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Ethical standards for providers of public services

Qualitative research with stakeholders and general public

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Summary

1 Summary

In January 2014, the Committee on Standards in Public Life (CSPL) commissioned Ipsos MORI to carry out research into public and stakeholder views with regard to what ethical standards providers of publicly funded services should conform to, and how closely they relate to the Seven Principles of Public Life.

1.1 Project design

- The first stage encompassed 15 in-depth telephone interviews with commissioners, providers and individuals from national representative organisations. Stakeholders reflected on what ethical standards providers should conform to, and how to achieve this.
- The second stage involved six evening discussion groups with members of the general public, lasting 90 minutes, in three locations (Leeds, London, and Nottingham). Participants discussed what ethical standards should be met by those delivering public services.

1.2 Public and stakeholder views of ethical standards and Seven Principles of Public Life

The research revealed that public and stakeholder views of ethical standards closely relate to the Seven Principles of Public Life. The key points to consider are summarised below.

- The public did not use exactly the same terminology. Many of the principles were touched on, with possible exception of Leadership which was not raised spontaneously but resonated when prompted.
- Equally stakeholders also touched on many of the principles when discussing ethical standards. However, in some cases interpretations differed from those of the Committee. Also, many were unsure how to contract for and monitor value based principles.

Seven		
Principles of Public Life	Public's Ethical Standards	Stakeholder's Ethical Standards
Selflessness Act solely in terms of the public interest	The focus was on providing a good service and putting the service user at the heart of decisions, which could be considered part of selflessness.	Personalisation and quality were seen as proxy for selflessness by many. Some were unsure how selflessness could be applied to all providers although most concluded that the public interest could be met so long as providers delivered user-centred services.
Integrity and Objectivity Not taking bribes, or personal gains Not influencing others inappropriately Fairness and impartiality in decision making	Most aspects of integrity and objectivity were touched on spontaneously in discussions. People expect that providers would 'follow rules and regulations' and adhere to fair procurement processes. The notion of conflict of interest was not raised spontaneously although people felt it was important when prompted.	The term impartiality was used more than integrity or objectivity. Some linked objectivity with impartiality, but typically in terms of tendering rather than delivery. Commissioners mentioned the importance of drawing on evidence so they are capable of drafting tender specification based on evidence of need. They also saw the importance of identifying any conflict of interest and acting in an appropriate manner which relates to the Committee's definition of objectivity.
Openness Be open as possible about all the decisions and actions that they take	Providers should explain their reasons for their actions. Openness was very important and all used this terminology. The other term commonly used was 'responsibility' i.e. that providers should take responsibility for their actions.	Openness was typically related to financial openness although many were concerned that asking providers to conform to an open book policy was a fairly limited indicator of openness. Also, there was concern that not all commissioners were consistent in asking for financial information even where a provider had given them permission to do so. Some described a broader definition of openness that involves incorporating the views of users in the design and delivery of public services. It was felt that better use of user satisfaction data and user

		complaints would provide a more accurate and reliable picture.
Accountability Accountable to the public Must submit themselves to scrutiny	As with openness, accountability maps closely onto the public views of what ethical standards would look like. The idea of external scrutiny was seen as very important.	Commissioners reported it was easier to identify accountability than some of the other Seven Principles of Public Life as commissioners and providers have a shared understanding of what accountability is and how this can be proved.
Honesty Holder of public office should be truthful	The public felt this was very important. It was raised spontaneously relating to two situations: honesty about problems and how they would be resolved (linked to openness and accountability) and also honesty with individuals about their circumstances and how to get the best out of a service.	Honesty and integrity were closely related to the views of stakeholders when prompted to think about ethical standards as they spontaneously talked about good conduct (acting within law, having right values and culture etc.) and impartiality. Ultimately however many commissioners were unsure how to contract for honesty and integrity, beyond looking at previous experience.
Leadership Exhibit the Principles of Public Life at work Challenge those who don't	While not explicit in the public discussion, most were in agreement that the values they expected would not be delivered unless senior management showed that they were important.	Commissioners thought there is an increasing focus on leadership, but this was mostly in terms of their ability to deliver services in accordance with their contractual obligations. Commissioners said they also make value judgements about leaders to get a 'feel' for desired values through dialogue and relationships.

There were also a number of things that the public and stakeholders thought were important with regard to public services, which they felt were not captured in the Seven Principles of Public Life. Specifically, the public felt that good outcomes and quality of the user-provider interaction (e.g. respectful and empathetic staff) were crucial in ethical public service delivery. Stakeholders explained that their main emphasis was contracting for outcomes (rather than processes), ensuring value for money for the taxpayer, and measuring provider performance.

1.3 The public's view of ensuring ethical standards are met

The public were spontaneously focussed on punitive measures as they felt these would deter providers from being unethical.

- It was felt that barring 'unethical' providers from future competition would demonstrate clearly the importance of always upholding high ethical standards. Financial penalties for underperformance on ethical standards were also suggested.
- Others felt an on-going dialogue between those who commission and evaluate service provision, and providers, might be a more positive way to coach providers to have a shared understanding.

In addition to ideas raised spontaneously, participants were also positive about suggested measures, namely:

- Publishing a code of conduct/ethical standards might encourage providers to up their game and compete on achieving high levels of compliance.
- Training for providers was seen to be helpful to ensure that organisations understood ethical standards in public service delivery.
- Increased audits and monitoring were seen to give reassurance that ethical standards were being considered at all levels of an organisation.

1.4 Stakeholder's view of ensuring ethical standards are explicit in contracts and embedded in provision

Commissioners do not necessarily articulate ethical standards to providers explicitly. In addition, they believe there are limitations in terms of what the tendering process and existing contractual mechanisms can prove about the manner in which provision is delivered. Therefore, if ethical standards are to become explicit then commissioners require help and support. Their ideas are summarised below.

- Training co-delivered by commissioners and experts in ethical standards in public services could help establish benchmarks and indicators which commissioners could use to articulate ethical standards.
- There was appetite for dissemination of proven examples of providers having been encouraged to conform to ethical standards in the tendering process and subsequently in service provision.

• Commissioners want examples of case studies and/or scenarios which they can use in the tendering process so that providers tailor their tender response and provision accordingly.

Ultimately it was felt these measures would stimulate an on-going dialogue between commissioners and providers with regard to how services ought to be delivered. Practical advice such as examples of ethical standards in service delivery would also allow commissioners to identify easily instances of failure to meet ethical standards and would empower them to challenge providers to take corrective action.

Introduction

2 Introduction

In January 2014, the Committee on Standards in Public Life (CSPL) commissioned Ipsos MORI to carry out research into public and stakeholder views with regard to what ethical standards providers of publicly funded services should conform to, and how closely they relate to the Seven Principles of Public Life¹. The findings presented in this report will feed into any future review by the Committee, alongside evidence from other sources.

2.1 Background

The Committee on Standards in Public Life is an independent body concerned with promoting high ethical standards in public life. It is an advisory Non-Departmental Body (NDPB) sponsored by the Cabinet Office.

A triennial review² of the Committee was carried out in 2013, the report of which was published by the Government in February 2013. As a result, on 5 February 2013, the terms of reference of the Committee were clarified in two respects: '...in future the Committee should not inquire into matters relating to the devolved legislatures and governments except with the agreement of those bodies' and '...the Committee's remit to examine "standards of conduct of all holders of public office" [encompasses] all those involved in the delivery of public services, not solely those appointed or elected to public office.'

2.1.1 What is the ethical risk in the delivery of public services by non-public sector bodies?

The Committee believes a significant ethical risk stems from the introduction of a wide range of new ways of delivering public services, currently being driven by a combination of political philosophy and economic pressure. These new ways of delivering public services include clinical commissioning groups, elected mayors and police and crime commissioners, academy schools and private, voluntary sector, mutual or citizen-led provision in areas ranging from prisons to hospitals, social housing and libraries. While the Committee does not think that organisations and individuals who have not previously delivered public services will behave better or worse than traditional public servants, it does expect some will face ethical dilemmas of a kind they may not previously have encountered. For example, private sector companies involved in decisions about how they meet the interests of shareholders while meeting those of servicer users.

¹ The Seven Principles of Public Life apply to anyone who works as a public office holder. They are: selflessness, integrity, objectivity, accountability, openness, honesty, leadership.

 $[\]label{lem:https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/80189/Triennial_Review_of_CSPL_Dec-2012.pdf$

2.1.2 Why do ethical standards matter in new models of public service delivery?

The Committee's fourteenth report entitled Standards Matter³ referred to ethical risks being created by the development of new models of service delivery. The Committee was concerned that there is a growing area of ambiguity as a result of service provision contracted out to non-public sector organisations and believe that the ethical standards captured by the Seven Principles should also apply to such organisations. It is the view of the Committee that however public services are designed, commissioned and delivered, structures must be in place to promote the right ethical behaviour.

2.2 Objectives

In this context, the Committee sought to understand better the views of the public and stakeholders with regard to the ethical standards that non-public sector providers should conform to, how closely these relate to the Seven Principles of Public Life, and how they should be met.

The key research questions in the stakeholder phase were:

- Identify the extent to which commissioners expect providers to conform to ethical standards.
- Understand what ethical standards influence the commissioning of public services through non-public sector organisations.
- Identify the factors that encourage the embedding of ethical standards in the design and delivery of publicly funded services.
- Establish what mechanisms ensure ethical standards are met.

The key research questions in the general public phase were:

- The public's expectations of non-public sector organisations providing services for citizens.
- How the public view the different types of organisations providing publicly funded services.
- What ethical standards would they expect these organisations conform to?
- To what extent do these relate to the seven Principles of Public Life?
- How should these ethical standards be met?

