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ISSN 1328 181X ISBN 174037 160 7

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### **Suggestions:**

The Steering Committee welcomes suggestions on the performance indicators contained in this Report. Please direct your suggestions to the Productivity Commission Secretariat at the above address.

An appropriate citation for this publication is:

SCRGSP (Steering Committee for the Review of Government Service Provision) 2005, *Report on Government Services* 2005, Productivity Commission, Canberra.

### Foreword

This is the tenth edition of the Report on Government Services. The first was published in 1995, following an historic agreement by Heads of Government in July 1993. Much has been achieved in the intervening years.

The first Report effectively set the baseline for subsequent reporting. It contained data on the efficiency and effectiveness of government services in the areas of public housing, school education, vocational education and training, police, courts administration, corrective services, and child protection and support.

The breadth and depth of reporting have developed considerably since then. For example, in the area of health, the Review now also reports on primary and community health, and the management of breast cancer and mental health; in the community services area, it reports on aged care, services for people with a disability and children's services. The housing chapter now includes reporting on community housing and State-owned and managed Indigenous housing.

Following advice from the Prime Minister in 1997, the Review has increased its reporting on Indigenous Australians across all service areas. Since 2003 a separate Compendium of data on services to Indigenous people has been published. In an important new initiative, the Council of Australian Governments has also commissioned the Review to produce a regular report on indicators of Indigenous disadvantage, to provide a consistent basis for assessing outcomes and progress over time. The first of these, *Overcoming Indigenous Disadvantage: key indicators* was produced in November 2003; the next report will be released in May 2005.

The past ten years have not just seen the Report grow greatly in size. The Review's Steering Committee has also striven to make it a better and more useful resource for governments. In particular, to discharge the Review's function of facilitating assessments of performance over time and across jurisdictions, the accuracy, consistency and comparability of data in the Report have been targeted for continual refinement.

In a recent feedback survey of users, 92 per cent of central agency respondents considered the Report 'important' for evaluating and formulating government policy; and 91 per cent considered it so for briefing ministers and departmental executives.

From a broader perspective, the Report has helped provide impetus for governments to work towards national approaches in data collection. In turn, this has contributed to convergence in approaches to service delivery in some areas with consequent gains in efficiency and effectiveness. It has also assisted agencies in identifying and benchmarking their services against best practice. I believe that this will be of even greater value as we strengthen the Report's focus on outcomes.

As in past volumes, the 2005 Report contains a number of improvements. These include reporting new indicators for children's services, services for people with a disability and corrective services. Reporting on Indigenous Australians has improved for aspects of education and public hospital services.

Not all areas of reporting have progressed as well as they should, however. In particular, given its social and economic importance, and the potential to collect useful data, reporting on school education continues to fall short. For example, improvements in the scope and timeliness of data relating to literacy and numeracy foreshadowed in the 2004 Report have not eventuated. Also, expected new reporting on student performance in primary science was not available this year. There is clearly scope to do better.

As always, the production of this Report has depended on the active cooperation and support of many people from a range of government departments and agencies. Special thanks are due to the members of the many workings groups who provide the 'engine room' for the Review. Statistical bodies — in particular, the Australian Bureau of Statistics and the Australian Institute of Health and Welfare — provided invaluable advice and assistance. And the Review's Secretariat in the Productivity Commission has continued to do a sterling job.

I would like to thank everyone involved for their contribution to this important joint undertaking over the past decade and I look forward to further advances in coming years.

Gary Banks Chairman

January 2005

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This Report is in two volumes: *Volume 1* contains Part A (Introduction), Part B (Education), Part C (Justice), Part D (Emergency Management) and the CD-ROM attachment; *Volume 2* contains Part E (Health), Part F (Community Services), Part G (Housing) and Appendix A (the descriptive statistics appendix).

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This Report was produced under the direction of the Steering Committee for the Review of Government Service Provision (SCRGSP). The Steering Committee comprises the following current members:

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Ms Joanna Davidson	Aust. Govt.	Department of Prime Minister and Cabinet
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Ms Nicola Best	NT	Department of the Chief Minister
Mr Andrew Rice	ACT	Chief Minister's Department

### Acronyms and abbreviations

ABS Australian Bureau of Statistics

ACAP Aged Care Assessment Program

ACAT Aged Care Assessment Team

ACCHS Aboriginal Community Controlled Health Service

ACHS Australian Council on Healthcare Standards
ACIR Australian Childhood Immunisation Register

ACPR Australian Centre for Policing Research

ACSAA Aged Care Standards and Accreditation Agency

ACSQHC Australian Council for Safety and Quality in Health Care

ACT Australian Capital Territory

ADR Alternative Dispute Resolution

AFAC Australasian Fire Authorities Council

AFP Australian Federal Police

AGCCCS Australian Government Census of Child Care Services

AGPAL Australian General Practice Accreditation Limited

AHCA Australian Health Care Agreements

AIC Australian Institute of Criminology

AIHW Australian Institute of Health and Welfare

ANTA MINCO Australian National Training Authority Ministerial Council

ANTA Australian National Training Authority

AQF Australian Qualifications Framework

AR-DRG Australian refined diagnosis related group

ARHP Aboriginal Rental Housing Program

ARIA Accessibility and Remoteness Index for Australia
ASGC Australian Standard Geographical Classification

