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Abstract

The spending power of sub-national decision makers across five policy sectors

The paper develops new measures of spending power and performance across five key sectors of sub-national government service delivery – education, long-term care, transport services, social housing and health care. The new indicators reveal unique insights about how responsibilities are assigned across levels of government, which enable the analysis of different arrangements on outcomes. Differences in characteristics across sectors and types of countries may have important consequences for intergovernmental fiscal relations.

Keywords: Spending autonomy, regional authority, public sector productivity, intergovernmental relations

JEL classification: H77, L38, O43

Résumé

Le pouvoir de dépense des décisionnaires infranationaux dans cinq secteurs de l'action publique

La présente note est consacrée à de nouvelles mesures du pouvoir de dépenses et des performances en la matière dans cinq secteurs clés de la fourniture de services par des administrations infranationales : éducation, soins de longue durée, services de transport, logement social et santé. Ces nouveaux indicateurs apportent des éclairages uniques sur la manière dont les responsabilités sont réparties entre les différents échelons de l'administration, qui permettent d'analyser l'effet qu'ont différentes dispositions sur les résultats obtenus. Les différences de caractéristiques entre divers secteurs et types de pays peuvent avoir d'importantes conséquences en termes de relations budgétaires entre les administrations.

Mots-clés : autonomie de dépenses, pouvoir régional, productivité du secteur public, relations inter-administrations

Classement JEL: H77, L38, O43

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THE SPENDING POWER OF SUB-NATIONAL DECISION MAKERS ACROSS FIVE POLICY SECTORS

By Sean Dougherty and Leah Phillips¹

1. Introduction and main findings

- 1. Decentralisation of government services, and the ensuing dispersion of power, often results in sub-national governments being responsible for the delivery of key government services, including education, health and social services. Demographic change and revenue pressures, caused by digitalisation and low wage growth in some countries, are additional forces that are affecting public spending patterns and increasing pressure on government service delivery, notably in the health care sector. Further, some argue that public sector productivity is slowing, which is straining public funds and service quality.
- 2. To mitigate these pressures, governments should consider ways to increase the productivity and performance of the public sector. One necessary element is considering how governments delegate tasks, interact and co-ordinate public service policy frameworks. This paper provides a high-level review of the multi-level governance and institutional structures that have been adopted across OECD and partner countries, with a focus on sub-national decision-making. The purpose of this paper is to summarise the results of a recent OECD spending power questionnaire, and construct institutional indicators that compare sub-national spending power across countries and policy sectors. At this stage, the paper does not aim to analyse how decentralisation influence public sector performance, but rather to present indicators that will enable a more robust metric for future work on this topic.
- 3. While there is a rich literature examining the effects of decentralisation on productivity and outcomes, many of these studies use National Accounts expenditure shares, which do not provide a comprehensive metric for sub-national spending authority. This paper adds to the literature by developing more robust spending power indicators, which provide a firmer measure of decentralisation and thus a better metric to use when assessing the impact decentralisation has on policy outcomes.
- 4. Examining public expenditure and sub-national decision-making power is an ongoing area of work for the Network on Fiscal Relations across Levels of Government (the Fiscal Network). This paper builds on a preliminary review of the literature presented at the 2017 meeting of the Fiscal Network (Phillips, 2018_[1]), which focused on the monitoring and measurement of sub-national service delivery. It also aims to update and broaden a previous pilot project for the Fiscal Network on sub-central spending power (Bach, Blöchliger and Wallau, 2009_[2]; OECD, 2016a_[3]).

