

Productivity Commission Submission on Reforms to Human Services

Submission to Productivity Commission on Introducing Competition and Informed Choice into Human Services by the Public Service Research Group (PSRG)

This submission is on behalf of the Public Service Research Group, University of New South Wales, Canberra.

Prepared by Associate Professor Helen Dickinson

About the PSRG

The Public Service Research Group (PSRG) was established to partner with organisational clients to produce new insights into effective public service implementation and evaluation. We perform timely, high-quality and reliable research into public policy implementation. We bring a breadth of knowledge and a depth of experience to our work, taking an inter-disciplinary and inter-methodological approach that recognises the complexity of contexts and plurality of interests involved in any policy implementation.

Our research projects build local practice while advancing global knowledge. We enable independent practice and collaborative thinking, and provide educational activities that embed new policy and program implementation insights into practice settings. In doing so the CPSR is guided by five commitments:

We use a recognition of the messy reality of implementation to inform our choices of different knowledge and tools to create novel insights

We foster a holistic, system focused approach in all that we do, enabling a better understanding of the causes, rather than symptoms, of issues

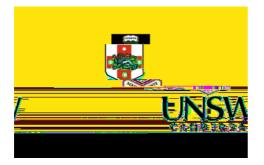
We engage in mutually beneficial relationships with partners, adopting an assetbased approach that enables the partner to achieve better outcomes and develop new capabilities

We provide thought leadership and contribute to both local practice and global knowledge of public service delivery, implementation and evaluation We are professionals who deliver projects in a timely, quality and reliable manner.

Introduction

We thank you for the opportunity to provide comment on the draft report Introducing Competition and Informed User Choice into Human Services: Reforms to Human Services. As part of our portfolio of work we have a number of research projects investigating various aspects of commissioning and stewardship within public



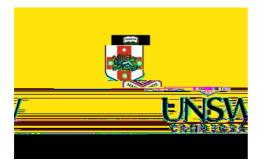


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services. The submission made here is based on these various research projects and the evidence we have collected nationally and internationally. Within the PSRG our focus in on the implementation of policy and the various challenges that arise when attempting to make a reality of policies and reform ambitions. Drawing on this experience we would note that while many aspects of this review are welcome in terms of their focus and direction of travel, the major challenge for governments will be in terms of their ability to implement these reforms. Several facets of what is suggested in the report are already being implemented in part in different areas of the country. The challenge for many of these experiments is in terms of the ability to deliver on these ambitions.

In the next section we make a few broad general points about the report, before11(er)-6(on)3()6(t)-4(he





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DRAFT RECOMMENDATION 7.1

The Australian, State and Territory Governments should work together to develop and publish:





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clear sense of the total value that providers accrue to the system. In addition to allowing for sufficient time for providers to prepare considered responses, governments may wish to consider investing in capacity building approaches that assist and advise smaller organizations on the variety of different potential arrangements that exist to facilitate collaborative working arrangements (4).

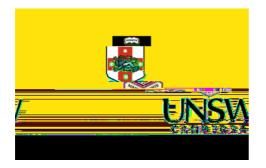
DRAFT RECOMMENDATION 7.3

The Australian, State and Territory Governments should prioritize the development of user-focused outcome measures for family and community services – indicators of wellbeing of people who use those services – and apply them consistently across all family and community services.

Governments should also identify outputs from family and community services that can be used as proxies for outcomes or measures of progress toward achieving outcomes.

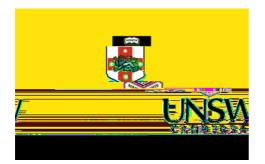
indicators broadly so they can be used in provider selection, performance management and provider, program and systemgram and syement36 BC T/F3 nB/F3 11.04 Tf1 0 0 1 90



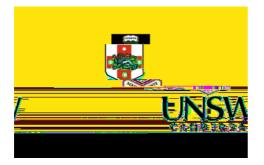


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data in contrast to a number of other comparable countries. It is likely that publicly releasing data held by different governments will lead to improved performance through the ability to identify variance in performance levels. Indeed, the quality improvement literature (5, 6) demonstrates that public reporting of data can drive improvement activities. However, to do this it is important that data is up to date, complete and comparable. It is likely that significant work will need to be done to ensure that the data released is accurate and comparable across institutions. Much of the existing data that is collected by different levels of government is typically more concerned with financial indicators and other process issues than it is in terms of the quality of services that patients receive and the outcomes delivered. A significant investment will be required to ensure that this data set is useful to those seeking to make use of it.

A further important consideration in making sure this data is used by patients will be in terms of how this is presented. Significant effort will need to be invested in making sure that such data is accessible and patients are able to understand this and garner the types of information that they require from this.





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