³ http://www.public-standards.gov.uk/wp-content/uploads/2012/11/9294-2900447-TSO-Standard-Matters-ACCESSIBLE.pdf

2.3 Methodology

A qualitative methodology was used to enable a detailed understanding of views and expectations of stakeholders and the general public.

Stakeholder stage

The stakeholder stage encompassed 15 in-depth interviews conducted by telephone with key stakeholders, taking approximately 45 minutes. These interviews allowed stakeholders enough time to express their views about what ethical standards providers should conform to and reflect upon their application across all provider types.

The general public stage

The second stage involved six evening discussion groups composed of 8-10 members of the general public. The ninety minute sessions allowed participants time to express their views about public services and to discuss what ethical standards they expect providers of publicly funded services to conform to. It was evident in the pilot discussion group that 'ethical standards' is not terminology the general public are familiar with. As a result, the later discussions were framed in terms of what 'code of conduct' providers of publicly funded services should conform to, as this was language participants used in the pilot.

The public were shown stimulus which gave them information about the increasing role of non-public sector organisations in the delivery of public services and some examples of the service areas in which this is taking place. This stimulus served two purposes. First, it encouraged the public to think about public services through the lens of non-public sector delivery; and second, it also helped them to think about potentially less familiar services being delivered by non-public sector bodies e.g. probation services. The public were also shown a brief description of the Seven Principles of Public Life which allowed them to engage in a discussion on uniform application across providers in all sectors. The research materials – including stimuli shown to the general public, and stakeholder and public discussion guides – are appended.

2.4 Interpretation of findings

It is important to note that qualitative research approaches are used to shed light on the *range* of views people hold and *why* people hold particular views. It is not designed to show *how many* people hold those views. The research is intended to be illustrative rather than statistically reliable and, as such, does not permit conclusions to be drawn about the extent to which something is happening. Where it is necessary for proper interpretation to indicate either a common or outlier view, we have used indicative language like 'many' and 'a handful'. As this is qualitative research, these proportions should be considered indicative, rather than exact.

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Throughout the report, verbatim comments have been included to illustrate particular viewpoints. Where this is the case, it is important to remember that the views expressed do not always represent the views of all participants. In general, however, verbatim comments have been included to illustrate where there was a particular strength of feeling about a particular topic.



3 Public views

This chapter outlines public responses to the concept of ethical standards in the provision of public services.

3.1 Context

3.1.1 Public understanding of ethical standards

As revealed in other qualitative research⁴, almost all participants had difficulty engaging with the concept of ethical standards at first. While many responded positively to the idea of providers conforming to ethical standards, few suggested it spontaneously and many found it difficult to define ethical standards. Indeed, even those who did bring up the subject of ethics struggled to give examples.

When prompted to think about ethical standards or a code of conduct, most people initially thought of rules and regulations that providers might have to conform to such as health and safety procedures and CRB/DBS checks. Some groups associated ethics with fair treatment and pay for staff, or maintaining high environmental standards. While most did not think these things were necessarily the same or equivalent to ethical standards, the discussion demonstrates how difficult it can be for the public to engage in a conversation about ethical standards.

"It's a confusing term, ethical."

Nottingham, 36-60, ABC1.

3.1.2 Public perceptions of the public, private and voluntary sectors

People tended to have difficulty understanding how non-public sector organisations would provide public services tailored around the individual despite saying they were aware of private and voluntary sector organisations delivering public services. For example, while people were relatively familiar with the idea of private companies providing transport services, they had more difficulty understanding that NHS services could be contracted out to private providers. Frequently they conflated this with their understanding that NHS staff can also see patients privately.

Although people had views on the relative merits of different sectors providing public services, overall most felt initially that the same standards should be upheld by any organisation providing public services. This is discussed further in section 3.4.

⁴ http://the-sra.org.uk/files-presentations/seven-rspl.pdf

3.1.3 Personal experience of service provision

The way that participants viewed different types of provider organisations was often influenced by their own experience of interacting with frontline staff. Often people made generalisations about the level and quality of service provision from different service providers and different sectors based on a small number of interactions. For some people, a previous negative experience led them to suggest principles which they thought might address the bad experience that they had encountered. However, a few believed that organisations should not be judged on a handful of instances of poor service.

Where people did not have personal experience, or where that experience was positive, word-of-mouth also appeared to influence the views of participants towards different public service providers, and the relative importance they consequently placed on different ethical standards.

The majority of examples that the public used spontaneously when discussing public services related to health and social care, perhaps because this is one of the most commonly used services. However, moderators ensured throughout the groups that people also considered other services such as probation and housing services to ensure they considered a wide range of provider-user interactions.

3.1.4 The influence of the media

High profile failings involving public services (e.g. the NHS and local government) and private companies (e.g. the banking crisis and security firm G4S) have resulted in a lack of confidence in organisations among some members of the public. The media's portrayal of such events has had an influence on the public's perception of how service providers should be expected to act. Many felt that not enough practitioners and organisations publicly owned up to their mistakes or took responsibility for their actions if things went wrong, and there was demand for increased scrutiny of services as well as those organisations commissioned to deliver them.

3.2 What qualities are important in public service delivery?

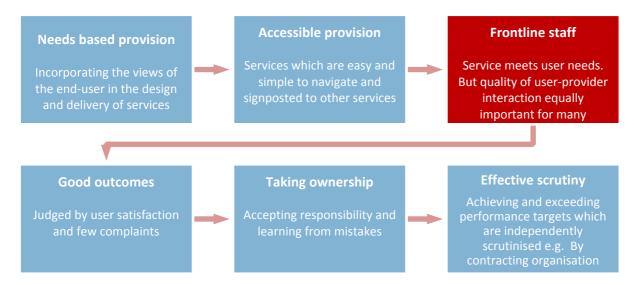
This section outlines what qualities or standards the public spontaneously believe are important in public service delivery. To help people think about ethical standards, moderators also prompted for views on what 'code of conduct' those delivering public services should follow. The chart⁵ below outlines the range of responses people gave. Overall participants were most concerned with their interactions with practitioners, and the quality of the outcomes. While the public did not spontaneously explicitly refer to the term

⁵ While no one participant described the entire process outlined in the chart it does illustrate the range of range of responses people gave when asked what qualities are important in public service delivery.

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"ethical standard" or "the principles of public life" the idea of some aspects of service delivery conforming to ethical behaviour was top of mind.

Table 3.1 – Expected standards in publicly funded service provision



3.2.1 Needs based provision

The public felt that for service provision to be effective it must take the needs of the end-user into account. People believed the user's needs within the scope of a given service (e.g. tailoring medical care to specific health requirements or providing a suitable housing solution), should be a priority. Most thought that providers should be aware of the range of needs, and should be able to cater to a variety of different people. However, a few participants thought it could be challenging balancing the needs of each user against the needs of many, and were concerned about the practical and financial implications of tailoring provision to the needs of individual service users.

Some thought it was important to ensure that practitioners would talk openly with service users, and wanted them to give truthful, impartial advice. There was a desire amongst some participants that they should be able to make informed decisions about their lives, in particular with regard to healthcare choices, and they thought that they should be able to trust practitioners to guide them. There was also an expectation that service providers should work hard and put the user's needs first.

"They (providers) should have end users best interests in mind." London, 18-35, ABC1.

3.2.2 Accessible provision

Accessibility was raised in four ways. Firstly, the public thought service providers should offer open access to all, which was equal and non-discriminatory. A commonly shared view was that no one should be prejudged, nor denied access to services because of their background or social situation.

"There's something more or less absent within social housing, the concept of equality... we all have similar needs, we all need a roof over our heads."

London, 36-60, C2DE.

Others discussed the importance of diversity. They wanted practitioners to be aware of cultural differences and for services to accommodate the beliefs and practices of different communities. Language ability was raised by a few as an important aspect of provision, as was physical access to services for the disabled. Others mentioned the need for providers to be more proactive in widening participation and getting services to hard-to-reach individuals and communities, especially those who are vulnerable.

The third aspect of accessibility related to the structure and integration of public service organisations. The public felt that getting access to a particular service or advice and knowledge from a practitioner can be difficult. Participants felt that all staff, regardless of their role or seniority, should be well trained and there should be a greater awareness of which departments within their organisation perform different functions. This was so that when the public access a service they are assisted quickly and efficiently, rather than left with the sense of having to chase up their queries.

"They need to be knowledgeable... if you go somewhere and you need help, you need somebody who will give you the right information, they need the right information."

London, 18-35, ABC1.

The final issue under accessibility was that many services are migrating online, and this can cause access problems for those either without a computer or without IT skills. This led to concerns that it may exclude certain sections of society who are more reliant on traditional forms of access.

3.2.3 Frontline staff

There were three aspects relating to frontline staff which were important to the public and which they highlighted as part of the 'code of conduct' service providers should follow: whether their needs were met, the manner in which they were met, and whether they were met with integrity.

In order for a public service to be good, people thought that it was necessary for staff to be well trained, and to keep up-to-date with the latest developments and practices in their field. A few participants believed that qualifications would have the effect of standardising practices across services, and this would mean that the public could be confident knowing that they would receive the same level of treatment and expertise from all individuals. Some described the need for professionalism. This involved maintaining an appropriate relationship with the user and delivering effectively the responsibilities of their role.

The second expectation of frontline staff was focused on the quality of the interaction with the service user – most simply described this as good customer service. They wanted people delivering a service to see it through the eyes of the service user. In particular, the practitioner's manner was often discussed. People felt that people delivering public services should be caring and empathetic and should not speak down to people, ignore them or make them feel inadequate. Examples of this were given across a range of services including health and housing. When prompted, some said that the user-provider interaction was also important in delivering probation services, so concluded that these values were necessary across a wide range of public services.

