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978-0-521-70827-2 - Managing to Improve Public Services

Edited by Jean Hartley, Cam Donaldson, Chris Skelcher and Mike Wallace

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## Managing to improve public services

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How are public service organizations governed? How is performance in such organizations measured, managed and improved?

Public services play a central role in the well-being, sustainability and growth of communities, cities and nations. *Managing to Improve Public Services* shows how management can be harnessed to improve a range of public services (e.g. policing, health, local government) by examining them through different theoretical lenses (e.g. governance, innovation and change, performance metrics and management). It advances both theory and practice, beyond traditional public administration and ‘new public management’, by considering the inter-relationships between governance and public management. The book is written by a group of leading social science and management specialists, who were awarded the prestigious ESRC/EPSRC Public Service Fellow awards as part of the Advanced Institute of Management Research initiative. It will be of interest to graduate students, academics and policy-makers involved in public service management and performance measurement.

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# Preface

Robin Wensley

## The AIM Public Service Fellows initiative

This book arises from the bold experiment of the ESRC, supported by the EPSRC, in setting up the Advanced Institute of Management (AIM) research initiative and in particular the funding of 11 Public Service Fellowships. AIM is an innovatory approach to creating conditions for synergy amongst management researchers through their collaborative efforts to inform research investment in high-priority areas of national policy. AIM was established in order to increase significantly the contribution of, and future capacity for, world-class UK management research. In specific terms this means supporting research that will identify actions to enhance the UK's international competitiveness (with the public services having a key role in this as explained later); to raise the quality and international standing of UK research on management, to expand the size and capacity of the active UK research base on management; and to engage with practitioners and other users of research within and beyond the UK as co-producers of knowledge about management. AIM, within the UK, consists of 289 Fellows, of whom 11 are Public Service Fellows, 41 Research Fellows and 62 Scholars. There are also 74 International Visiting Fellows attached to the AIM network.

The AIM Public Service Fellowships were developmental in that Fellows were appointed, for a period of a year (for between 60 and 100 per cent of their time), not for a specific project but to develop theory and research in their personal stream of activities and associated outputs in key areas of national priority. Thus, the Public Service Fellows initiative was not an ESRC programme (where projects are generally selected to cover a field or to complement each other). Each Fellow undertook demonstration projects, case studies, quantitative analysis of large databases, systematic reviews of evidence, and the development of new techniques. They worked on a wide range of public services where there are large disbursements from the public purse (e.g. education, health, local government, criminal justice).

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While each Fellow had his or her own speciality to pursue, the work was enhanced by interdisciplinary collaborative work through a series of working group seminars. Each Fellow presented work at least once at these seminars and this work was subjected to constructive scrutiny from the other Fellows, from a range of disciplinary, epistemological and methodological perspectives. Management research is inevitably an interdisciplinary field, and the seminars enhanced the process and hopefully the outputs of this dialogic enquiry for each of the Fellows. International Visiting Fellows, from the USA, Canada, the Netherlands, South Africa and Australia, helped to broaden the scope of individual Fellows' work, either in comparative research (not all of which is reported here) or in exploring the opportunities and limitations on generalizing from UK research.

AIM Public Service Fellows' work has been explored in a range of workshops and seminars with central government departments and agencies, and a range of local public services, consistent with the AIM mission to undertake research which contributes to UK competitiveness. Fellows have produced a number of practitioner reports and academic papers. Copies of the former and detailed references to the latter can be found along with further information about all AIM activities at the AIM website ([www.aimresearch.org](http://www.aimresearch.org)). AIM Fellows have also shared their skills with other academics in capacity-building conferences and seminars. The work presented in this book reports on some key themes from the Fellowships. We hope that this contributes to the knowledge about, and practice of, public management both through the detailed study of substantive areas and also in the shaping of questions and themes for further research.

## Abbreviations

A4R	Accountability for Reasonableness
ACORN	A Classification Of Residential Neighbourhoods
AIM	Advanced Institute of Management
ARD	age-related disease
BV	Best Value
CBA	cost–benefit analysis
CDC	Center for Disease Control (US)
CEA	cost-effectiveness analysis
CHR	Calgary Health Region
CJS	criminal justice system
CPA	Comprehensive Performance Assessment
CPS	Crown Prosecution Service
CSP	core service performance
CUA	cost-utility analysis
CV	contingent valuation
CWOI	cost-weighted output index
DALE	disability-adjusted life expectancy
DCE	discrete choice experiment
DfT	Department for Transport
EQ-5D	five-dimensional health state classification system
GIS	geographical information systems
GP	general practitioner of medicine
IHD	ischaemic heart disease
IPDS	Integrated Personal Development System
IRMP	Integrated Risk Management Plan
K-S4	Kindergarten–Senior Four Agenda
NHS	National Health Service
NICE	National Institute for Health and Clinical Excellence
NIM	National Intelligence Model
NPM	new public management

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NSF	National Service Framework
OAC	Output Area Classification
PACE	Police and Criminal Evidence Act
PAR	participatory action research
PBMA	programme budgeting and marginal analysis
PCT	primary care trust
PF	Procurator Fiscal
PI	performance indicator
PM	performance management
PMDU	Prime Minister's Delivery Unit
PPP	purchasing power parity
PSA	Public Service Agreement
QALY	quality-adjusted life year
RAE	Research Assessment Exercise
RSS	Royal Statistical Society
SDR	age-standardized death rates
SG	standard gamble
VOSL	value of statistical life
VPF	value of a prevented fatality
WHO	World Health Organization
WTP	willingness to pay