

## **Eight Ways to Do More with Less**

The scale of the challenge to public services was laid bare last week: after a decade in which we have done more with more, we will spend the next decade trying to do more with less and in some services a lot less.

The conventional public service response would be to restrict eligibility to services and cut back opening hours: a recipe for less with less. The best we might hope for are Ryan Air style public services, cut back to a basic, low cost offering: those who want to jump the queue or get a better service will have to pay more.

Both will lead public services into ten years of tension and conflict, marked by rising resentment and declining trust among citizens who will feel hard done by. At the end of the decade public services could find themselves in an even more tenuous position than they do today.

To avoid heading down that cul de sac we have to devise ways for people to find solutions to their needs which are radically lower cost and more effective, because they do not require continual and costly support from public services. This is a seven step guide to finding those approaches.

### **Prevent demand for public services arising in the first place.**

Preventative services do not have to be expensive and long term. The dramatic decline in deaths in domestic fires is not primarily due to better fire engines, but to the spread of the low cost smoke alarm. Too often in public services we assume the solution must be more fire engines and fire stations, when a better approach might be to look for the equivalent of smoke alarms: a low cost, home based, self help solution.

### **If a need arises find ways to meet it without relying on public services.**

An outstanding example is Western Australia's approach to adults with learning disabilities, which is organised around Local Area Coordinators, each serving about 60 clients. The Coordinators point families to peer support, private and community services that would meet their needs. The last of 16 options families are given is to

see a state social worker. As a result there are only 7 social workers dealing with adults with learning disability in all of the state.

**Help them self manage a long term need rather than relying on a service.**

There is huge potential in health and social care, for example, to provide people with technology to support them at home, rather than rely on a service. In Germany, for example, many people who regulate a heart condition using a drug like warfarin test their own blood. They contact a doctor only when they get an unusual reading. The upfront costs of installing the equipment and training people to use it are higher, but the long term costs are lower than relying on GPs and nurses to test blood.

**Help people recuperate as fast as possible to limit long term service dependency.**

Time and again public services perform well in a crisis, saving people who are in acute need. Too often this acute intervention, however, leads to chronic dependency on costly, continuing services. I once met a woman in Scotland who had been saved from suicide by social workers, only to spend two years in a mental hospital, unable to find a way out. We need more time limited, intensive, recuperative services which get people back on their own two feet, living independent lives. Six week recuperative programmes for older people leaving hospital, helping them avoid long term dependency or life in a care home have a huge pay off. The public services most in need of this recuperative and restorative approach are prisons and criminal justice: prisons should be redesigned to reduce long-term recidivism and promote recuperation through learning.

**Minimise duplication by integrating services around people and places.**

Barnet Council in north London recently found a single workless household on one of its poorest estates was receiving 31 different services, to almost no effect. All users of multiple public services should have a concierge or coach who is responsible for drawing the services together, creating an integrated plan and decommissioning the least effective. A more personalised, integrated approach would likely save money compared with a scattergun of disconnected services.

**Allow service users to commission services directly.**

A huge portion of public spending goes on assessing people's needs, rationing services, forming an orderly queue and then assessing the quality of outcomes. The assessment state is a huge and wasteful burden and increasingly consumers do not really believe the quality assessments made by official bodies, witness the furore over the Care Quality Commission's work. It is common for social workers to spend 60-80% of their time on paperwork. We should aim to invert that and make sure staff spend 60-80% of their time working with clients. Yet that would probably require a much more direct approach, to allow services users to commission services, to manage the risks and to assess the quality. Personal budgets are not always the right approach for everyone. But they have huge potential to mobilise users' intelligence to find lower cost ways to improve services while also allowing professionals to play a more creative role, rather than rationing the allocation of services.

**Get it right first time and allow users to track progress.**

Sir David Varney's report on transforming public services found that roughly half the telephone calls made to public services in a year were either not answered, misdirected or were made to chase up work already in progress. Public services would have more money for the front line if they could answer queries first time round and allowed people to track the progress of the inquiry online, just as you can with a package from DHL. Once again giving tools to the service users to help themselves will be key.

In short, there are myriad ways for public services to help people more effectively, at lower cost, but most will involve radical organisational change to devolve power, tools, decision making, risk management and quality assessment towards service users, their supporters and advocates and away from the centre. More personalised, intensive, preventative, integrated, self-help solutions are the way to make public services more effective at lower cost. The alternative a pared back, rationed, often low quality and low cost version of an existing service, will just leave more people feeling resentful and in the long run unwilling to fund collective provision. Anyone who wants to avoid that outcome should get innovating.

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