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- 5. The main results of this study can be summarised as follows:
- Spending power indicators show relatively low sub-national spending authority.
 - Spending power is quite balanced across the sectors, but is less decentralised in health and long-term care, and more decentralised in social housing, transport and primary and secondary education (referred to as "education") services. That is, regional and local governments, as well as service providers, tend to have more power to make decisions about how social housing, transport and education services are delivered, compared to health and long-term care.
 - The overall policy framework for service sectors is often centrally controlled, but varies in certain key aspects across sectors policy autonomy in the long-term care and health sectors are the most centralised, while policy decisions are least centralised in the social housing sector. In contrast, input and budgeting decisions are more likely to be decentralised.
 - Financial expenditure shares often do not reflect sub-national spending power accurately, as sub-central spending is generally highly regulated or otherwise influenced by the central government.
- Sub-national spending power tends to be more decentralised in federal than in unitary
 countries. However, federal countries also have more overlapping responsibilities,
 which can create inefficiencies due to greater duplication and less voter transparency.
- There appears to be little correlation between taxing power and spending power, which may be a concern since spending decentralisation without revenue decentralisation can reduce government accountability and impede growth (OECD and KIPF, 2018[4]).
- 6. This paper has five main sections. The first section provides information on subnational expenditure shares from National Accounts data and defines the terminology used in the paper. The second section details the scope of two recent OECD surveys as well as the countries that responded to the surveys. This section also includes information on the methodology to construct institutional spending power indicators. The third section describes the general results on the spending power of sub-national decision makers, as well as the results for each of the five policy sectors – primary and secondary education, long-term care, transport services, social housing and health care. The fourth section discusses the spending power of sub-national decision-makers, and how institutional characteristics, including federalism, the taxation of sub-national governments, and fiscal constitutional structures, relate to the level of decentralisation of decision-making. The fifth and final section details areas for further work. More information on the roles of decisionmakers in each policy area is detailed in Annex A; the OECD questionnaire on the spending power of sub-national governments is included in Annex B; and additional figures and tables are included in Annex C.

2. Definition and scope

2.1. Levels of government

7. A main characteristic of a decentralised government is the existence of several governing bodies, which have political, administrative or funding power at a sub-central level. Three levels of government are defined – central/federal, state/province/region, and local/municipality. In this paper, sub-national governments are defined as sub-central levels of government. Regional governments are upper-tier municipalities including states, territories or provinces. Local governments are the lowest tier of government including counties, cities, districts, municipalities, councils or shires. In the context of countries with only two levels of government, the lower level is defined as local government.

Box 1. The effects of decentralisation

Fiscal decentralisation involves increasing the role of sub-national governments in overall public finance, through greater spending or revenue power. Ensuring an efficient allocation of responsibilities across decision-makers depends on a range of factors, including the level of development, a country's redistribution and equalisation policies, the strength of its political and institutional framework and capacities across all levels of government, its population and its geography. When developing a framework for decentralisation, it is necessary to consider how different levels of governments and public and private providers will react to incentive frameworks, to ensure they are productive in their service delivery, utilise any comparative advantage and are cost-efficient in their use of government funds.

The costs and benefits of decentralisation are intensely debated. OECD-KIPF (2018_[4]) suggest that decentralisation tends to support economic growth, and that decentralisation of tax revenues tends to have a stronger impact on growth than spending decentralisation, especially when governments are small. Balanced decentralisation, when the various policy functions are decentralised to a similar extent, is conducive to growth, as it allows subnational governments to better co-ordinate policy and to reap economies of scale and scope across functions. Notably, a balanced fiscal structure (where local spending is mainly financed by local taxation) has been found to reduce regional disparities, by providing an incentive to better use local resources and implement policies that favour economic growth.

Despite these advantages, decentralisation can have an adverse impact on equity. When sub-national actors have greater control over spending and revenue raising, they can dedicate funds according to local preferences and may even incentivise regions to attract high-income families, rather than the needy, which can create unbalances in living standards across regions. Strossberg et al. $(2016_{[5]})$ show that decentralisation tends to be associated with a reduction in income inequality between high income earners and the median, but is linked to a divergence of low income groups from the median, notably via sub-central tax autonomy. Intra-governmental transfers may also increase such gaps.

