Putting people first in digital government services: Lessons from the pandemic for the future

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Introduction

The global COVID-19 pandemic forced us to do a lot of things faster and in different ways than we ever thought we could. Before COVID-19, online government services were a convenience, but there was almost always an in-person option to meet constituent needs.

Suddenly, essential government services needed to be delivered online and the scope of in-demand services expanded significantly: from health services for ourselves and our families, to education for our children, and employment services for the many people with jobs under threat.

Government service providers were forced to shift into overdrive. Some public agencies were well advanced in their digital transformation journeys and had the infrastructure and online service delivery programs they needed. However, many more struggled with insufficient infrastructure, application, and human capacity to handle the load, weighed down by outmoded equipment that they had intended to upgrade 'someday.'

From the constituent perspective, people with tech skills and access to up-to-date equipment found the shift to online government services daunting but manageable. But for those lacking equipment, know-how, or language skills, accessing key government services became nearly impossible.

In September 2021, the Amazon Web Services (AWS) Institute moderated a conversation entitled Putting People First in Digital Government Services: A Trans-Atlantic Conversation, featuring a group of experts in online government services – government officials from Rhode Island and Scotland – and industry experts from AWS and IBM Watson Health. These experts provided important insights about how to provide online government services that are accessible, user friendly, and built for the future. Here is what we learned.

Rhode Island scales quickly and efficiently with the cloud

Abby McQuade, the Rhode Island Department of Labor and Training (DLT) senior advisor and chief innovation officer, described how applications for unemployment insurance in Rhode Island were at an all-time low prior to COVID-19. However, by March 17, 2020, only a week after the governor of Rhode Island declared a state of emergency, applications surged to 18,000 per day. With an existing system able to process fewer than 500 concurrent connections, McQuade and the DLT team knew that a cloud-based technical solution was necessary.

Cloud services providers such as AWS provide solutions that support customers to innovate rapidly and at scale. Stuart Venzke, AWS human services and labor leader, described how his team held a Working Backwards session for Rhode Island's unemployment insurance administrators and DLT executive staff. They analyzed the situation in a technology agnostic way, not fixating on any specific solution in advance. Working backwards may seem counterintuitive during a crisis, but it inspired DLT and AWS to quickly identify a solution that addressed a major client pain point that centered on constituents' needs throughout the process. As a result, they created a real-time process that allowed claimants to see the status of their claim without having to call and talk to an agent.

AWS and DLT also worked together to apply the speed and the scalability of cloud-native services to help Rhode Islanders. Early in the pandemic, DLT realized its antiquated interactive voice response (IVR) solution, which eligible claimants used weekly to continue receiving their unemployment insurance benefit, would collapse under the volume of the continuing claims DLT expected. By deploying AWS's cloud-native IVR solution in about 10 days, DLT successfully processed 75,000 continuing claims on its first day. By harnessing the power and capabilities of AWS, DLT was able to satisfy all of its requirements for speed, capacity, and scalability.

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Jonathan Cameron,
Interim Director, Digital Health and Care Directorate
- Scottish Government

Scotland focuses on access for all

In Scotland, the challenge was less about dealing with out-of-date legacy systems, and more about launching new systems and services in the midst of a crisis. In 1999, the Scottish Government took over authority from the UK Government for Scotland’s economy, education, health, justice, rural affairs, housing, environment, equal opportunities, consumer advocacy and advice, transport, and taxation. In 2018, Scotland began using IBM’s Cúram Social Program Management (SPM) as its preferred solution for benefits delivery, deployed on the AWS Cloud.

In the midst of this transition, the global pandemic hit, challenging the limits of Scotland’s new systems and services. For Jonathan Cameron, interim director of Scotland’s Digital Health and Care Directorate (DHCD), the first hurdle was meeting the enormous demand for information about COVID-19. While responding to the flood of online inquiries, Cameron’s team was also aware that many people lacked the confidence to use the technology that was necessary to access digital services and information. As Amy Wykoff of IBM Watson Health explained on the panel, the pandemic hit governments doubly hard because “COVID was not just a health crisis, but also a social crisis.”

In Scotland, questions about which challenges to tackle first and how were guided by ethics. Cameron recalled at the panel: “We took the opportunity to lead with an ethical approach and actually said…’is this the right thing to do?’”

Although ‘digital natives’ represent a large and expanding percentage of users who are accessing Scotland’s digital services, Cameron estimates that 10-20% of persons eligible for services are unable to access the technology. Up to 40% have the means to access the technology but lack the confidence to do so. Plus, any customer-facing services must accommodate various modes of usage, e.g. smart phone, personal computer, or tablet.

