

# Brief reflections on Public Private Partnership from a delivery perspective

Mark Bassett

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- **UK Department of Health** – Responsible for policy on the independent healthcare sector (including implications of PPP) and advisor to Office of Fair Trading competition panels.
- **UK Department of Health** – Support to Ministers re the NHS South Thames Region (8 million people) (Focused on NHS Chairmen and Members of Parliament)
- **Bupa Group** – Group/Global Director of Public Policy
- **World Bank Group** – Senior Health Specialist, iFHP/Global Health Insurance Fellow and Consultant – working with Dr Preker, including in IR Iran.
- **World Health Organisation, EMRO** – Consultant re health system financing, system governance, PPP and hospitals corporatisation; in IR Iran and Sudan.
- **KSA Ministry of Health, Vision Realisation Office** – Co-author of KSA Health Sector Transformation Strategy

# Adler (2001) – Hierarchy, Markets and Networks

- **Hierarchy** enables control by using formal authority as a means of coordination, but can weaken collaboration and lateral innovation.
- **Markets** rely on price to co-ordinate supply and demand and promote flexibility, but can corrode trust and undermine relations that support knowledge sharing and equity.
- **Networks** co-ordinate on the basis of trust and promote shared knowledge generation, but can become dysfunctional by allowing complacency or exclusivity on the basis of familiarity.

# Taylor (2022) – Coordination Theory

Balancing:

- Authority (and Technocratic solutions) (Hierarchy)
- Values and belonging (Networks and communities)
- Individual Aspiration (Markets)
- And dispelling Fatalism

# Pre-requisites for successful PPP

There is no invisible secret to the success of PPP. The benefits of PPP need to be tangible, transparent and recognizable, and accrue to both sides. Ideally all the benefits are also clearly measurable.

The benefits of using the non government sector to provide public services might be:

- Benefits of scope or scale
- Access to skilled manpower
- Access to investment capital
- Access to a technology or technologies
- Access to a network
- Risk transfer (possibly reinforced by insurance and re-insurance)
- Benefits of time, quality or cost over benefits of public sector resilience and organisational capability and memory

# Bibliography

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