ATSIC Aboriginal and Torres Strait Islander Commission

ATSIS Aboriginal and Torres Strait Islander Services

Aust Australia

AVETMISS Australian Vocational Education and Training Management

**Information Statistical Standard** 

BEACH Bettering the Evaluation and Care of Health

CAA Convention of Ambulance Authorities

CACP Community Aged Care Package (program)

CAD computer aided dispatch

CD ARIA Plus Census District Accessibility and Remoteness Index for

Australia (upgraded version)

CD-ROM Compact Disc Read Only Memory

CHINS Community Housing and Infrastructure Needs Survey

CI confidence interval

COAG Council of Australian Governments

CRA Commonwealth Rent Assistance

CRS Commonwealth Rehabilitation Services

CSDA Commonwealth/State Disability Agreement

CSDMAC Community Services and Disabilities Ministers' Advisory

Council

CSHA Commonwealth State Housing Agreement

CSTDA Commonwealth State/Territory Disability Agreement

Cwlth Commonwealth

DCIS Ductal carcinoma in situ

DEA data envelopment analysis

DEST Department of Education, Science and Training

DFaCS Department of Family and Community Services

DHA Department of Health and Ageing

DOTARS Department of Transport and Regional Services

DSE Department of Sustainability and Environment

DVA Department of Veterans' Affairs

EACH Extended Aged Care at Home (program)

EBA Enterprise Bargaining Agreement

EMA Emergency Management Australia

EPC Enhanced Primary Care

ERP estimated resident populations

ESL Emergency Services Levy

ESO emergency service organisation

FDCQA Family Day Care Quality Assurance

FESA Fire and Emergency Services Authority of WA

FRS Fire and Rescue Service

FTE full time equivalent

FWE full time workload equivalent

GDP gross domestic product

GP general practitioner

GST goods and services tax

HACC Home and Community Care (program)

HbA1c glycated haemoglobin

HMAC Housing Ministers' Advisory Committee

HRSCEET House of Representatives Standing Committee on

**Employment, Education and Training** 

ICD-10-AM Australian modification of the International Standard

Classification of Diseases and Related Health Problems,

version 10.

IHANT Indigenous Housing Authority of the NT

IMP Information Management Plan (SAAP)

ITAB Industry Training Advisory Bodies

JJNMDS Juvenile Justice National Minimum Data Set

K10 Kessler – 10 scale

KiDS Key Information Directory System (NSW)

LBOTE Language background other than English

LMO local medical officer

LSI Likert Summation Index

MAB Management Advisory Board

MBS Medicare Benefits Schedule

MCEETYA Ministerial Council on Education, Employment, Training

and Youth Affairs

MDS minimum data set

NCAC National Childcare Accreditation Council

NCAG National Corrections Advisory Group

NCPASS National Child Protection and Support Services

NCVER National Centre for Vocational Education Research

NDCA National Data Collection Agency

NESB non-English speaking background

NFD not further defined

NHCDC National Hospital Cost Data Collection

NIDP National Information Development Plan

NMDS national minimum data set

NMHS National Mental Health Strategy

NOOSR National Office of Overseas Skills Recognition

NRCP National Respite for Carers Program

NSCSP National Survey of Community Satisfaction with Policing

NSMHS National Survey of Mental Health Services

NSW New South Wales

NT Northern Territory

OMP other medical practitioner

OSHCQA Outside School Hours Care Quality Assurance

PBS Pharmaceutical Benefits Scheme

PIP Practice Incentives Program

PISA Program for International Student Assessment

OFRS Queensland Fire and Rescue Service

QIAS Quality Improvement and Accreditation System

Qld Queensland

QPA Quality Practice Accreditation

RACGP Royal Australian College of General Practitioners

RCS Resident Classification Scale

RRMA Rural, Remote and Metropolitan Areas

RSE relative standard error

RTO Registered Training Organisation

SA South Australia

SAAP Supported Accommodation Assistance Program

SAAS SA Ambulance Service

SAR service activity reporting

SCRCSSP Steering Committee for the Review of Commonwealth/State

**Service Provision** 

SCRGSP Steering Committee for the Review of Government Service

Provision

SDA service delivery area

SE standard error

SES/TES State Emergency Service/Territory Emergency Service

SLA statistical local area

SMART SAAP Management and Reporting Tool

TAFE technical and further education

Tas Tasmania

UCC user cost of capital

ULN upper limit of normal

VET vocational education and training

VHC Veterans' Home Care

Vic Victoria

WA Western Australia

WHO World Health Organisation

### Glossary

Definitions of indicators and other terms can also be found at the end of each chapter.

Access A reflection of how easily the community can obtain a

delivered service (output).

**Appropriateness** Measures how well services meet client needs and also seek

to identify the extent of any underservicing or overservicing.