"My daughter who took me (to the doctor) for my foot, they didn't talk to me, they talked to them, my daughter said 'you can talk to her she's my mam, she's the one who's ill."

Leeds, 61+, ABC1.

Integrity was also important for the public; they wanted frontline staff to 'play by the rules'. There was mention of providers not being corrupt and it was expected that they must act within the law. There was also a commonly held view that in order to give the best service to end users, frontline staff need to be passionate about their jobs.

3.2.4 Good outcomes

User satisfaction was suggested as an effective means of judging the performance of organisations and individuals responsible for delivering services. For many, it was important that the views of users shaped the delivery of services. They also wanted customer satisfaction data to be collected and monitored to ensure that good outcomes were being achieved. They thought that there was value in having an effective complaints procedure, and wanted to be able to give feedback to organisations easily and for this to be acted on.

3.2.5 Taking ownership

A key expectation was that those who deliver public services should take responsibility when things go wrong. The public generally said they could understand that mistakes will sometimes happen, but felt that providers should be forthcoming in admitting their mistakes, rather than trying to conceal any problems.

"People get frustrated that there is a lack of accountability, there was a story about some NHS IT system which was scrapped, but no one stood up to take to blame. It was even more frustrating because we want to know who took responsibility for it."

London, 18-35, ABC1.

People said they have grown tired of the use of clichés such as "lessons have been learnt", which participants felt were insincere. They wanted providers to be more proactive in putting things right and making amends for mistakes, rather than offering empty promises.

"The public want human beings, if these sectors are truthful we take it on the chin. It's when they start lying, not delivering on their promises. It takes a bigger person to own up; you have more respect if you own up. If they provided a solution, that would work much better."

London, 18-35, ABC1.

In contrast to the views outlined above, which suggest the public would give people leeway if providers admitted their mistakes, the view was also expressed that if things went very wrong then someone should take the blame. As introduced in section 3.1.4, some perceived providers in different sectors as not dealing adequately with poor performance, and not imposing proper punishments when they were deserved. It was felt that there should be more significant penalties for those who are not performing as expected, which would be guided by end user's experiences.

3.2.6 Effective scrutiny

The public often mentioned the importance of scrutiny, and the need for public services to be reviewed. Some talked about implementing clear targets and standards which all providers would be expected to achieve, making it easier to see whether they were failing, achieving or exceeding expectations. Typically people expected that the standards would reflect the minimum expectation of service users, and that providers should be expecting to exceed them if delivering well.

People felt that all providers should be subject to some form of assessment, and that all should be scrutinised. Generally, most felt that regulation would be the most effective way of scrutinising public service providers, ensuring the standards the public expected were upheld. Ofsted reports were mentioned by some as a good way of measuring how schools were performing, and some suggested they should be used as a template for assessing other public services and provider-types.

Which body or bodies would be responsible for this regulation was not clearly identified by the public. Independent regulators were often mentioned, however, there was no consensus on what form this should take.

3.3 Ethical Standards and the Principles of Public Life

The table below compares the public's list of ethical standards with the Seven Principles of Public Life. It considers what similarities and differences exist between the two lists, and how well they map to one another. While the public did not use exactly the same terminology, many of the principles were touched on, with possible exception of Leadership which was not raised spontaneously, but which resonated when prompted.

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Table 3.2 – Comparison of the public's Ethical Standards and the Principles of Public Life

Principles of Public Life	Public's Ethical Standards
Selflessness • Act solely in terms of the public interest	The public focus was on providing a good service and putting the service user at the heart of decisions, which could be considered part of selflessness. However, selflessness was not explicitly mentioned in spontaneous discussion of the values expected from public services.
 Not taking bribes, or personal gains Not influencing others inappropriately Fairness and impartiality in decision making 	Most aspects of integrity and objectivity were touched on spontaneously in discussions. For example, people discussed the expectation that staff would 'follow rules and regulations' and one group mentioned the need to follow fair procurement processes. The notion of conflicts of interest was not raised spontaneously although people felt it was important when prompted.
Be open as possible about all the decisions and actions that they take	The need for providers to explain their reasons for their actions was discussed extensively by participants as outlined above. All thought that being open was very important and used this terminology. The other term commonly used was 'responsibility' i.e. that providers should take responsibility for their actions.
Accountability Accountable to the public Must submit themselves to scrutiny	As with openness, accountability maps closely onto the public views of what a code of conduct would look like. The idea of external scrutiny was seen as very important.
HonestyHolder of public office should be	The public felt this was very important. It was raised spontaneously relating to two situations: honesty about problems and how they would be resolved (linked to openness

truthful	and accountability) and also honesty with individuals about their circumstances and how to get the best out of a service.
 Exhibit the principles of public life at work Challenge those who don't, and actively support the seven principles 	While not explicit in the public discussion, most were in agreement that the values they expected would not be delivered unless senior management showed that they were important.

The main area of public interest not mapped to the Seven Principles of Public Life was accessibility (outlined in section 3.2.2). Also, the important of achieving good outcomes is not explicit in the principles but was very important for the public. The Seven Principles identify procedural standards, whereas these concerns relate more to outcomes – however some of the concerns about accessibility were concerns about non-discrimination and clarity about eligibility which could be considered ethical standards.

3.4 The current reality - room for improvement

3.4.1 Overall appetite for uniformity in standards

People tended to believe that all practitioners and organisations providing public services should conform to the same ethical standards. However, this was not an issue they had given much thought to prior to the discussion. Their instinct was that all providers of public services should be the same, and that therefore the ethical standards each must comply with should be the same.

"If it's tax-payers money, the principles and the guidance and all providers should follow them."

Nottingham, 36-60, ABC1.

People who appeared to have a more nuanced understanding of the different sectors, were more inclined to consider a varied set of standards, taking into account the different characteristics of each sector. In particular, some felt that a requirement for the disclosure of financial details or having an expectation of selflessness could be detrimental to private organisations.

"Private companies don't have to disclose accounts to the public, there's no justification to give out commercially sensitive information. Where public money is involved they (providers) are accountable to us as we are providing the money, if they're private then they're only accountable to investors."

Nottingham, 61+, C2DE.

However, for some, this did not mean ethical standards should not apply, but that the way they are implemented should be different. For example, in the case of financial details they suggested it would be appropriate for an official managing the contract to have full clarity on costs, even if this was not put into the public domain for competitors to see.

3.4.2 The advantages and disadvantages of uniformity

People reflected on the advantages and disadvantages of uniform application of ethical standards, regardless of sector. These are summarised in the table below and then discussed in more detail.

Table 3.3 – Advantages and disadvantages of equal application of ethical standards

Advantages of equal application	Concerns about equal application
Drive up performance and user experience	Not sure if can be achieved due to different values/motivations
Users can hold providers to account (if they know ethical standards exist)	Additional ethical requirements might lead to higher delivery costs
Potentially creates space for new 'ethical' providers to enter market	If led to fewer providers in market that could reduce competition

People who felt that ethical standards could drive up performance and user experience often were referring to their own principle of listening to the customer and providing a user-centric service. They felt if providers complied with this then their experiences would be improved.

Some people thought that if a uniform set of ethical standards was published, people could use these to hold providers to account. They felt it would be more straightforward to understand if providers of public services all had the same ethical standards, regardless of sector. However, not many were sure that they would actually follow-through and check if, for example, providers were indeed acting openly.

There was some appetite for encouraging more providers to be involved in providing services, so that it would offer the user more choice. Some felt that by creating an opportunity to compete on ethical behaviour this could encourage more entrants to the market and would be a good thing. However, others were concerned that it could exclude some current providers if identified as being unethical, and that this might have a negative impact on the choice available to service users.

Other reasons why people did not think equal application of ethical standards should apply concerned the different motivations and values of providers. For example, they felt that charities and private sector companies often have their own vision and values and some were unclear what would happen if the two sets of values were contradictory. A specific example was selflessness, which some thought could be in direct conflict with a private company's legal obligation to maximise shareholder value.

"If you are a private company you have a legal obligation to put shareholder's interest first."

Nottingham, 35-60, ABC1.

Some felt that if additional requirements were added to contracts this could lead to higher priced contracts as providers would need to cover their costs. After consideration, most remained satisfied that a 'one-size-fits-all' approach would be best. They felt it would offer the most consistency and would be easiest for the public to understand.

3.4.3 Areas for improvement

Views of how well organisations providing public services currently perform with relation to the ethical standards varied. In particular, people felt that levels of accountability and openness fall a long way short of what they expect. They expressed significant concerns about malpractice and misrepresentation of outcomes. There was a demand for closer and more effective scrutiny of all providers, regardless of sector, to ensure those delivering services are held to account if they do not meet user expectations.

Typically participants felt less strongly about the other principles. They felt that honesty, integrity and objectivity should be expected but that, on the whole, most people would naturally live up to these standards as a matter of course. They suggested there is always room for improvement, but did not identify this as an area of concern. Selflessness was also not a key concern but for different reasons: people were unsure how realistic it was to expect all people and organisations delivering public services to act in a selfless manner at all times. Consequently while they felt that it was nice to have, and something to strive for, it was perhaps less important to perform consistently highly on this measure, compared with the others.

