

Commission on the Future Delivery of Public Services Submission by Frontline

Introduction

This submission draws on Frontline's experience of working across organisation boundaries in public service provision across the UK. Most recently, we have worked with Glasgow City Council on its Early Years Investment initiative that is now part of its One Glasgow approach, and have worked with GP commissioners in England to enhance their engagement with public health as it is repositioned within local government. On a broader scope, we have supported the development of economic development strategies across Scotland, and the progression of partnership working among public bodies in coterminous settings. The themes that are presented below reflect our insights from this experience, and mirror the Commission's themes.

Citizen perspective

Public services are gradually moving from being provider focused to customer driven. This has been a long, hard journey, and remains so. An example of progress is that outpatients are no longer asked to all come at the same appointment time and then wait to be called in the order in which they arrived.

However, the word 'customer' is still anathema among some public service providers. This is largely for two main reasons:

- **the weight of power is often with the service provider** – this is either because they have expertise that is disproportionate to the service user – eg consultant-patient relationship – or the means of accessing services is so complex from the customer position that the citizen finds him/herself disempowered, eg trying to access specialist eating disorder or child and adolescent mental health services, or if the citizen's problem crosses organisation boundaries so that ownership of this problem is unclear
- **the customer is not always right** – there is a clear delineation between citizen 'need' and 'want'. Citizens may need services but not necessarily want them – eg advice on stopping smoking or eating less – and they want services that they cannot get, eg because the resources do not exist, or they may be too specialist and not regarded as priority; this is a complex equation and will require both extensive engagement with citizens that goes well beyond the electoral process, and utilisation of innovative approaches to influence behaviour, for instance the recent popularisation of choice architecture methodologies

It was Henry Ford who said "you can have any colour, as long as it's black" when commenting on the availability of his Model T. Public service provision in Scotland has changed markedly over the past two decades in moving away from this approach, but greater maturity will be required from both citizens and service providers in obtaining best fit. As the recent examples of proposed A&E closures in Ayrshire and Lanarkshire showed, the pitfalls of both inadequate service design and over-expectation of service delivery can lead to overstretched resources and misplaced public expectations of what can be provided for those resources.

Going forward into a financially constrained marketplace for as long as we can see, it is apparent that prioritisation of service provision will be essential. For this to be successful, citizens must be fully engaged in the allocation of these services. If it is determined to skew the allocation in order to achieve perceived long term gain, then this debate should be open, transparent and realistic.

Full engagement of citizens to agree prioritisation and allocation of limited board resources used to provide citizen services.

Generation change

Improving lifestyle and life circumstance for citizens of Scotland requires a long term, generational change focus. Some success in this approach can be seen recently in the incidence of dental caries which showed Scotland making significant improvement, but still lagging well behind the level in other Western European countries. The Chief Medical Officer, Dr Harry Burns, maintains a focus on 'community assets' as a means of building up sustainable local infrastructure for change, but his is somewhat a lone voice at the policy making level.

Maintaining a focus on generational change requires political vision and will. When the then Lord Provost of Glasgow, Michael Kelly, stated in 1982 that he wanted to "make Glasgow a no-smoking city by the end of the century", this was perceived by some as an aspiration well beyond achievement. However, close to 30 years later, this vision is a lot closer to reality than could have realistically been expected at the time. The risk is that politicians too often opt for short term achievements that meet their electoral criteria, rather than maintaining the long term focus that might more beneficially meet citizen needs and expectations.

This generational focus can be illustrated through the experience of the City of Chicago over the last 100 years. It was a city planner, Daniel Burnham, who laid out the Chicago plan in 1909 and stated: "Make no little plans. They have no magic to stir men's blood and probably will not themselves be realised". With the structure put in place, the political leadership over the last 50 years was most apparent through the somewhat 'benevolent dictatorship' of the Daley family, father and son, who provided the political vision and mobilised resources behind this vision. Chicago is now ranked number 6 among global cities.

Scotland's emphasis on 'single system working' and the focus on 'community' provide the means to leverage change. However, a combination of political decision making, harsh economic circumstances and individual/community acquiescence has built up an over-dependence on public service provision. The opportunity is therefore facing the country to take a long term generational view to change, and to shift the dependence on public services through the leverage of community and individual responsibility, around the community asset approach.

Policy makers to take a long term, generational view in focusing change on building up individuals and communities to take on responsibility for contributing to this change, rather than relying on the state to do it on their behalf.

Roadmap for change

It was John Maynard Keynes who stated that "The long term is only the aggregation of the number of short terms you have survived". The generational focus outlined above needs to be presented and illustrated through the roadmap envisaged by the Commission, clearly demonstrating the 'cause and effect' linkage of the 'short terms' as characterised by Keynes.

A number of methodologies can be used to build up this cause and effect linkage, and to populate the roadmap, such as building a logic model or using a balanced scorecard type approach. Our work for Glasgow City Council on its Early Years Investment initiative was based around selling the benefits of the linkage of investment building blocks, rather than the features of the investment itself.

As the adage goes 'Sell the benefits, not the features'. This means that politicians and policy makers need to have a compelling narrative for change and must be able to communicate this through simple stories that tell the benefits of change. It is, of course, naïve to think that there will be unanimity among politicians in agreeing the roadmap, but citizens should have the hope and aspiration that there is broad agreement on the destination, if some disagreement on the steps along the journey. Hence, Keynes's 'short terms' will be the subject to debate as long as they can contribute to the agreed 'long term'.

