



Innovating human services by giving clients choice, control and flexibility

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“Integration”, “transformation”, and “modernization” have become the prevalent buzzwords in the Canadian Human Services sector. Everyone wants to change, become more efficient, and drive better value – all code for greater cost savings. But one important trend in human services globally is being overlooked – providing choice and control to the client.

For all the talk of back office consolidations, digital transformations, reducing fragmentation, better client journeys, and so on... choice and control, through the use of client direct funding, is no doubt difficult to reform, but it can be effective on a number of levels.

True transformation – easy to say, hard to do

One of the ways to truly transform the human services sector would be to give clients the choice to decide who they receive service from, how they receive that service, and when they receive that service – a new paradigm of funding.

The ultimate objective would be to give people:

- greater flexibility;
- greater control; and
- greater wellbeing.

But does providing client choice and control actually work? Can it transform a person’s life and also provide systemic change to the way we fundamentally deliver human services?



Transforming client outcomes for the better

Research and anecdotes consistently highlight the benefits to clients who are provided choice and control. One of the single biggest human service reforms has been the implementation of the National Disability Insurance Scheme in Australia – a \$22 billion reform to how disability services are funded and delivered across the country.

The Productivity Commission in Australia noted in their final report, Disability and Support Care (2011), that:

“Self-directed care is typically associated with greater satisfaction levels, perceptions of greater power and control over life decisions, without adverse effects on health.”

In addition, the Commission examined 27 American studies into self-directed funding spanning the last 25 years (the Disability and Support Care Inquiry). The evaluations consistently found that self-directed funding provides significant benefits to people with disability and their families. Positive results were found for those with physical, intellectual, and mental health disabilities, and for the non-elderly and elderly.

Positive findings were also outlined in a recent study undertaken on behalf of the Department of Health in Australia (Provider and consumer research regarding recent and future changes in home care, 2017) that noted benefits in terms of:

- allowing individuals to control the type and nature of care they receive;

- flexibility for consumers, due to the portability of funding;
- better supply of care and reduced waiting times;
- increased quality of service and value for money due to competitive forces in the market; and
- access to a greater range, and more affordable services.

Some of the personal stories of people who now have choice and control over their supports paint a picture and bring to life the outcomes that be generated. People like Kyle Smith, a 24-year-old from Beaudesert (in Australia) with Autism who is now setting up his own small delivery service of fruit and veggies. As his mother said in a recent Beaudesert newspaper interview:

"We are paving the way for Kyle's future to be about how he can contribute to the community rather than how his disability limits his experience in the community."

Creating positive impacts on service providers

The impacts are not felt only at the client level, but also the service providers. Providers can focus on improving their value proposition, as their success is directly related to the extent to which they are meeting consumers' needs and preferences. They could also:

- Develop their services to deliver the best outcomes for consumers – not just follow some prescribed guidelines.
- Change the shape of the provider market by lifting the standards of service delivery and potentially forcing poor quality service providers out of the delivery system.
- Continuously innovate to create higher-quality options that clients want.

These are only some of the benefits. However, like all transformation initiatives, not everyone is a winner and

service providers will require support and assistance during any change to funding. There are examples of capacity building funds being implemented to assist providers when these types of reforms have been delivered in other countries.

Can it really be done in Canada

Absolutely it can. The change agenda in human and social services across Canada presents the perfect opportunity to move towards a new way of providing services to those most vulnerable in the country and empowering people to control their support.

It isn't an easy transition and the implementation is difficult, but there are contemporary examples to learn from, such as:

- Investing in transition and implementation – whatever you think transition and implementation take in terms of time, energy and cost, double it!
- Co-design with clients and providers – who better to help design, test, and validate a new way of doing things than those who already experiencing some of the current frustrations!
- Failure is not a dirty word – it allows you to succeed!
- Be transparent, be transparent, be transparent – I cannot emphasize this enough!

There is no doubt there is an appetite for these types of reforms. In fact, there are examples already in Canada of direct client funding (think BC Choices for Support in Independent Living, the Alberta Self-Managed Care Program or the Ontario Passport Program), but a more systemic view (or, dare I say it, national?!?!) might put the words "transformation", "modernization", and "integration" into sharp focus.

Modernization is but only one brave decision-maker away.

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