3.5 How to ensure Ethical Standards are upheld

3.5.1 Spontaneous views on enforcing standards

While the public endorsed the overarching principles presented, they felt that many would be hard to 'live up to' and were unsure how they could be measured or enforced in practice. They had a number of specific concerns:

- Agreeing definitions: people felt that the principles could be interpreted
 in a range of ways, and that it would be hard to 'pin down' a single
 definition. As such they felt that interpretations would be likely to vary
 between and even within organisations and that it would be difficult to
 address this.
- Proving compliance: people were unsure how a person outside an organisation would know if the principles were being applied.
 Specifically, they were unsure what the indicators would be, or how 'compliance' would be measured.
- Visibility to user: although some felt that the absence of ethical standards might be apparent in the event of a problem with a service, they were unsure whether a user of a service would be aware of whether or not a provider was acting in an ethical manner.

If these challenges could be overcome people felt there were a number of ways that commissioners/contract managers could encourage providers to meet the standards. Spontaneously most of the measures suggested were punitive. However, each was perceived to have advantages and disadvantages.

Barring 'unethical' providers from future competition was an idea raised by a number of people. It was felt that this would deter providers from being unethical in delivery of current contracts, and would demonstrate clearly the importance of always upholding high ethical standards and make it clear that it was not just a 'nice to have'. However, there were concerns about this approach. In particular, that it could lead to gaps in service provision if a provider could not easily be replaced.

Some also suggested financial penalties for underperformance on ethical standards. Again the key benefit was seen to be that it would show organisations delivering the services that they should take the obligation seriously. However, some were concerned that if the services are paid for by the taxpayer then any fine would ultimately come out of the next contract and consequently in the long run it would cost taxpayers more.

On balance, some suggested that an ongoing dialogue between those who commission and evaluate service provision, and providers, would ensure that ethical standards are met. They felt this might be a more positive way to encourage providers to uphold high standards and coach providers to have a

shared understanding. However they had some concerns that if metrics were not agreed then it would be difficult to tell whether ethical standards were being upheld.

3.5.2 Prompted views on enforcing ethical standards

In addition to ideas raised spontaneously, participants were also asked to respond to a number of additional ideas for enforcing ethical standards. Overall they were positive about all the ideas suggested. Each is outlined below:

- Publishing a code of conduct: people were positive about this as they
 felt it would encourage providers to 'up their game' and compete on
 achieving high levels of compliance. Most said they would not personally
 look for the standards online, but that they would still want to know they
 were there and would be available if they looked for them.
- Training for providers: there was agreement that training provided by an expert in ethical standards would be helpful to ensure that organisations understood what was required and embedded ethical standards in delivery of services.
- Commissioner responsibility: in recognition of the fact that few felt they would personally have the time or necessary knowledge to hold providers to account, many thought that commissioners should take responsibility for ensuring standards were upheld. However, some had relatively limited confidence in the effectiveness of regulators or others monitoring services, largely as a result of high profile cases where regulators had not identified poor conduct. Some concluded that the Committee on Standards in Public Life is expert in ethical standards and therefore it should be responsible for ensuring ethical standards in service delivery are met.
- Increased audits and monitoring: both the idea of visiting organisations
 delivering public services more often, and the idea of strengthening
 auditing powers to give reassurance that ethical standards are being
 considered at all levels of an organisation were popular.

Many people felt that one key aspect of upholding standards was the use of user feedback and complaints to understand an organisation's attitudes towards its service users. They felt that scrutiny of this data should be a requirement for those commissioning services and monitoring their provision.



4 Stakeholder views

4.1 Context

This section briefly examines the key issues that stakeholders report encountering in the commissioning and provider landscape. It should be not be read as an exhaustive account of the myriad of issues surrounding new models of publicly funded service delivery, but provides context for the views of both commissioners and providers raised in subsequent sections.

4.1.1 Reducing costs while maintaining performance

Many stakeholders felt that new models of public service delivery had encouraged new ways of working which had brought about efficiency gains whilst maintaining performance levels required by commissioners.

"We've shifted the focus from something that was very arm's length to one that is much more pseudo contractual; and alongside that trust we have made substantial efficiency gains. Provider budgets have been reduced quite significantly but their performance has been maintained against those budget reductions."

However, there was concern that certain providers would "cut corners" or "deliver below par services" in order to achieve the value for money demanded by commissioners. Only a few felt austerity measures had had a significant effect on frontline services, although some felt a point has been reached beyond which it may not be possible to continue to meet user needs while reducing costs further.

4.1.2 Focus on payment by results

Payment by results as a methodology that underpins the payment of contracted out services was seen as a useful mechanism for transferring the "risk in delivering public services" to non-public sector providers. This type of contract was believed to better incentivise providers to meet levels of performance expected by commissioners.

In contrast, others were concerned that a reduced focus on process risked lowering the quality of service provision as they thought service delivery would come under less scrutiny provided the required outcome was met.

"I think most of what commissioners focus on is the delivery of the contract outcomes, so are we meeting the KPIs that are set within the business. So it's very much what we're doing rather than necessarily how we're doing it."

There was also concern that this type of contract would prompt providers to pursue only those contractual opportunities that are seen as most profitable. Consequently some felt this has the potential to result in provision gaps unless the public sector steps in.

4.1.3 Less transactional and more flexible contracts but increased complexity and uncertainty

The view that new models of public service delivery can allow greater flexibility was common among stakeholders. Partnerships involving providers from a variety of sectors were said to be particularity effective where they allow experts and specialists to work together to design and deliver services to deal with complex and varied user needs.

However, others felt that new entrants into certain service areas (e.g. probation) may not have the necessary experience of frontline delivery and therefore suggested standards may fall short despite a provider's best intentions to deliver services "in the right manner". There was concern that some commissioners may not be equipped to deal with the scale and size of complex new contracts, especially where they do not previously have a commissioning background.

4.1.4 Greater emphasis on transparency and accountability

The emergence of non-public sector providers delivering tax-payer funded services was thought to be driving a greater emphasis on transparency and accountability. Indeed stakeholders anticipate closer scrutiny as the public become better informed about non-public sector bodies delivering taxpayer funded services. Consequently, they spoke about an increasing emphasis on taking evidence-based decisions in case they are held to account, and others spoke of drawing on evidence of user need to increase the transparency of their decision-making.

"Transparency is not just about publishing information and data, it's much more about transparency of processes, so people know when decisions are going to be taken, know how they can get involved and you know, and there's the timescales."

While monitoring visits were often mentioned as a useful mechanism to evaluate service delivery, some felt the value of such visits might be constrained by a focus on financial auditing, which commissioners said left them less time to observe service delivery. Indeed a few stakeholders felt that without proper evaluation, monitoring visits had limited value in establishing what provision looks like from the users' perspective. Some suggested making better use of user satisfaction and complaint data.

"Paying attention to complaints is really important because that can tell you what the real experience of service users is. If you only pay attention to formal performance indicators and the financials then you're not listening to the people who are actually using the service. They can tell you whether your staff are behaving ethically and making sure you talk to service users and use things like complaints to see what's actually happening."

4.1.5 Focus on quantitative metrics to measure outcomes and impact

An increasing emphasis on outcome focussed contracts appears to have led to a monitoring requirement skewed towards quantitative measures.

"Rather than measuring inputs actually you move to outputs and outcomes. One of the things we introduced in the last five or so years is an outcome measure of reoffending rates by offenders... so we can actually look at how effective their interventions have been against the cohort of offenders that they worked with."

Commissioners appear to be comfortable communicating aspects of provision which can be measured (i.e. what is delivered). In contrast it was seen to be more challenging to articulate *how* provision should be delivered, not least because it is less tangible and open to interpretation. Equally a requirement on providers to prove impact tends to be seen through the lens of quantifiable measures. For example, commissioners suggested they are increasingly contracting provision that can contribute to "broader policy objectives" like economic growth. Only a few commissioners spoke about including a requirement for provision to contribute to less tangible outcomes like social value.

4.2 Prompted views on Ethical Standards

This section examines prompted stakeholder views of ethical standards with regard to the commissioning and provider landscape.

When stakeholders were prompted to think about ethical standards there were few explicit mentions of the Seven Principles of Public Life. Their responses are outlined below in order of the frequency of mentions in interviewing and strength of feeling amongst stakeholders.

4.2.1 Quality

Most stakeholders suggested that providing high quality services is an ethical requirement on individuals. While quality tended to mean different things to different stakeholders it was often associated with provision that meets the needs of users and provision that is delivered by staff who "do the right thing"

by users. For example, protecting and safeguarding the interests of services users.

"For me, ethics is very simple, it's just kind of doing the right things for the patients... I think you've got to do your best, to do what's right, what is the right thing to do"

Whether the user had had a good experience from their entire service interaction was also felt to be a strong indicator of quality. A few suggested high quality provision would be demonstrated by the continual improvement of services and increased user satisfaction.

4.2.2 Personalisation

Personalisation tended to be a term often used by stakeholders when describing ethical standards in public services but there was not a single view on what it is. Following analysis the responses can be grouped as follows:

- Tailoring services to the needs of an individual user many stakeholders believed that outcome focussed contracts better enabled providers to flex their provision around the needs of their users. Thus allowing them to deliver bespoke services for individuals with different needs. While others did not disagree they felt that providers needed to demonstrate they had spent enough time getting to know users to ensure their voice influences what is delivered.
- Incorporating the views of users in the design and delivery of public services – most commissioners considered effective public services to be those delivered by providers who listen to and take into account the views of users. Others suggested this could be challenging in certain sectors such as probation but nevertheless there was an expectation it should happen. A few commissioners were unsure how user designed services would work in practice in areas where it was necessary to align provision to national frameworks.
- The manner in which services users are treated by frontline staff –
 commissioners felt a crucial aspect of personalisation was ensuring
 users are treated in an appropriate manner by frontline staff regardless
 of sector. This tended to be frontline staff who are respectful,
 compassionate, and "have the right attitude" when interacting with
 users.