The roadmap for public services provision in Scotland should be agreed among the body politic so that the debate is over the cause and effect linkages along the journey, rather than disagreement on the destination itself.

Public versus private

The presumption has developed in Scotland of public service provision for public services, rather than embracing the private sector. This debate is falsely characterised as an 'either/or', rather than a 'both/and'. The private sector is already extensively involved in public service provision, whether through services such as nursing homes or services contracted by compulsory competitive tendering or best value. Increasingly, the halfway house of the social economy sector has geared up to provide public services on a not-for-profit basis. The reality is that policy makers with taxpayers' resources are there to leverage service provision, rather than take it all on their own shoulders. This was codified 20 years ago, when Osborne and Gaebler suggested that entrepreneurial public organisations should "steer more than they row", as a means of Reinventing Government. This approach to public service governance can provide a beneficial framework for decision making about who should provide what, rather than working on the assumption that public services are there to be provided by the public sector alone.

The differentiation between the private and public sectors can also be illustrated through the contrast between shareholder value and what Mark Moore calls 'public value'.

Moore characterises opportunities to create public value along the lines of:

- increasing the **quality** or **quantity** of public activities per resource expended
- reducing the **costs** used to achieve current levels of production
- making public organisations better able to identify and respond to citizens' **aspirations**
- enhancing the **fairness** with which public sector organisations operate
- increasing their continuing **capacity** to respond and innovate

In the allocation of resources to create public value, policy makers can embrace providers across the spectrum from in-house provision through social economy and onto private providers. The focus must, however, be on creating public value. Therefore, a more evidence based and less ideological approach to public service provision will leverage opportunities to create public value, rather than stifle it.

With the focus on citizen rather than service provider, policy makers should focus on what is provided rather than who provides it as a means of leveraging opportunities to create public value and to build innovation and creativity in public service provision.

Bang for the bucks

Our work in facilitating partnership working among public sector service providers shows that there is often a degree of overlap or duplication where services cross organisation boundaries, for instance the classic question of should it be a 'health care bath' or 'social work bath'? The answer is neither; rather, it should be what is in the best interests of the service user. This service delineation is also reinforced by the different income streams through which resources are provided. These resources are often jealously guarded, since they result in size of organisations that bring appropriate gradings, and therefore salaries, for public service managers.

Reinforcing the theme through this submission of a citizen focus, it is worthwhile at this point to recall Peter Drucker's seminal questions of: What is our business? Who is our customer? What does our customer consider value? Engagement of citizens and clarification of what they consider value can in turn shape the structure and, most obviously, the redesign of services.

The 'bang for the bucks' basis of public service provision can most easily work in a coterminous setting. The Islands, Dumfries & Galloway and Fife, for instance, offer policy makers the opportunity of meeting and putting all the resources on the table in order to maximise what is available. The problems of rurality can therefore be addressed in this way, given the scope for flexibility in a number of areas, such as income streams, job design and asset utilisation. However, the financial constraints mean that it will be absolutely essential to adopt this approach in order to provide historic levels of public services with reduced resources – if indeed this is what is required in the first place.

Policy makers will need to work together in local settings to maximise available resources by agreeing common priorities and being flexible in resourcing these and designing services that work across organisation boundaries in the best interest of citizens.

What is the colour of the sun on your planet?

Achieving bang for the bucks in public service provision is much easier said than done, largely because the sun is a different colour on the planets of the various public service providers. This is best illustrated by the complexity of the NHS and local government working together, illustrated by the recent failure of the Community Health and Social Care Partnerships in Glasgow. This contrast is illustrated in the table below:

Local Government	National Health Service
Social model of care	Medical model of care
Elected members	Appointed members
Members and officials	Board of governance

The sun is clearly a different colour on each of these planets, and this results in different approaches to organisation culture and the behaviour of policy makers. In Mark Moore's public value terms, the 'authorising legitimacy' in local government is the elected members, whereas in the NHS it is the appointed board members. The current trial for the election of NHS board members may go some way to addressing this contrast, but it will not take away the inherent difference in the businesses and their service provision models.

Within the bounds of these contrasting missions and paradigms for public service providers, it is individuals themselves – rather than the organisations – that must work extra hard to make things work. This means that partnership working among public service providers often focuses on success measured through inputs and processes, rather than through outputs and outcomes. Referring back to the criteria for public value, this emphasis on the input and processes of partnership working does not really benefit the citizen, but at least it is a positive starting point.

The structural contrasts of public service providers mean that their leaders must work doubly hard to make sure partnership working across organisations is effective, and build on this platform to bring about really effective change to deliver true public value.

Conclusion

The themes in Frontline's submission tie together in a number of ways:

- **citizen** – the service is designed and delivered to meet citizen needs rather than those of the provider
- **vision** – taking a long term, generational change approach to improving lifestyle and life circumstances and 'holding the candle' to maintain this focus
- **benchmarking** – building on the experience of best practice public service provision across Scotland and much further afield in order to take a non-ideological approach to what works and what compromises should be made along the way to achieving the long term vision
- **funding** – maximising the resources available rather than seeking out more resources, and not confusing quality with the level of resources themselves
- **performance** – focusing on outputs and outcomes and challenging public service leaders to compromise in a relational way to bear in mind that they are at the behest of citizens rather than for the benefit of the organisations themselves

We would be pleased to provide any further background in support of our submission, and to contribute in any way appropriate to the further deliberations of the Commission.

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