The DHCD needed a solution that was highly agile and incorporated the collaborative tools and teams to make sure that the user experience was as frustration-free and useful as possible from the first customer touchpoint.

A significant impediment for ordinary users trying to access government services is that the system is often complicated or duplicative. Panelists at the Putting People First event described the tensions that can arise when systems are designed to make sense to other programmers, or to meet the priorities of compliance authorities, but leave end users with unnecessarily complex online tools.

As a designer of online health and social services, Wykoff noted the importance of building for what matters and putting families first in the design plan. Designs must be flexible enough to accommodate all kinds of families with all kinds of circumstances—from a single parent who needs to take three buses to deliver identification documents to a government office, to elderly individuals in hospital who lack technological access and ability. At a fundamental level, government digital transformation should support broad-based public participation, not drive a wedge between the technological haves and have-nots.

DLT

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Abby McQuade,
Senior Advisor and Chief Innovation Officer - Rhode Island Department of Labor & Training

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Other lessons learned:

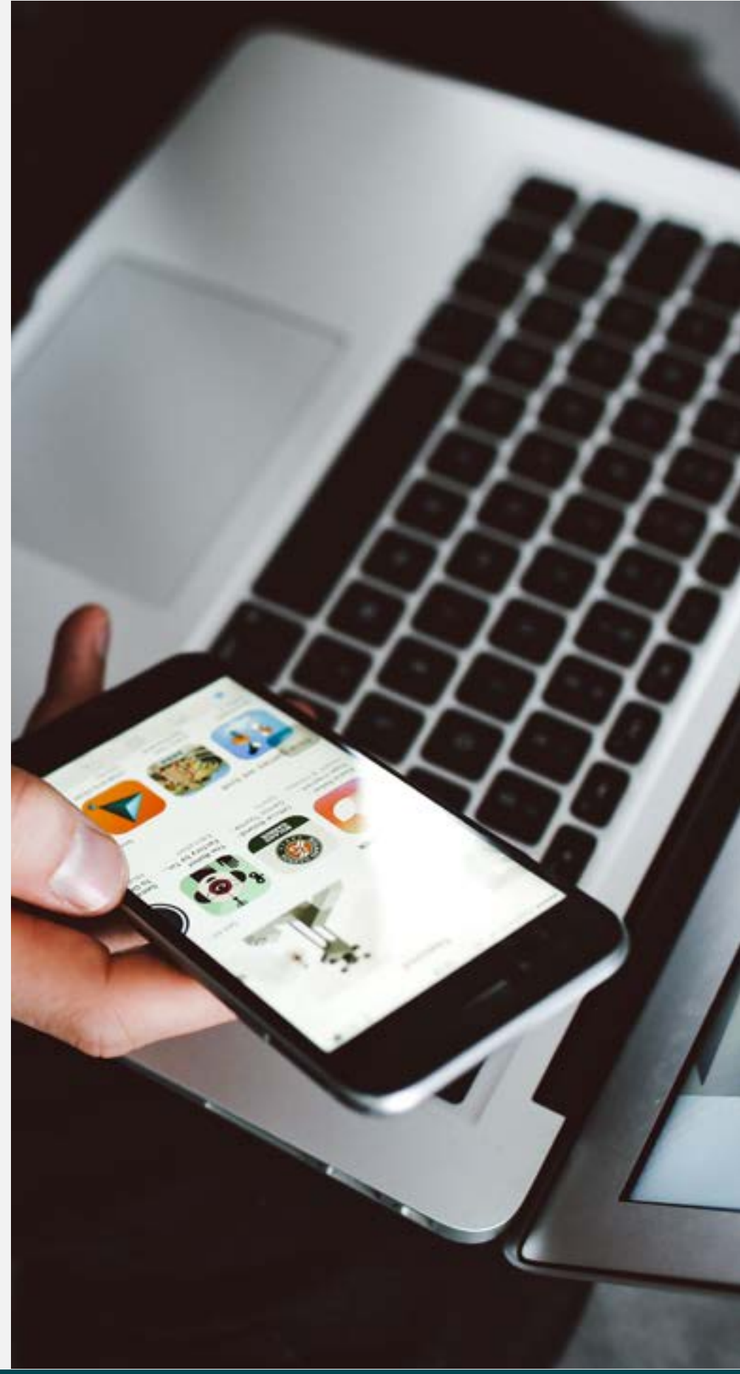
Risks of the status quo
Despite the successes of Rhode Island DLT and Scotland’s DHCD in adopting cloud-based solutions as part of their digital transformation, public sector executives may feel reluctant or unable to take the first steps. As McQuade noted, government organizations are sometimes driven by fear and entrenched mindsets that block innovative solutions. She warned that attachment to the status quo and failure to act when an old system is on the brink of failure is much riskier than innovation. McQuade advised: “Governments have to take that step towards digital transformation; otherwise they will cease to function.”

