



Public Administration and Management in a Changing World

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Opinion

I welcome the initiation of a new Journal on this important topic. Having led an important research University in this country at a time of vastly increased political control by government between 1988 and 1996, I have maintained close interest in these issues. Pressures for control in Higher Education have not gone away. I also chaired a national committee over 6 months in 1984 when a dispute between our Federal Government and the Australian Medical Association threatened to halt the initiation of our new 'Medicare' health system in 1984. Good legislation unfortunately for the new system also offered unprecedented power for the Ministry of Health to control use diagnostic procedures by specialist staff of public hospitals across Australia in their private practices. Medicare went ahead and the Inquiry succeeded in curbing that power as inappropriate intrusion, whilst recognising a professional obligation to curb irresponsible use of costly tests through effective clinical governance.

Public administration and management covers a wide range of government and institutional structures; no one model fits all. Even in government departments, those of Treasury and Finance are necessarily hierarchically structured with function controlled at each level by 'top-down' management. Their necessary function is to monitor public expenditure and to give advice on financial and economic matters, through senior executives, to political masters. Risk aversion and direct control of functions and confidentiality are seen as mandatory to protect the 'public interest'. Nonetheless, they must recognize that the professionalism and functions of their able and highly qualified staff are critical to the quality of their service. Government departments which provide services to the community, however, must work in partnership with community based bodies where there is a high level of delegation of function. Examples are in law enforcement, health, public education and many other services. They must work in effective partnership with those delivering the service, especially if professional expertise and a capacity for innovation, commitment to quality of service in meeting changing needs in the community are to be encouraged and appropriately supported.

Fukuyama, in his book *The End of History* in 1992, pointed to acknowledged failure of many countries strongly committed to direct government control of all services and economic development. Certainly over the past 25 years in western societies we have seen extensive 'privatisation' of former government services with more effective delivery and management in many sectors. Nonetheless there remains an important role for government. Matters are complicated further by a tendency for administrators to seek the culture of Finance and Treasury, with risk aversion and bureaucrats seeking direct control of outputs rather than outcomes. Preoccupation with 'equity' is often confused with 'uniformity' at the expense 'excellence'. The necessity for partnership with those skilled in delivery of high quality 'professional' services in the community is readily overlooked. We live in a changing world; new science and technology, and international experience must constantly be brought to bear, of which many government officers without interface with research often have little knowledge.

Competition in the private sector necessitates change and efficiency, and respect for quality. Without these corporate entities

a private organization will not survive. However, in the community, some services need to be delivered regardless of people's capacity to pay – hence a critical role for government as a key partner in funding and support.

Higher education and Health are two sectors with which I have most experience. In both, government 'interference' is often characterised with monitoring 'client' numbers or enumerating services provided. These then tend to become the preoccupation of institutional managers to safeguarding funding. There is increasing failure to recognise quality or innovation which comes from committed academics or professionals. Reform of this university 25 years ago sought to place administrative support close to academic leaders to jointly seek to achieve advances in which all could take pride. We followed the principles enunciated by Peters and Waterman in their 1982 book *In Search of Excellence*, with outstanding results which have stood us well ever since. The commitment to excellence at every level within an institution leads to innovation and willingness to accept change. We followed the principles enunciated by Peters and Waterman in their 1982 book *In Search of Excellence*, with outstanding results which have stood us well ever since. The commitment to excellence at every level within an institution leads to innovation and willingness to accept change. Melbourne is now Australia's leading university on international criteria. Sadly, however, with huge growth in administrative staff in recent years consequent on a growing 'risk averse' public administration culture, administration management has increasingly developed a life of its own, distant from the academics. We are now at risk of losing some of our most outstanding academics. In public hospitals we see a similar trend, as the numbers sought by governments to translate to funding become the over-riding concern with little concern over quality. Leading professionals tend to forsake public service to seek fulfilment in their own work in private practice. There are real challenges to be tackled.

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