There are also some studies that look at the impact of fiscal decentralisation on the efficiency of public service delivery. Findings from OECD-KIPF (2018_[4]) indicate that fiscal decentralisation can improve the efficiency of public service delivery, but only under specific conditions. First, the decentralisation process requires strong accountability at various levels of institutions, good governance, and strong capacity at the local level. Second, a sufficient degree of expenditure decentralisation is necessary to obtain favourable outcomes. Third, decentralisation of expenditure needs to be accompanied by sufficient revenue decentralisation. In the absence of these conditions, fiscal decentralisation can also worsen public service delivery. Devolution of public service delivery to an overly small-scale local government can decrease efficiency and increase costs if economies of scale are important in the provision of public goods.

One issue regarding the decentralisation of many of the services discussed in this paper is how politically sensitive the provision and funding of them are, especially when responsibilities are not clearly defined. Reducing the quantity or quality of these services can have major implications for living standards and economic growth. For example, if health is largely funded by sub-national actors, central authorities may still be incapable of resisting pressure to compensate excessive health spending or shortfalls in revenue (Sutherland, Price and Joumard, 2006_[5]).

2.2. The five policy sectors selected

8. This paper focuses on five key areas of the public sector – education, long-term care, transport services, social housing and health care. The policy sectors were chosen based on their significance in sub-national government expenditure, the usefulness of the data for future streams of work, and their alignment with the Fiscal Network work programme discussed at the 2017 meeting. These sectors also represent important areas of current public policy debate.

2.3. Expenditure shares across policy sectors

- 9. The breakdown of sub-national expenditure and sub-national expenditure as a share of government expenditure are common metrics to help clarify the role of sub-national governments in economic functions. While these indicators do not capture the complexity of fiscal arrangements, they can provide a useful guide of how much fiscal power regional and local jurisdictions enjoy (Blochliger and King, 2006_[6]). These metrics are constructed using data from the National Accounts Statistics (OECD), which uses the Classification of Functions of Government (COFOG, version I). Now considered as a worldwide standard, COFOG data classifies government expenditure by the purpose for which the funds are to be used.
- 10. First-level COFOG splits expenditure data into ten functions (general public services; defence; public order and safety; housing and community amenities; economic affairs; environment protection; health; recreation, culture and religion; education; social protection). COFOG II further divides the ten expenditure functions into 69 sub-functions. The second level of COFOG is particularly important for public finance analysis, as it allows for the breakdown of social protection into different programme areas. Although the sectors evaluated in this survey more closely align with the COFOG II classification, these COFOG data are not available in many countries, reducing the ability to accurately compare the new spending power indicators in this paper with expenditure shares.
- The following figures show the current state of spending decentralisation as 11. measured by the composition of sub-national government expenditure in OECD countries (Figure 1) and sub-national government expenditure as a proportion of total government expenditure (Figure 2). Education represents the largest sector in the sub-national government expenditure, averaging 25% of all sub-national government expenditure across OECD countries in 2016. However, values for individual member states vary considerably. In Estonia, Iceland, Israel, Latvia, the Slovak Republic, Slovenia and the United States, spending on education exceeded 30% of sub-national budgets, and in Latvia, it is 41% (OECD, 2019). Health accounts for the second highest budgetary outlay, accounting, on average, for 18% of sub-national government expenditure. It exceeded 20% of sub-national budgets in Australia, Austria, Denmark, Finland, Spain, Sweden and the United States, and reached 48% in Italy. The third largest sub-national budget item is 'other' expenditure representing 15% of sub-national government expenditure, which includes defence; public order and safety; housing and community amenities; recreation, culture and religion; and environment expenditure. Public order, safety and defence expenditures accounted for around 7% of sub-national government expenditure (using 2013 data). Housing and community amenities represented on average around 3% of sub-national government expenditure across the OECD in 2013 (OECD, 2016b_[7]). General public services and social protection (which includes current and capital social expenditure) both represent around 14% of sub-national government expenditure in 2016. Figures of sub-national expenditure in education, social protection and health by country are shown in Annex C.