4.2.3 Transparency

As outlined in section 4.1.4 stakeholders saw an increasing need for transparency given the closer scrutiny of those who commission and those who deliver services. The term itself encompassed a variety of meanings.

A common view among commissioners was their expectation that providers should operate in a transparent manner. They mentioned things like declaring any conflicts of interest and providing an organisational track record of successful delivery of related services as well as identifying those who are to be involved in the management and delivery of provision having appropriate credentials.

Releasing information was another key aspect of transparency. Commissioners expect that providers will give accurate, reliable and complete information in accordance with their contractual obligations. However, some private sector providers thought the need to protect commercially sensitive information effectively prevents them from being as transparent as public sector providers.

"We run a commercial business, we do need to make profits, but we should be honest and clear around what it is that we are doing. I think the big things are more around sort of privacy of information and commercial sensitivities are the main areas where you would not wish to be open."

A final aspect of transparency viewed by stakeholders as important was making decisions around service provision.

4.2.4 Accountability and value for money

Accountability was frequently reported by commissioners and providers. It tended to be seen in financial terms because of the emphasis on provider and commissioners to demonstrate 'proper' use of and responsibility for taxpayer money.

"I think there are some basic things that I think the public would have really clear expectations and not wasting tax payers money, I think, it does come back to that. Behaving ethically is a way of making sure that you know you're not spending the taxpayer's money on things it shouldn't be spent on."

While commissioners were quite pragmatic in that they believed cases of financial misconduct and /or financial mis-management could be found among providers in all sectors, many thought that the "profit" motive added significance to accountability and financial scrutiny. Commissioners were keen to stress the rigour of their auditing checks while most providers were keen to state their accounting procedures were in accordance with open book policy. Indeed, the evidence suggests that ensuring value for money for the taxpayer is, in some cases, more important than how services are delivered.

4.2.5 Impartiality and fairness

There were few explicit mentions of objectivity and integrity. However, the importance of being impartial was raised and the way in which it was described does to some extent relate to the Seven Principles of Public Life. Impartiality was often described as providers and commissioners who act without bias in both the pre and post contracting stage.

"When I think of ethical I think of probity so I think of financial conduct being above board. I suppose I also think about how people are treated and probably the implication of fairness in things like supply chains as well."

However, some cautioned that it could become increasingly more challenging for those who deliver services to take impartial decisions as a result of the potential for conflict between the interests of shareholders and users. Fairness was another term used by most stakeholders. Again, it was something that was seen as important during the tendering process and continued to how decisions are made about the allocation of funds. It was also seen through the lens of service delivery as many spoke about the importance of people being treated fairly by frontline staff.

"This is all about probity and transparency and honesty so that anybody could see what you were doing and that there's an honest account of the decisions that you have made."

4.2.6 Conduct

The conduct of organisations and individuals delivering services was seen as important and - like the issues discussed above - there were multiple interpretations of what good conduct is. There was a common expectation that an organisation should act within the law, conform to regulatory and statutory guidelines and have the "right values and culture" with leaders and managers acting as exemplars.

"What we really want is somebody who is going to provide a good service who is absolutely respectful of saving a person's dignity and choices, that is far more important than (being) selfless."

In terms of the frontline, the expectation was that staff would assume a duty of care to all users and conform to an organisational code of conduct.

Additionally, stakeholders thought staff ought to be professional and have the 'right' attributes so that people are treated with dignity, honesty, and respect.

"I think providers have a duty of care to patients, telling people the truth about what they're delivering and not delivering and what

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they're... you know, telling people what they're actually doing about the areas of improvement."

4.3 Ethical Standards and the Principles of Public Life

The table below compares the stakeholder's list of ethical standards with the Seven Principles of Public Life. It considers what similarities and differences exist between the two lists, and how well they map to one another. While the stakeholders did not use exactly the same terminology, many of the principles were touched on, although in some cases interpretations differed from those of the Committee's.

Table 4.1 – Comparison of stakeholder's Ethical Standards and the Principles of Public Life

Principles of Public Life	Stakeholder's Ethical Standards
Act solely in terms of the public interest	Personalisation and quality were seen as proxy for selflessness by many. However, some were unsure how selflessness could be applied to the private sector because of shareholder interests, though on reflection some felt that not even public office holders would ever act solely in the public interest. However, most concluded that the public interest could be met so long as providers delivered a high level of customer service – for many this meant the provision of usercentred service.
 Not taking bribes, or personal gains Not influencing others inappropriately Fairness and impartiality in decision making 	Some linked objectivity with impartiality and fairness, but typically in terms of tendering rather than delivery. For example, many commissioners mentioned the importance of drawing on evidence so they are capable of drafting tender specification based on evidence of need. In the tendering process itself stakeholders acknowledged the importance of identifying any conflict of interest and acting in an appropriate manner which relates to the Committee's definition of objectivity.
Be open as possible about all	Openness was typically related to financial openness. However, many were concerned that asking providers to conform to an open book policy was a fairly limited indicator of

the decisions and actions that they take

openness. Even those providers who had signed up to an open policy book were said to sometimes cite commercial sensitivities when asked by commissioners to reveal detailed accounting information on publicly funded projects. Other stakeholders felt that not all commissioners were consistent in asking for or scrutinising financial information, even where a provider had given them permission to do so. Some felt this made the open book policy redundant while others felt it sent out a signal to providers that there is a lack of scrutiny.

Some said they thought there was perhaps too much emphasis placed on financial openness. They described a broader definition of openness that involves incorporating the views of users in the design and delivery of public services. It was felt that better use of user satisfaction data and user complaints would provide a more accurate and reliable picture of openness, although commissioners themselves were unsure if they had enough time and resource to scrutinise these data sources.

Accountability

- Accountable to the public
- Must submit themselves to scrutiny

Commissioners reported it was easier to identify accountability than some of the other Seven Principles of Public Life. This appears to be because commissioners and providers have a shared understanding of what accountability is and how this can be proved. Audit checks were viewed as a tried and tested mechanism for checking deliverables against payment milestones. What made it easy to judge was having knowledge of what evidence is required which in turn helps them to feel confident to challenge providers if it is missing.

Honesty

Holder of public office should be truthful

Honesty and integrity were closely related to the views of stakeholders when prompted to think about ethical standards e.g. conduct and impartiality. Ultimately however many commissioners were unsure how to contract for honesty and integrity.

Commissioners thought there is an increasing Leadership focus on leadership, but this was mostly in Exhibit the terms of their ability to deliver services in principles of public accordance with their contractual obligations. life at work Commissioners said they tended to ask themselves: does the named project manager Challenge those have the right credentials? Is there who don't, and appropriate governance in place? actively support Stakeholders also suggested different the seven aspects of leadership were becoming more principles important as the traditional transactional arrangement between provider and commissioners was being replaced with a situation which is built on trust and

relationships. Therefore, some commissioners said they have to make value judgements about leaders based on these interactions: To

organisation's values into service provision? Will this person lead by example and instil the

what extent will this person instil my

right values in frontline staff?

4.4 Ensuring Ethical Standards are met

4.4.1 What ethical standards do commissioners expect providers to conform to?

Although few stakeholders were aware of the Principles of Public Life, many commissioners thought them to be things which most providers will conform to. This view was based on the following:

• A belief that non-public sector providers will adopt a public sector ethos and deliver services focussed on the achievement of public good.

"I expect that the private sector will operate like the public sector - I do think there's a bit of rose tinted glasses on that."

 An expectation that providers will seek to understand and "buy-in to" the same values as the commissioning organisation. An assumption that most providers, regardless of sector, will conform to ethical standards simply because provision is tailored around people.

4.4.2 How ethical standards are contracted

Despite the common view that providers will, in most cases, conform to ethical standards the research has revealed that commissioners do not necessarily articulate these standards to providers.

"The public sector feel we have the right to beat private providers with this ethical stick and because of how we've approached this, we expect them to have adhered to this. How much we spend telling them that we expect them to adhere to ethical standards is an entirely different matter."

Indeed this finding is supported by the fact that stakeholders said that ethical standards are not explicit in contracts.

"We're submitting a serious number of bids to the public sector – about 1500 a year – and I'm asked about ethics about five times a year."

Before examining what stakeholders might need so that ethical standards are more explicit in contracts it is worth briefly outlining what information commissioners are using to make decisions. As outlined above, the focus is on contracting for outcomes and consequently processes are less of a focus. The key evidence commissioners look for in bids is:

- Track record of performance and credentials of personnel;
- Evidence of processes and procedures (e.g. whistleblowing, governance, open book policy); and
- Stated values of organisation.

Most acknowledged these measures are unable to prove the manner in which provision is going to be delivered. As a result, commissioners also tend to get a 'feel' for desired values through dialogue and relationships with providers. Commissioners were quick to point out that reliance on any one of these mechanisms would not in itself convince them that providers conform to ethical standards. However, if taken together then most believe ethical standards are embedded.

4.4.3 Help and support to empower commissioners to challenge providers

Many suggested that if the Committee wants ethical standards to be explicit in contracts then commissioners need support and guidance. Stakeholders identified several challenges at different stages of the tendering process where this could prove beneficial. These are summarised below.

Pre contacting stage

- Handling conflicting values and principles some believe there could be risk in asking contractors to align their longstanding values and principles with those of a commissioning organisation. They were concerned such a request could have a detrimental effect on the commissioner-provider relationship which in turn may have implications for service provision in a local community.
- Aligning financial levers with ethical standards in the absence of financial levers aligned to ethical standards it was felt that emphasis would continue to be put on contracting outcomes. Some suggested including ethical standards as part of the tender evaluation criteria so that it attracts equal consideration.
- Convincing providers of the value of ethical standards if ethical standards are explicitly written into tender specifications then they will take on added significance. It was also felt that a conversation on ethical standards would help to ensure there is a shared understanding of the importance of ethical standards.