**Capability** In the context of the health performance framework, the

capacity of an organisation, program or individual to provide health care services based on appropriate skills and

knowledge (see the 'Health preface').

**Constant prices** See 'real dollars'.

**Continuity** In the context of the health performance framework, the

provision of uninterrupted, timely, coordinated healthcare, interventions and actions across programs, practitioners and

organisations (see the 'Health preface').

**Cost effectiveness** A measure of how well inputs (such as employees, cars and

computers) are converted into outcomes for individual clients or the community. Cost effectiveness is expressed as a ratio of inputs to outcomes. For example, cost per life year saved is a cost effectiveness indicator reflecting the ratio of expenditure on breast cancer detection and management services (including mammographic screening services, primary care, chemotherapy, surgery and other forms of

care) to the number of women's lives that are saved.

**Current prices** See 'nominal dollars'.

**Descriptors** 

Descriptive statistics included in the Report that relate to the size of the service system, funding arrangements, client mix and the environment within which government services are delivered. These data are provided to highlight and make more transparent the differences among jurisdictions.

**Effectiveness** 

A reflection of how well the outputs of a service achieve the stated objectives of that service (also see program effectiveness).

**Efficiency** 

A reflection of how resources are used to produce outputs and outcomes, expressed as a ratio of inputs to outputs (technical efficiency), or inputs to outcomes (cost effectiveness). (Also see 'cost effectiveness' and 'technical efficiency'.)

**Equity** 

Equity indicators reflect the gap between service delivery outputs or outcomes for special needs groups and the general population. Equity of access relates to all Australians having *adequate* access to services, where the term *adequate* may mean different rates of access for different groups in the community (see chapter 1, box 1.5 for more detail).

**Inputs** 

The resources (including land, labour and capital) used by a service area in providing the service.

**Nominal dollars** 

Refers to financial data expressed 'in the price of the day' and which is **not** adjusted to remove the effects of inflation. Nominal dollars do not allow for inter-year comparisons because reported changes may reflect changes to financial levels (prices and/or expenditure) and adjustments to maintain purchasing power due to inflation.

**Output** 

The service provided by a service area — for example, a completed episode of care is an output of a public hospital.

#### **Outcome**

The impact of the service on the status of individuals or a group. A service provider can influence an outcome but external factors can also apply. A desirable outcome for a school, for example, would be to add to the ability of the students to participate in, and interact with, society throughout their lives. Similarly, a desirable outcome for a hospital would be to improve the health status of an individual receiving a hospital service.

#### **Process**

The way in which a service is produced or delivered.

## Program effectiveness

Reflects how well the outcomes of a service achieve the stated objectives of that service (also see effectiveness).

### Quality

Reflects the extent to which a service is suited to its purpose and conforms to specifications.

#### Real dollars

Refers to financial data measured in prices from a constant base year to adjust for the effects of inflation. Real dollars allow the inter-year comparison of financial levels (prices and/or expenditure) by holding the purchasing power constant.

### Responsiveness

In the context of the health performance framework, the provision of services that are client oriented and respectful of clients' dignity, autonomy, confidentiality, amenity, choices, and social and cultural needs (see the 'Health preface').

### Safety

In the context of the health performance framework, the avoidance, or reduction to acceptable levels, of actual or potential harm from health care services, management or environments, and the prevention or minimisation of adverse events associated with health care delivery (see the 'Health preface').

### **Sustainability**

In the context of the health performance framework, the capacity to provide infrastructure (such as workforce, facilities and equipment), be innovative and respond to emerging needs (see the 'Health preface').

# Technical efficiency

A measure of how well inputs (such as employees, cars and computers) are converted into service outputs (such as hospital separations, education classes or residential aged care places). Technical efficiency reflects the ratio of outputs to inputs. It is affected by the size of operations and by managerial practices. There is scope to improve technical efficiency if there is potential to increase the quantity of outputs produced from given quantities of inputs, or if there is potential to reduce the quantities of inputs used in producing a certain quantity of outputs.

### **Unit costs**

Average cost — an indicator of efficiency, as used throughout this Report.

### Terms of reference

The Review, to be conducted by a joint Commonwealth/State and Territory Government working party, is to undertake the following:

- establish the collection and publication of data that will enable ongoing comparisons of the efficiency and effectiveness of Commonwealth and State Government services, including intra-government services. This will involve:
  - establishing performance indicators for different services which would assist comparisons of efficiency and effectiveness. The measures should, to the maximum extent possible, focus on the cost effectiveness of service delivery, as distinct from policy considerations that determine the quality and level of services: and
  - collecting and publishing data that are consistent with these measures. The Review should also address the procedures for the ongoing collection and publication of benchmark data; and
- compile and assess service provision reforms that have been implemented or are under consideration by Commonwealth and State Governments.

The Review will cover all major types of reform, including those involving the separation of policy development from service provision. Case studies of particular reforms could be provided where appropriate.

The Review will need to keep abreast of developments in other relevant reviews and working parties, including the Commonwealth/State Government working party (initiated by the Council of Australian Governments) investigating Commonwealth/State Government roles and responsibilities.