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Response to reviews of 'Never again?'

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These exceedingly generous reviews of Never Again? raise many important issues, but two of them are the role of academics and of academic analysis in policymaking, and the role of the civil service in developing policies.

Both have new salience. Not just because of the political train crash that Andrew Lansley's Health and Social Care Act proved to be, but because, as Rudolf Klein notes, the government in its civil service reform plan, published in June, is proposing to open up policymaking to a wider range of sources than 'just' the civil service (HM Government, 2012). Among the wider sources are academics, think tanks and consultancies.

In practice, policymaking is already not 'just' the preserve of the civil service. Civil servants, believe it or not, are capable of both reading and talking. They do indeed absorb the output of academics and think tanks, though perhaps not systematically enough.

They do (whisper it quietly to ministers) consult informally ahead of formally approved ministerial consultation. Very few policies are in practice dreamed up entirely in Whitehall. And the need, however informally, to get at least some outside view on what a ministry is planning is the equivalent of dropping a pebble in a pond. As a reporter of public policy, I found the way to discover what was going on was not necessarily to have a fabulous list of political contacts, though that helped, nor indeed of civil service ones (civil servants are, in the main, loyally discrete when talking to Her Majesty's Media) – but to know the people who both politicians and civil servants have to talk to on any given issue, to pick up those ripples and interpret them.

To put that into the context of National Health Service (NHS) reform, if there is any one source for the original purchaser/provider split as introduced by Ken Clarke, it was Alain Enthoven's discrete little pamphlet for the Nuffield Trust back in 1985. His boringly titled (perhaps deliberately boringly titled) Reflections on the Management of the NHS received next to no publicity when it was published. However, once Thatcher's NHS review was set up in 1988, one discovered that almost everyone involved in the review, inside or outside of government, had read it. The final outcome differed somewhat from Enthoven's conclusions. But its seed ideas had taken root.

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This raises, sort of, the question of evidence-based policymaking. Of course, whenever possible, policies should be designed around the evidence of what works. But if that was all that was ever done, nothing new would ever be tried. The original NHS reforms fitted rather into something that might be called 'theory-based' policymaking.

They introduced an element of competition. Volume was to be rewarded by more income (money follows the patient, in the case of the original purchaser/provider split). There was the idea that it might, in theory, be a good idea for the NHS to decide what it wanted to buy, rather than just buying regardless of what happened to be on offer from hospitals. And the idea took root that giving people budgets might lead to them managing them better and more imaginatively. These were all concepts drawn from the private sector and economic theory, rather than from hard examples of this working in tax-funded health services around the world. The policy was, in a sense, a leap of faith founded in theory, rather than in hard evidence from existing health policy.

Contrast that, for example, to the development of welfare-to-work policies over the years. By the time the United Kingdom got started on this seriously, there was a substantial body of evidence around at least some of 'what worked' from the United States and the Netherlands. And countries (and equally the companies that now provide these services) have been continually learning from each other over the past two decades – even if that does not prove a guarantee that the adaptation of something that works elsewhere to local circumstances will necessarily always be a success.

On the role of the civil service in all this, Rudolf Klein rightly observes that I give the civil service 'the benefit of the doubt' as to how far they warned Lansley about the consequences of what he was doing, and how far they offered alternatives.

I was acutely aware when writing up the account that a different selection of views from within the department – or perhaps a more selective selection of them – could have painted a very different picture. Opinions as to how hard the civil service tried to warn Lansley off varied. In the end, I had to listen to what I was told – and most of the interviews took place while the bill was still a bill, and while its passage still felt uncertain – and make a judgment.

However, there is no doubt that Lansley was very clearly offered the alternative of much less legislation, or even no legislation, to achieve his goals or most of them – and that he was offered, although undoubtedly less energetically, the possibility of a consultation exercise ahead of the white paper. He rejected all that for reasons outlined in Never Again? At the end of the day, the role of the civil service has to be to implement the minister's decisions (so long as they are not themselves illegal) for just so long as the minister has the support of his colleagues. And for all the trauma around the bill, and considerable anonymous sniping from the sidelines by some Cabinet colleagues about 'handling' and 'presentation', Lansley never actually lost that. Given the minister's determination, the civil service on its own was never going to stop him.

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What is intriguing, against the background of the Act, is the civil service reform white paper's proposals that policymaking should be opened up to a wider range of sources. These include using 'crowd sourcing' to shape the definition of the problem; using web-based tools and new media to widen the policy debate to individuals and organisations not normally involved; using 'policy labs' to test implementability; and directly commissioning policymaking from others – although from precisely who is not spelt out.

Intriguingly, the NHS is not mentioned as one of the areas where this might apply. Perhaps unsurprisingly, it does not take much imagination to envisage the cacophony of views ministers would have faced, had such techniques been tried around the Lansley proposals. The reason is that the NHS remains a deeply ideological issue. There are those who simply believe that any injection of choice or competition into health care is wrong, and no amount of evidence is going to convince them otherwise. At the other extreme are those who would cheerfully dismantle the service on both the supply and demand sides, and who dismiss evidence that any of it works with the argument that it would work better if their approach were adopted. They are equally unconvincible by evidence.

Furthermore, if one is going to commission consultancies to advise on the policy itself, there would seem to be less chance rather than more of someone telling the government of the day that its ideas were barmy. Doing so does not sound like a route to contract renewal on another occasion when the instinct of ministers – it is what they came into politics to do, and it is in their genes – is to act.

Equally, who is chosen by whom to be part of any 'policy lab' is likely in large measure to predetermine the outcome if the question is 'what the should be policy be' as opposed to 'this is the policy, how best do we implement it?' The only way the white paper's proposals would be likely to make any difference to the higher end of policy formulation would be if the advice provided is published – and one cannot see ministers easily agreeing to that, any more than they will agree to existing policymaking advice falling within the Freedom of Information act.

In all this, if it draws academics more intimately into the policymaking process, then the research they generate will inevitably become 'politicised', in the sense of being used by one side or another to advance or rebut an argument. Julian Le Grand and Zack Cooper regret this, and one has every sympathy for them. But it feels inevitable – although the highly abusive nature of the debate in this particular case was indeed remarkable, and one hopes that it will not be repeated. They raise a serious point about public understanding of complex econometric studies and their methodologies. As they note, it is not one that is easily resolved. However, from the point of view of the public good, it is important that academics, when they have something relevant to say, are one of the cooks in the kitchen when policy is being formulated. Being in the kitchen involves, inevitably, taking some of the heat.

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Without the input of – sometimes conflicting – academic analysis, policy-making would be much poorer. Politicians tend, inevitably, to select the evidence that supports their case. But in the longer run, one can only believe that as the evidence for a course of action becomes stronger, it will eventually be adopted. The alternative to not believing that is despair.

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