30 OECD weighted average (per cent) 25 20 15 10 5 0 Education Health Other General public Social Economic affairs services protection

Figure 1. Composition of sub-national government expenditure across economic functions, OECD average, 2016

Note: Based on an OECD average excluding Canada, Mexico and Chile, weighted by population size of each country. Sub-national government is defined here as the sum (non-consolidated) of regional and local governments.

Source: OECD Sub-national Government Structure and Finance database.

12. For the federal countries shown in Figure 2, sub-national government expenditure is 19% of GDP and 48% of public expenditure on an unweighted average. For the unitary countries, local government expenditure represents 12% of GDP and 26% of public expenditure on an unweighted average (OECD, 2018). Canada, Denmark and Switzerland are highly decentralised with a sub-national government expenditure share exceeding 50% (based on each countries' average expenditure from 2013 to 2016).

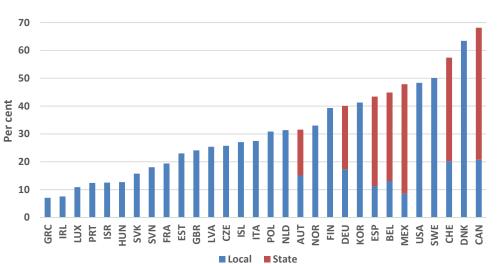


Figure 2. Sub-national government expenditure as a proportion of total general government expenditure

Note: The consolidated expenditure of each level of government is defined as total spending minus the intergovernmental transfer spending of that government level. No values are available for the breakdown of local and state expenditure for the United States.

Source: OECD Fiscal Federalism database.

2.4. Spending power of sub-national decision-makers

- 13. Spending power indicators aim to measure the extent that rules and regulations that govern the inputs, processes and outputs of sub-national services, are under the control of sub-national decision-makers (Bach, Blöchliger and Wallau, 2009_[2]). Spending power should be interpreted beyond budgeting decisions. It describes the level of control or authority of sub-national decision-makers, including deciding how services are organised, how funds are allocated, the preferred level and quality of inputs and outputs and how service delivery is measured and monitored (OECD, 2016a_[3]).
- 14. No recent internationally comparable indicators of spending power by sector are currently available. The spending power indicators presented in this paper aim to provide an accurate representation of spending power, and encompass features such as sub-national governments' right to introduce new government programmes, to amend regulations, to grant subsidies and concessions, to abolish spending programmes, to decide on the ratio of recurrent to capital spending, and to allocate funding across priority areas.
- 15. Aside from the previous effort by the Fiscal Network (Bach, Blöchliger and Wallau, 2009_[2]; OECD and KIPF, 2016_[8]) to develop such indicators, there are the related yet broader indexes of regional authority, which track regional authority on an annual basis from 1950 to 2010 in 81 countries (Hooghe et al., 2016_[9]). The Regional Authority Index (RAI) includes measures along ten dimensions: institutional depth, policy scope, fiscal autonomy, borrowing autonomy, representation, law making, executive control, borrowing control, constitutional reform, as well as fiscal control.

2.5. Classifications of spending power

- 16. Unlike expenditure shares, spending power aims to take account, and discount, when sub-national governments are just the "paying agent" for the central government, and sub-national governments have little independence or decision-making authority in their supposed fields of responsibility.
- 17. Each of the five policy sectors covered in this paper have four dimensions of spending power autonomy policy autonomy, budget autonomy, input autonomy, output and monitoring autonomy (Figure 3). These four aspects of autonomy aim to provide an overall picture of the spending power of a sub-national decision-maker. These dimensions cover:
 - *Policy autonomy*: The extent to which sub-central decision-makers exert control over main policy objectives and main aspects of service delivery.
 - Budget autonomy: The extent to which sub-central decision-makers exert control over the budget (e.g. is budget autonomy limited by upper level regulation).
 - *Input autonomy*: The extent to which sub-central decision-makers exert control over the civil service (personnel management, salaries) and other input-side aspects (e.g. right to tender or contract out services).
 - Output and monitoring autonomy: The extent to which sub-central decision-makers
 exert control over standards such as quality and quantity of services delivered and
 devices to monitor and evaluate standards, such as benchmarking.

