
What are the minimum standards prescribed for these services			√	
What are the benchmark/best practice standards for these services			✓	
What are the maximum waiting times expected for counter services		√		
Who are the recipients of these services	✓			
What are the expectations of these service recipients while availing services	√			
What should citizens do in order to avail better, faster services		✓		
What should citizens do to register complaints/grievances		√		
What are the different types of complaints/grievances that it receives			✓	
What are the time norms for acknowledgement, intermediate progress if required, and final closure for each complaint type	√			
What are the minimum infrastructure requirements to deliver services as per prescribed standards		√		
What are the minimum requirements for awareness/training of staff coming in contact with citizens			√	











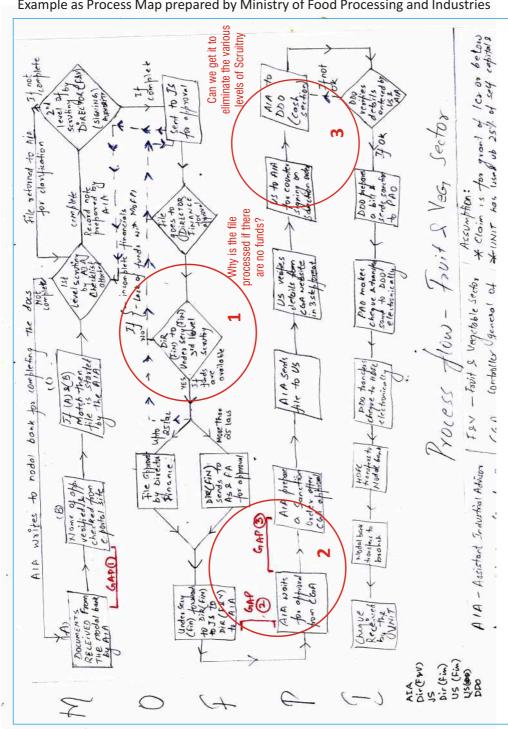






Appendix XV:

Example as Process Map prepared by Ministry of Food Processing and Industries



















Appendix XVI:

Gap Analysis for identifying improvement opportunities

	Criteria for Gap Analysis				
Issues related to Service Standards	Not Prepared	Prepared but process not documen- ted	Process documented but not disseminated	Process documented & freely available to all users	Process understood & implemented by all users
What are the main services it offers					
What are the minimum standards prescribed for these services					
What are the maximum waiting times expected for counter services					
Who are the recipients of these services					
What are the expectations of these service recipients while availing services					
What should citizens do in order to avail better, faster services					
What should citizens do to register complaints/grievances					
What are the different types of complaints/ grievances that it receives					

GUIDELINES FOR IMPLEMENTING SEVOTTAM







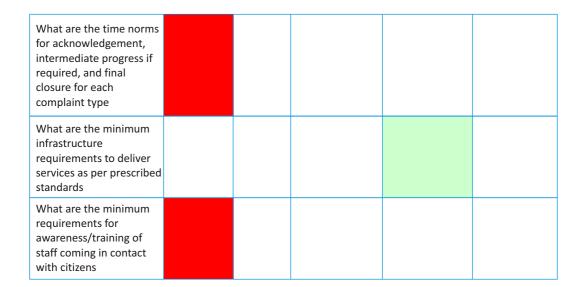












Not Prepared
Prepared but process not documented
Process documented but not disseminated
Process documented & freely available to all users
Process understood & implemented by all users

















Appendix XVII:

Information Needs Assessment (INA) for Effective Communication

Questionnaire for Customers Survey on Information Needs

This part of the questionnaire is intended to help Income Tax Deptt. find out areas for improvement in providing proactive information to citizens and not to test knowledge.

1.	What is the last date for filing the	returns?	
	31st July	31st October	31st March
2.	Which is the form for filling up of	the taxes?	
	Challan Form	Tax	Form Deposit Form
3.	Where do you get Return forms?		
	Internet	Intermediaries	Any other source
			(please mention)
4.	Where do you get Challan Forms?	,	
	Internet	Intermediaries	Any other source
			(please mention)
5.	Please rate ease of obtaining Retu	ırn/Challan Forms:	
	Excellent	Reasonable	Poor
6.	You can pay your taxes through th	e following ways:	
	Cash	Cheque	Debit/Credit Card
			Through Internet

















7.	You can pay your taxes through cash or cheque at the following locations:				
	Banks	Post Offices	Income Tax Offices		
8.	Who is liable to file Income Tax	Returns?			
	Everyone	All salaried class	All tax payers		
9.	Which of the following criterion	n makes it compulsory for a	n individual to file Income Tax		
	returns? (Tick all that are applied	cable)			
	Having a car	Having a house	Foreign Travel		
10.	State True or False: "A PAN No	. is necessary for filling retu	rns"		
	True	False			
11.	What happens if one mentions	a wrong PAN No. on Challa	n?		
	Money is untraceable	Penalty is imposed	Correction can be		
	,		Made later		
Nan	ne:				
Add	lress:				
,					
Mo	bile:				

















Appendix XVIII:

Stakeholder Feedback on Citizen's Charter for Department of Industrial Policy and Planning (DIPP) 2010-2011

Sl. No.	Additional Services needed in Charter (Carried forward from earlier communication)	Suggested Norm
1.	Response to clarification requests/applications from public	2 weeks from the date of receipt of request
2.	Clarification requests on FDI policy	O Redirection to other organizations (100% final responses provided by DIPP)
3.	DIPP Chat Service	DIPP's website mentions that the services would be available two times in a day. However, there are days when such services are not available. This may please be included in the Charter so that DIPP monitors availability, and non-availability gets detected/recorded
3.	Dak Receipt Services	

Additional Comments

- Service at Serial No. 19 viz. Furnishing of comments on FIPB cases Section Diary/Dispatch register forwarded by DEA (FIPB Division) needs correction. In the first part there seems to be a typographical error (0 days). In the third part, time norm for giving comments is "within 20 working days from receipt of complete application" which is too high in our view.
- 2. Time norms for various services prevalent in other countries (e.g. Canada and Singapore) should be studied and if found better, their introduction in our country may be considered.
- 3. A review of the actual time taken during the last year for various services against the service standards mentioned in the 2010-11 Citizen Charter must be included in the 2011-12 Charter.

N O T E S

N O T E S

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