Post contracting stage

 Monitoring ethical standards – without metrics and indicators most were unsure how to monitor ethical standards in service provision or how to monitor in a consistent manner.

"I think having those ethical principles articulated clearly states the premise, the context within what you want things doing but also provides a very clear remit to take action should things fall short."

- Enforcing 'grey' areas linked to the point above on monitoring, people
 felt that because ethical standards were open to interpretation it would
 be difficult to identify failure. Others were unsure what the triggers for
 punitive action might be.
- Using complaint and user satisfaction data more effectively given the reported issues associated with monitoring and enforcing ethical standards in service provision, evidence of user experience took on added significance for many. However, some were unsure if they had

the time and resource they felt would be needed to scrutinise these data sources.

4.4.4 Multi-pronged approach to help and support

Given the challenges of ensuring ethical standards are upheld in the pre and post contracting stages and the limitations of existing contractual mechanisms, stakeholders suggested that a multi-pronged approach of help and support is required. Their ideas are summarised below:

- Training there were a few suggestions for training sessions codelivered by commissioners and experts in ethical standards in public services. The purpose of which would be to co-create benchmarks and indicators which commissioners could use to communicate what ethical provision is.
- Dissemination there was some appetite for an event and/or thought leadership that shows proven examples of providers having been encouraged to conform to ethical standards in the tendering process and subsequently in service provision.
- Guidance many commissioners said they would want examples of case studies and/or scenarios which they can use in a tender specification so that providers are fully aware that ethical standards should be accounted for in a tender. One commissioner felt that a series of case studies based on different user scenarios in a range of service areas would help.



5 Conclusions

The research revealed that stakeholder prompted views of ethical standards in public service delivery relate closely to the Seven Principles of Public Life, but their main emphasis in commissioning appears to be on outcomes rather than the manner in which provision is delivered. This is because commissioners tend to see public services through the lens of performance measures and payment triggers. However, they do recognise the importance of user-centred services.

The public place equal emphasis on outcomes and the quality of the user-provider interaction yet there was mixed opinion on whether providers that achieve good outcomes would necessarily conform to high ethical standards. Despite this divergence of views, a key finding is that the public want those who deliver publicly funded services to be more closely scrutinised. This is for two reasons. First, there is a lack of confidence that providers will 'live up to' high ethical standards while maintaining high levels of performance. Second, they have become frustrated by the public service 'scandals' reported by the media, which some felt were due to a lack of 'proper 'scrutiny. That said, the public did not believe that failure to meet standards could ever be wholly eradicated. The public also want providers to take (and to be seen to take) responsibility for malpractice and misconduct in cases where it is identified, and to address problems quickly and effectively.

Commissioners are also pragmatic in that they believe 'unethical' behaviour can be found among all provider types (including public sector). However, there is concern that the profit motive and the requirement to maximise shareholder's dividend might increase the potential for non-public sector providers to cut corners thus lowering the quality of provision. Stakeholders expect those who commission and deliver services will come under closer scrutiny as the public becomes better informed about new models of public service delivery. However, some thought that providers may be less scrutinised if the required outcomes are met.

A key finding is that while commissioners and public recognise the importance of ethical standards, currently commissioners are not explicitly contracting for them. Commissioners expect that monitoring visits will 'pick up' unethical behaviours despite acknowledging monitoring tends to tell commissioners what is delivered rather than how services are delivered.

Furthermore, tender process requirements such as an organisation's stated policies and procedures are also considered to be a limited indicator of the manner in which services will be delivered. Indeed, there was appetite for better use of existing information such as complaint and user satisfaction data as it was felt this was strong evidence which could be used to identify a failure to meet ethical standards.

The limitations of existing mechanisms to contract for ethical standards is further exacerbated by that fact there is little consistency in terms of how ethical standards are understood. Therefore, commissioners require help and support so that ethical standards are more explicit in the commissioner and provider landscape.

Commissioners require expert advice on ethical standards in public service delivery so they can feel comfortable having a conversation about ethical standards with providers during the pre-contracting stage and when managing contracts. This confidence is likely to stimulate an on-going dialogue between commissioners and providers with regard to how services ought to be delivered. Commissioners also require practical advice such as examples of ethical standards in service delivery to enable them to identify instances of failure to meet ethical standards but also to empower them to challenge providers to take corrective action.

Appendix

6 Appendix

This appendix to the ethical standards for providers of public services report includes the following key documents:

- Note on recruitment
- Stakeholder discussion guides
- General public discussion guide
- Stimulus used in general public discussion groups

6.1 Recruitment

Discussion Groups

Participants were recruited by specialist qualitative Ipsos MORI recruiters. Recruitment was carried out face-to-face on the street. In each location (Nottingham, Leeds and London) 11 people were recruited to allow for some drop-out over the process. Quotas were set for gender, age, ethnicity, household composition, employment status, and household location (i.e. urban/suburban and rural) to ensure participation of individuals from a range of backgrounds, reflective of the areas they came from and of the broad diversity of the UK population. Participants received a financial incentive to encourage participation in the workshops.

Stakeholder interviews

Stakeholders were also recruited by specialist qualitative Ipsos MORI recruiters. The Committee on Standards in Public Life provided a list of stakeholders to be recruited for these interviews which was supplemented by Ipsos MORI desk research. Given the Committee's interest in public services which can be tailored around the needs of the end user, the sectors used to draw sample were Health, Justice, Local Government (the latter included stakeholders from both the education and social care sectors). Stakeholders were primarily commissioners working in these sectors though the research did involve several non-public sector providers and two national representative organisations.

6.2 Stakeholder discussion guides

Committee on Standards in Public Life
Ethical standards of behaviour in the commissioning and delivery of
publicly funded services
Commissioner Discussion Guide
FINAL

Background and objectives

The Committee on Standards in Public Life (CSPL) is the body charged with promoting ethical standards in public services. Its remit now applies to all public services, including those that are delivered by non-public sector bodies. The CSPL has commissioned Ipsos MORI to conduct qualitative research on ethical standards of behaviour in the commissioning and delivery of publicly funded services.

The research will involve 15 interviews with stakeholders involved in the commissioning and delivery of public services followed by six discussion groups with the public. The CSPL is particularly interested in services that can be tailored around the needs of individual "end-users". Therefore, the research will be conducted with stakeholders involved in the commissioning and delivery of services in health, justice and local government.

The interviews will identify what expectations stakeholders have of the ethical standards that service providers should confirm to and to what extent these are seen to relate to the seven principles of public life) and what mechanisms contractual or non-contractual are in place to ensure they are met.

The primary objective of the research is to better understand the expectations in terms of the ethical principles and standards that those commissioning services have of those in other sectors delivering public services. The CSPL also wishes to probe attitudes to the commissioning, procuring or contracting of public services and to identify safeguards that those commissioning and delivering public services believe are necessary to ensure that those ethical principles and standards are met.

Introduction and their role	10 mins
 Welcome and introduction Thank participant for taking part Introduce self, Ipsos MORI Introduce the topic and why we are talking to stakeholders 	Welcome: orientates interviewee, gets them prepared to take part in the interview
 Introduce CSPL and why they have commissioned the research Explain confidentiality and MRS guidelines What level of attribution would they like? Can we quote them directly, their organisation or do they want total anonymity? Role of Ipsos MORI – independent research organisation; gather all opinions; all opinions valid Get permission to digitally record – transcribe for quotes, no detailed attribution (unless request it) 	Outlines the 'rules' of the interview (including those we are required to tell them about under MRS and Data Protection Act guidelines) Explain the next steps (findings will help augment views from a variety of sources and other avenues of evidence that will feed into any future review by the Committee)
We understand your job title is [INSERT JOB TITLE], is that correct? IF NECESSARY: Can you explain in detail what your role involves: 1. Drafting contacts 2. Commissioning public services 3. Anything else? E.g. overseeing contract delivery What types of service are you involved in commissioning / procuring?	Moderator: ask participants to give a very detailed response about what they do as later we'll be asking how the ethical standards apply to what it is they do
If necessary, clarify that for this interview we are particularly interested in services with public-facing aspects (e.g. teaching, healthcare, probation, social care rather than cleaning, admin/finance, IT etc.) What, if anything, has changed in your time as someone responsible for commissioning and procuring publicly funded services? • How, if at all, has this impacted on your role? • How has this impacted on providers? PROBE: priorities, standards, delivery.	If participants mention issues like economic climate and new models of public service delivery ask about impact on provider behaviour BUT keep questioning high level at this stage.
Expectations of ethical standards in contracting / contracting public services	15 mins
What things do you think of when I mention ethical standards in publicly funded services? Why do you say that? What about when I mention the delivery of publicly funded services? PROBE ANY MENTIONS OF PROVIDER TYPE /OR SECTOR / MODEL OF SERVICE DELIVERY Still thinking about ethical standards, what are your expectations of providers? PROBE: the extent to which these expectations differ by sector /	Examines the expectations that commissioners have of provider's ethical standards providers

provider type. ASK FOR EXAMPLES

PROBE: the extent to which their expectations differ depending on if they are drafting contracts / commissioning services. Why?

Do you think other commissioners have similar expectations? Why do you say that?

IF NOT COVERED: What can you tell me about the seven principles of public life? (See right hand column for details.) What purpose do you think they serve? How important are they? For whom? ASK FOR EXAMPLES

To what extent do you expect providers to consider the seven principles of public life? How? Why do you say that?