Cloud-based modernization also brings pay-as-you go pricing, which aligns costs with actual usage, so agencies have the resources they need when demand goes up, but are not stuck with expensive unused IT capacity when demand falls. This also provides the flexibility to innovate quickly: when governments are not locked into long-term commitments, they have the freedom to experiment, iterate, and innovate as needs or circumstances change.

Getting the right tools to the front lines
The challenges posed by COVID-19 opened the doors to technological solutions that satisfy the needs of citizens. Venzke noted that many governments, including Rhode Island, reached a point very early in the crisis where simply adding more staff members would not solve the problems of overload. Instead, smart agencies turned to cloud-native technologies to tackle the undifferentiated heavy lifting—the routine work that should not require the expertise of a trained agent—so agents could spend more time working with claimants. Even prior to the pandemic, front line workers in health and human services complained that they spent too much time entering data rather than on solving client problems. Digital transformation allows government employees to spend more time on service delivery and less time struggling with out-of-date technology.

Planning – don’t boil the ocean and focus on pain points
The pandemic provided a wake-up call about the need to move digital services online, but government decision makers still struggled with where to begin. Both Venzke and Wykoff agreed that governments should start with immediate pain points and not try to ‘boil the ocean’ and do everything all at once. This kind of flexibility to innovate, iterate, and scale is made simpler with cloud-based solutions, which are well suited for experimentation and continuous improvement. If something ends up not working as planned, it can be changed quickly.

As Wykoff observed, one of the many lessons of the pandemic is that a crisis is not the time to begin to overhaul business practices. Governments must be continually adjusting online service delivery to meet the new realities of what customers will want and need in the future: Will users be trending older or younger? Will they access services through a handheld mobile device, a home computer, or a wearable interface? What type of information services will they need? These visioning exercises may seem like an unnecessary demand on time, given the multiplicity of challenges facing government organizations. However, as the experiences of DLT and DHCD demonstrate, the answers to these questions could be of utmost importance when a crisis occurs.



Interoperability and inter-governmental collaboration
For Scotland's DHCD, COVID-19 was a reminder of how important it is for agencies and departments within governments to talk to each other both within and beyond national boundaries. Not only did Cameron's team seek to build frustration-free online health services, but they also incorporated highly agile, collaborative tools to link up healthcare with other government services to eliminate the need for duplicative processes by users.

Collaboration within governments is just the first step. The panel agreed that governments have an advantage over the private sector because it is easier to collaborate on common problems across jurisdictional boundaries. Governments don't compete with one another for customers, so they are able to share solutions, best practices, and design principles. By using open source and other forms of collaboration, an innovation developed by one agency can be a benefit to many. Cloud solutions provide an excellent foundation to support governments' use of open source tools to facilitate the widespread exchange of information.

Summary

Before COVID-19, governments were already constrained by limited budgets, overstretched human resources, and legacy analog systems. Those who had not already invested in digital modernization were further disadvantaged once the pandemic hit.

Both the Rhode Island DLT and the Scottish DHCD needed solutions that could be deployed rapidly and would be easily scalable to meet fluctuating capacity demands. Rhode Island sought to rapidly modernize the certification for unemployment insurance claims. The DHCD recognized that achieving a technical solution would require a mindset shift towards immediate results, cooperation, and standardization. Both government teams built their solutions around a commitment to putting their constituents' needs first.

What makes the cases of the DLT and DHCD so compelling is that their success is repeatable. Cloud-based solutions are agile, readily tailored, and quickly scalable to meet fluctuations in demand, changes in budgetary resources, or other concerns. As Wykoff pointed out, "If the will is there, the tools are there."

No one should wait for another crisis before launching a digital modernization plan.
Digital transformation is an iterative process and one that is never complete.

Get started today with the following resources or contact us directly for more information.

For further information:

AWS Health and Human Services

Digital Health and Care Directorate Scotland

IBM Watson Health

Rhode Island Department of Labor and Training

Video: Putting people first in digital government services: A trans-Atlantic conversation (World Affairs Councils of America)

Blog: How Clark County, Nevada used technology to prevent homelessness during the pandemic

Blog: How governments benefit from open source solutions to solve common challenges