COMMUNITY AGED CARE SERVICES
- LOCALISATION OR MCDONALDISATION?

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Outline

• Introduction
  – Context for the Growth of Large Providers
  – Ritzer’s Theory of McDonaldisation

• Community Aged Care
  – Six Propositions relating to Localisation and McDonaldisation
Large providers

• Can rapidly disseminate and consistently apply good practice

• But are often criticised for
  • putting efficiency and cost minimisation ahead of service quality and human interactions
  • an homogenisation of services that ignores the individuality of each service user and the distinctive needs of each local area in which they operate.
Localisation

- Where the design, management, and delivery of services are shaped by the distinctive needs and circumstances of each community or region in which the services are provided, including making linkages with local people, organisations, and networks.
The Broader Context

• The growth of large providers is in part a manifestation of wider developments over the last thirty years as a result of
  – Neo-liberalism
  – The revolution in information and communications technology
Data Sources

• Interviews
  – 45 interviews with senior people in service providers and funding agencies, plus other key industry figures

• Funding data
  – Detailed funding for the two major community care programs over the first decade of the 21st century,

• Document analysis
  – Research and other documents from a range of fields from aged care through to economic and organisational theory.
McDonaldisation


• In the tradition of Weber’s ‘iron cage’ of bureaucracy and critiques of Taylorism,

• Of particular contemporary relevance because it
  – is about services, which are increasingly important in all developed nations
  – incorporates how the revolution in information and communications technology has transformed a number of the long-held verities about the limited scope for increasing productivity (efficiency) in services
Five Features of McDonaldisation

• Efficiency
  – minimising the time spent on all tasks
• Calculability
  – objectives are quantifiable/focus on number and value of products sold
  – workers are assessed by the number of tasks they can complete in a given time
• Predictability
  – Services are standardised and uniform, exactly the same in all places.
  – Tasks for workers are highly repetitive and routinised
  – Inflexibility of services
• Control
  – e.g of the movements of both workers and consumers
• The irrationality of rationality
Community aged care

• Community aged care comprises various types of assistance provided to older people who have some level of physical or mental incapacity, in order that they can live relatively independently and remain living in their homes and as part of the community. The assistance is provided in a person’s home or for activities in the local community.

Comprises
• Services requiring a care-worker, nurse or case manager
  – personal care, nursing care, domestic assistance, respite care, social support, centre-based day care,
• Specialist support services
  – home maintenance, home modification, transport, food services, linen, goods and equipment, allied health services
Six Key Propositions

1. The development of systems incorporating the four core drivers of McDonaldisation is critical for ensuring good community aged care services for a large and growing ageing population.

2. The issue is in determining where and to what extent these drivers are used. To some extent there are problems in community aged care in terms of both (a) efficiency overriding quality and (b) the homogenisation of services

3. Good services for a large ageing population imply the need for providers that have some scale and scope of services - but this can be achieved by local or regional organisations
Six Key Propositions

4. There appears to be still a strong focus on the localisation of services in NSW, as reflected in (i) the attitudes and priorities of both funding agencies and providers of all sizes (ii) the allocation of funding to providers.

5. The continuing focus on localisation derives substantially from the funding systems, both current and historical.

6. There are changes to these systems, both agreed and proposed, that potentially threaten this.
1. Systems are essential for good services

The development of systems incorporating the four core drivers of McDonaldisation is critical for ensuring good community aged care services for a large and growing ageing population

- The Complexity of Providing Community Care
- Systems and Values
- Systems to develop and support professional aspects of the services.
- What does localisation mean in this context?
Complexity of community care

- “Community care is both conceptually very simple and incredibly complex to deliver in practice. [For example] it's the amount of work you've got to put in to maintaining relationships [and]... the granular nature of the scheduling process. You might have 700 staff and 5000 clients but [then you have to meet]... this particular client's need on this particular Saturday afternoon.”
Systems to develop and support professional aspects of services

- Recruit, train, and support staff
- Develop and implement new models of care
- Obtain and respond to client views
- Measure outcomes
- Identify where new technology can genuinely improve services
- Develop and maintain networks with other agencies
Systems and Values

• “It’s a question of whether you can deliver on your values. A lot of organisations that look nice from the outside don't have a mechanism for delivering their values. It’s an issue right across the industry. All of us are struggling with issues to do with the workforce, communication, what we do and so on. All of these things come together around systems. You need really robust systems in order to deliver on your values.”
What does localisation mean?

• In practical terms, it comes down to
  – staff at all levels having a good knowledge of the particular features of the area
  – linkages with other services in the area that may be required by their clients
  – using local information networks to ensure older people are aware of services.
2. Potential Problems

To some extent there are problems in community aged care in terms of both (a) efficiency over-riding quality (b) the homogenisation of services

• Concerns about some providers setting
  – limits on the time workers can spend with clients
  – limits on the tasks that workers can do for clients
  – over-specification of how workers do certain tasks and the time they are allowed

• Efficiency measures commonly involve value judgments about the relative importance of different social objectives

• Available evidence suggests these problems may be less prevalent in Australia than in some comparable nations
3. Implications for Providers

Good services for a large ageing population imply the need for providers that have some scale and scope of services

• But this can be achieved by local and regional organisations
  – Community-based bodies that over time build up a wide scope of community care services, but remain, as far as possible within their local regions.
  – Potential options for smaller providers, for example
    • linking with other service types at a local or regional level
    • linking with similar services at a state level
4. Evidence of Localisation of Services

There appears to be still a strong focus on the localisation of services in NSW

• Attitudes and priorities of both funding agencies and providers of all sizes

• Allocation of funding to providers.
Funding Data - Packages in NSW

In 2002-03,
• 126 providers - the top 10 had 46.4% of total funds

In 2009-10
• 145 providers – the top 10 had 57.3 % of total funds
• Some of the growth in the top 10 results from amalgamations

But
• 79% of Package providers were in only 1 region
• 94% were only in two regions
5. Impact of funding systems

The continuing focus on localisation derives substantially from the funding systems, both current and historical

- Stability of funding systems over the last two decades
- Only growth funding is contestable
- Growth funding is allocated on a regional basis, where decisions are not based on price, but on (departmental perceptions of) quality
  - Of which localisation of services is a key factor
6. The Impact of Changes to the System

There are changes to these systems, both agreed and proposed, that may reduce the focus on the localisation of services.

In particular

• HACC has gone to the Commonwealth
• Changes to HACC to come into effect in 2015
• PC proposal for a quasi-voucher system (demand side payments)
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