Overall, how far do you think those commissioning or procuring public services feel they are accountable for the ethical standards of providers? Why do you say that?

Is there anything that would help commissioners feel more accountable? How would that help exactly?

Explores awareness and use of the seven principles.

The seven principles of public life are: selflessness, integrity, objectivity, accountability, openness, honesty, leadership.

3. Ensuring ethical standards are met

How much value, if any, do you think service providers place on ethical standards? Why do you say this?

In your view, would you say that providers are aware of ethical standards / principles of public life?

IF AWARE: Are some seen as more important than others? Which ones? Why? Do they instil desired behaviours in service providers? Can you give me any examples?

What one thing would make them more aware? What difference, if any, would that have? For whom?

Are there other mechanisms which are required to ensure those ethical standards are met?

ALLOW FOR SPONTANEOUS RESPONSE THEN PROBE WITH...

- Design, tendering, outcomes e.g. setting core priorities
- Contractual mechanisms e.g. contractual specification
- Non contractual mechanisms e.g. including examples of best practice

Are some mechanisms more effective than others? Under what conditions? E.g. provider / sector / model of service delivery?

Overall, to what extent do providers meet the ethical standards which you expect?

- What criteria do you use?
- Do you use it across all contracts? Why / why not?

What sorts of information do you ask for and monitor from service providers to assess if they are meeting the standards you expect? How useful is this information? Can you describe how you use it?

15 mins

Explores experiences, practicalities and knowledge of ensuring ethical standards are achieved.

How could commissioners/procurers make it in service providers' own interests to ensure the expected ethical standards are met? Probe: Financial incentives or penalties. Banning from competitions and political fallout when problems are found. By sharing intelligence about performance across	
departments.	
4. Summing up	5 mins
Overall, how can those who commission services assure themselves that the ethical standards providers write into their tenders will happen in reality?	
If you could ask the Committee for Standard in Public Life to do one thing for people responsible for commissioning public services from third parties what would it be?	
Are there any other issues you feel should be raised or any final comments you would like to add?	
THANK AND CLOSE	

Committee on Standards in Public Life
Ethical standards of behaviour in the commissioning and delivery of
publicly funded services
Provider Discussion Guide
FINAL

Background and objectives

The Committee on Standards in Public Life (CSPL) is the body charged with promoting ethical standards in public services. Its remit now applies to all public services, including those that are delivered by non-public sector bodies. The CSPL has commissioned Ipsos MORI to conduct qualitative research on ethical standards of behaviour in the commissioning and delivery of publicly funded services.

The research will involve 15 interviews with stakeholders involved in the commissioning and delivery of public services followed by six discussion groups with the public. The CSPL is particularly interested in services that can be tailored around the needs of individual "end-users". Therefore, the research will be conducted with stakeholders involved in the commissioning and delivery of services in health, justice and local government.

The interviews will identify what expectations stakeholders have of the ethical standards that service providers should confirm to and to what extent these are seen to relate to the seven principles of public life) and what mechanisms contractual or non-contractual are in place to ensure they are met.

The primary objective of the research is to understand better the expectations in terms of the ethical principles and standards that those commissioning services have of those in other sectors delivering public

services. The CSPL also wishes to probe attitudes to the commissioning, procuring or contracting of public services and to identify safeguards those commissioning believe are necessary to ensure that those ethical principles and standards are met.

4. <u>1. Introduction and their role</u>	10 mins
 5. Welcome and introduction Thank participant for taking part Introduce self, Ipsos MORI Introduce the topic and why we are talking to stakeholders Introduce CSPL and why they have commissioned the research Explain confidentiality and MRS guidelines What level of attribution would they like? Can we quote them directly, their organisation or do they want total anonymity? Role of Ipsos MORI – independent research organisation; gather all opinions; all opinions valid Get permission to digitally record – transcribe for quotes, no detailed 	Welcome: orientates interviewee, gets them prepared to take part in the interview Outlines the 'rules' of the interview (including those we are required to tell them about under MRS and Data
attribution (unless request it)	Protection Act guidelines)
We understand your job title is [INSERT JOB TITLE], is that correct? IF NECESSARY: Can you clarify if your role involves: 1. Writing tenders for public contracts 2. Strategic oversight of public service delivery 3. Operational oversight of service delivery 4. Assessing performance of those services 5. Anything else? What, if anything, has changed in your time as someone responsible for delivering publicly funded services? PROBE: models of delivery / variety of delivery organisations / the demands of commissioners and procurers / economic climate. How, if at all, has this impacted on your role / organisation? PROBE: organisational priorities / streamlining services / cutting out 'nice to have' things IF MENTION QUALITY OR DRIVING UP (OR DOWN) STANDARDS THEN ASK PARTICIPANT TO EXPLAIN WHAT THEY MEAN AND GIVE EXAMPLES What do you expect will change about delivering publicly funded services in the next three years? What opportunities / risks might these changes mean for your organisation?	Explain the next steps (findings will help augment views from a variety of sources and other avenues of evidence that will feed into any future review by the Committee) Moderator: ask participants to give a very detailed response about what they do as later we'll be asking ethical standards apply to what it is they do
2. Expectations of ethical standards	15 mins
To what extent do those who commission and procure publicly funded services expect ethical standards from providers? Why do you say that? What sort of things do those expectations cover? How, if at all, are those expectations communicated?	Explores the expectations that providers think commissioners have of the ethical standards
In the specification of tenders?	

- Cross/supra-governmental management of big suppliers' relationships with departments?
- Specific policies within government departments?
- Examples of best practice?
- Contractual requirements around organisations' governance, transparency etc.?

FOR EACH MENTIONED ASK WHETHER ANY OF THESE ARE EFFECTIVE

IF NOT COVERED: What can you tell me about the seven principles of public life? What purpose do you think they serve? How important are they? For whom?

CAN YOU GIVE ME 3 EXAMPLES

IF NOT AWARE OF THEM EXPLAIN WHAT THEY ARE

- What do you think of what you have just heard?
- How easy / difficult would it be to implement them?
- What, if anything, would help providers achieve the seven principles of public life?

The seven principles of public life are: selflessness, integrity, objectivity, accountability, openness, honesty, leadership.

Overall, what, if anything, does your organisation do to instil a public sector ethos in the delivery of publicly funded services? Why do you assay that?

3. Ensuring ethical standards are met

How important are ethical standards for organisations delivering public services? Why?

What do you think your competitors would say? If they didn't feel as strongly as you do about ethical standards how could they get around them? Are there any checks in place to stop them doing so?

- Who are ethical standards important for? Why do you say that?
- Are they more relevant in some areas than in others? Which areas?
- Does it depend on the type of service being delivered? If so, how?

15 mins Explores

experiences, practicalities and knowledge of ensuring ethical standards are achieved.

What sorts of mechanisms does your organisation have in place to ensure it meets those standards?

ALLOW SPONTANEOUS RESPONSES BEFORE PROBING. PROBE HOW EACH WORKS AT THE LEVEL OF INDIVIDUAL CONTRACTS VS ORGANISATIONAL OVERALL. E.G. INTERESTED IN TRANSPARENCY OF POTENTIALLY COMMERCIALLY SENSITIVE INFORMATION

- Ethical codes for behaviour
- Governance structures e.g. ethics committees
- Management policies and controls whistleblowing procedures, corporate social responsibility, risk management, bribery/fraud policies, audits
- Feedback from users and staff
- Leadership and training
- Complaints systems
- Transparency

14-006443-01 | Final | This work was carried out in accordance with the requirements of the international quality standard for Market Research, ISO 20252:2012, and with the Ipsos MORI Terms and Conditions which can be found at http://www.ipsos-mori.com/terms. © Ipsos MORI 2014.

Anything else?	
What information do commissioners request and monitor so that they can assess your compliance with ethical standards? What sorts of things do they with it?	
Can you explain what tools your organisation uses to judge its ethical standards? (E.g. audit (internal/external), evaluation (internal/external) etc.)	
What have those activities revealed about your organisation's ethical standards?	
ASK FOR 3 SPECIFIC EXAMPLES OF BEST PRACTICE	
In what ways have those findings been used?	
ASK FOR 3 SPECIFIC EXAMPLES	
What is easy / difficult about sustaining those high standards? Does it matter? Why?	
4. Summing up	5 mins
Still thinking about ethical standards, if you could ask commissioner and procurers to do one thing for people in your role what would it be? Why?	
Are there any other issues you feel should be raised or any final comments	
you would like to add? THANK AND CLOSE	
THANK AND CLOSE	

6.3 General public discussion guide

Committee on Standards in Public Life
Discussion guide for group discussions with general public
FINAL

Research questions are as follows:

- The public's expectations of non-public sector organisations providing services for citizens.
- How the public view the different types of organisations providing publicly funded services.
- What standards would they like to see these organisations conform to?
- To what extent do these relate to the seven principles of public life?
- How should ethical standards be met?

Structure of the discussion

Structure of the discussion				
Timing	Exercise / activities	Comments		
5 min	 Introduction Moderator introduces self, Ipsos MORI and clients (as applicable). Moderator to explain the research has been commissioned by the Committee on Standards in Public Life. It is an independent public body which advises government on ethical issues and promotes high ethical standards across the whole of public life in the UK. Explain main aim of the discussion is to understand their expectations of the ethical standards that should be met by individuals/organisations delivering publicly funded services. Explain interested in the views of everyone, even those who feel they may know less about organisations which are delivering public services. Explain that people will be given information so that they can take part in the discussion. Explain that people should answer for themselves, be as honest as possible and feel free to disagree with one another. Explain that findings will be collated across groups and included in a published report, but reassure about confidentiality and anonymity. Seek permission to record. Toilets, fire alarms, mobile phones etc. MODERATOR AVOID USING THE TERM ETHICAL STANDARDS UNTIL THE START OF SECTION 5. UP TO THAT POINT PARTICIPANTS SHOULD BE ASKED TO THINK ABOUT CODE OF CONDUCT INSTEAD. 	AIM: to introduce the purpose of the discussion and how findings will be used		
10 min	Section 1: Perceptions of public services Introductions around the table: First name, how you spend a typical day	AIM: to help participants start thinking about public services. Use as an opportunity for		
	Tonight's discussion is focussed on public services which can be tailored around the needs of an end user. So we want you to think about sectors like health and social care, education, housing, justice e.g. probation (supervising offenders in the community, services for disabled children and adults, early years provision. Thinking about these different sectors	participants to raise issues with political ideology, cuts, changes in society e.g. ageing population etc., but		

remind them that this Firstly, can you shout out as many public services as you can is not the focus of the think of? FLIPCHART RESPONSES session and we will not be discussing this for the rest of the How do you know when a public service is good? What makes it good? evening Section 2: Discussion of code of conduct in public service 15 mins AIM: to understand delivery spontaneous views of public sector What code of conduct do you think people working in the public organisations and sector should follow and why? individuals delivering public services and IF NEEDED: Think about the behaviours of the individual, think about what their how the person treats the end user, think about how the person expectations are of decides what to do, think about the extent to which a person shares them information about itself. IF NEEDED: prompt with different types of services and see if response is the same or if they add extra ideas Health services (hospitals / GPs etc.) Social care (e.g. care homes, meals on wheels) Social housing services (e.g. allocation of housing) Probation services (i.e. overseeing offenders in the community) Education (e.g. primary, secondary schools) Group discussion moderator to flipchart all ideas for code of conduct, probing where appropriate and discuss any similarities /differences between respondents Okay we've talked about the individual level, now I'd like to know what code of conduct do you think public sector organisations who are delivering services should follow? Think about the behaviours of the organisation, think about how the organisation operates, think about how the organisation decides what to do, think about the extent to which an organisation shares information about itself. Flipchart ideas, probing where appropriate. Listen out for any differences / similarities between organisation / individual. Probing where appropriate. 20 mins AIM: to understand Section 3: Discussion of code of conduct in non-public sector service delivery participants views on non-public sector FLIPCHART RESPONSES organisations / individuals to see if There are 3 different types of organisations who delivery public their expectations services now: public, private, and voluntary. Are you aware of this? differ to public sector Where did you hear about that? org's / individuals and, if so, why MODERATOR DISTRIBUTE STIMULUS SHOWING DIFFERENT TYPES

OF PROVIDERS AND MODELS OF PUBLIC SERVICE DELIVERY. CHECK COMPREHENSION BEFORE MOVING ON.

Shout out what do you think are the benefits / drawbacks of these organisations delivering public services. MODERATOR FLIPCHART ALL IDEAS, PROBING WHERE APPROPRIATE

MODERATOR DISTRIBUTE STIMULUS SHOWING TWO EXAMPLES OF ALTERNATIVE MODELS OF PUBLIC SERVICE DELIVERY

What code of conduct do you think individuals delivering public services but working for non-public sector organisations should follow? Why do you say that? What do others think?

Moderator to flipchart all ideas for code of conduct, probing where appropriate.

Okay we've talked about the individual level, now I'd like to know what code of conduct do you think a private sector organisation who is delivering services should follow? Why do you say that? What about a voluntary sector organisation? Why do you say that?

Then in group remind them to think back to their views on code of conduct public sector organisations/ individuals should follow (refer to flipchart if necessary)

Do you think expectations should differ by provider type (i.e. public, private, voluntary and community organisations, charities).

Explore whether or not these differences matter. Why / why not?

15 mins

Section 4: Discussion of the seven principles of public life

Moderator will introduce the seven principles of public life briefly: selflessness, integrity, objectivity, accountability, openness, honesty, leadership. FLIPCHART THE SEVEN PRINCIPLES OF PUBLIC LIFE THEN EXPLAIN:

The principles of public life apply to anyone who works as a public office holder. This includes all people appointed to work in the civil service, local government, the police, courts and probation service, and in the health, education, social and care services. They also apply to elected officials (e.g. MPs, councillors). The Committee on Standards in Public Life believes that these principles should also apply to all those in other sectors delivering public services.

What immediately came to mind when the principles of public life were explained? Why? Did they make sense? What things really stood out?

What did you think of the fact that the Committee on Standards in Public Life believes these principles should apply to all types of providers? Is that appropriate? Why/ why not?

IF TIME

AIM: to understand the extent to which the seven principles of public life are relevant to non-public sector organisations Split group into pairs /triads and given each pair a card showing all seven principles. Allow a few minutes to review then ask:

How would you explain the principles of public life to a friend or family member? Does anything surprise you? Why was that?

Then as a group, work through the following questions (if they do not arise spontaneously), flipcharting answers for each bullet point

- Are there any differences in the extent to which these principles should apply
 - to different provider types (i.e. public, private, voluntary)
 - o **depending on the services provided** (i.e. health, education, probation, social care)?
 - o Why?
- IF NOT COVERED THEN PROBE to what extent, if at all, is it important that all principles should apply to private and voluntary /community sector providers delivering public services equally? Why? Remind them to think back to their views on code of conduct from earlier in the session (refer to flipchart if necessary)
- Explore whether or not these differences matter. Why/ why not?

20 mins

Section 5: Discussion of how to ensure ethical standards are met

Thinking about everything we have discussed this evening what standards do you think an 'ethical provider' of public services should conform to? Moderators to flipchart the elements of an 'ethical provider'. *Probe for any difference by provider type*.

Is an 'ethical provider' the same as, or different to, a 'good provider'? Why? What would the differences be (if any)?

So for example...

What difference would it make switching from NHS to private providers to do home visits to the elderly to run medical checks, change bandages, etc.? Why?

What difference would it make contracting out the management of young offender institutions? Why?

Are some aspects of ethical provision more important than others when thinking about private and voluntary/community sectors delivering publicly funded services?

Looking again at flipchart, how would you (as a user of the services) know that providers of publicly funded services were following ethical standards?

Ask participants for spontaneous thoughts before prompting with: whistleblowing, complaints procedures, good governance, listening to

AIM: to establish the characteristics of an ethical provider and to understand how a provider should prove to the public they conform to ethical standards

	the views of users, open accounts, anything else.	
	Is it important for you to know? Or just that someone ensures this is the case? If important to know - what things you think would reassure the public that all types of provider conform to ethical standards.	
	Explain what a commissioner does briefly i.e. writing contracts/ designing service provision. Imagine you were in charge of commissioning services, what might you do to encourage organisations delivering public services to conform to ethical standards?	
	Allow spontaneous then probe: a system that monitors ethical standards, give advice and guidance on ethical standards, financial penalties, banning from tendering process, on-going dialogue between commissioners and providers about ethical standards. Ask them to shout out benefits / drawback of each one.	
	What, if any, effect do you think the application of the principles of public life would have on non-public sector providers? Why? If they did apply what difference, if any, would it make to how public services are delivered? Why do you say that? For whom?	
5 min	Lead moderator explain findings from this session will help inform CSPL's decisions around ensuring ethical standards across publicly funded service provision.	AIM: to wind down and close
	Lead moderator thanks and note-taker hand out incentives and sign-off sheet.	

6.4 Stimulus used in general public discussion groups

Types of organisations delivering services

Standards in Public Life

- Public Sector organisations are owned and controlled by the national government (or local government)
- A private sector organisation is one that is owned and controlled by private individuals, not the government and usually exists to make a profit for its owners or shareholders
- Other organisations which sometimes deliver public services include charities, voluntary and community groups, faith groups etc.

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Models of public service delivery

Standards in Public Life

- Increasingly non-public sector organisations are invited to compete with other organisations to deliver public services
- Some believe that competition between providers can raise the quality of provision and allows the public greater choice
- These services are often free at the point of delivery as the provider is paid by the government through taxes

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Example 1: Healthcare

Standards in Public Life

Patients can choose between one hospital/GP or another: for example, they can choose which GP practice they go to, which hospital they have an operation at, or what kind of treatment they receive.

· Hospital A

· Waitingtime: 3 weeks

- Mortality rate: Better than average
- Distance from home: 12 miles
- · Cost to patient: none

· Hospital B

- · Waitingtime: 1 week
- Mortality rate: Average
- . Distance from home: 5 miles
- · Cost to patient: none

· Hospital C



- · Waitingtime: 2 days
- Mortality rate: Average
- · Distance from home: 5 miles
- · Cost to patient: none

PUBLIC SECTOR

PRIVATE SECTOR

Example 2: Probation services

Standards in Public Life

Probation service providers are responsible for overseeing offenders released from prison and those on community sentences

- Private sector provider
- · Provision: overseeing unpaid community work
- · Works with offenders who are given a community sentence
- Public sector provider
- · Provision: putin place supervision plans
- · Workswith high risk offenders
- Voluntary and community sector provider
- · Provision: substance misuse support
- · Works with low risk vulnerable adults

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About Ipsos MORI's Social Research Institute

The Social Research Institute works closely with national governments, local public services and the not-for-profit sector. Its c.200 research staff focus on public service and policy issues. Each has expertise in a particular part of the public sector, ensuring we have a detailed understanding of specific sectors and policy challenges. This, combined with our methodological and communications expertise, helps ensure that our research makes a difference for decision makers and communities.