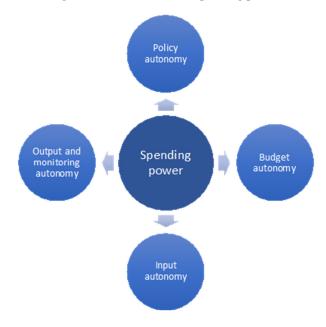


Figure 3. Classifications of spending power

Source: Adapted from Bach et al. (2009[2]).

3. Questionnaire scope and methodology

3.1. Country questionnaire responses

- 18. Indicator values for data on education, long-term care, transport services and social housing are drawn from responses to a recent OECD survey on the spending power of sub-national governments. This survey was sent to countries in early 2018, with seventeen OECD countries and four partner countries responding to the survey in full. Denmark and South Africa provided partial answers for small parts of the survey. Germany completed all but the section on education and France only completed the section on education. Belgium provided two responses to the education section, one completed by the central government and one completed by the regional Flanders government. Although these two sets of answers were broadly similar, any discrepancies were consolidated, which may increase the amount of 'shared' responsibilities for the Belgian response.
- 19. Indicator values for data on health care are drawn from a separate survey on performance measurement systems in the health sector and responsibilities across levels of government. This survey was sent to countries in late 2017 with responses received from 28 OECD countries and three partner countries. Because of differing formats between the two surveys, coding varies between the health indicators and the indicators for the other policy sectors. More information on the health survey, as well as survey results on performance systems in the health sector can be found in Beazley et al. (2019_[10]).
- 20. Table 1 shows the countries responding to each of the policy sectors. A higher response rate to the health survey compared to the spending power survey has led to an incomplete set of policy sector responses for many countries.

Table 1. Questionnaire responses

	Education	Long-term care	Transport	Social housing	Health	All sectors
Australia	•	•			Х	•
Austria					Χ	
Belgium	Χ	Χ	Χ	Χ	Χ	Χ
Canada	Χ	Χ	Χ	Χ	Χ	Х
Chile	Χ	Χ	Χ	Χ	Χ	Χ
Czech Republic	Χ	Χ	Χ	Χ	Χ	Х
Denmark	Χ	Χ	Χ	Χ	Χ	Χ
Estonia	Χ	Χ	X	Χ	Χ	Χ
Finland	Χ	Χ	Χ	Χ	Χ	Χ
France	Χ					
Germany		Χ	Χ	Χ	Χ	
Greece					Χ	
Ireland					Χ	
Israel					Χ	
Italy	Χ	Χ	Χ	Χ	Χ	Χ
Japan					Χ	
Korea	Χ	Χ	Χ	Χ		
Latvia	Χ	Χ	Χ	Χ	Χ	Х
Luxembourg	Χ	Χ	Χ	Χ		
Mexico	Χ	Χ	Χ	Χ	Χ	Х
Netherlands	Χ	Χ	Χ	Χ	Χ	Χ
New Zealand	Χ	Χ	Χ	Χ	Χ	Х
Norway	Χ	Χ	Χ		Χ	
Poland	Χ	Χ	Χ	Χ	Χ	Х
Slovenia					Χ	
Spain	Χ	Χ	Χ	Χ	Χ	Х
Switzerland	Χ	Χ	Χ	Χ	Χ	Х
Turkey					Χ	
United Kingdom					Χ	
Argentina					Χ	
Brazil	Χ	Χ	X	Χ		
Indonesia	Χ	Χ	Χ	Χ		
Kazakhstan					Χ	
Lithuania					Χ	
Malta					Χ	
Russian Federation	Χ	Χ	Χ	Χ		
South Africa	Χ	Χ	Χ	Χ		

3.2. Developing spending autonomy indicators

21. This paper follows the approach used by Bach et al. $(2009_{[2]})$ to construct a spending power indicator. The indicator set is shown as an "indicator tree" with low-level indicators (LLI), medium-level indicators (MLI) and the high-level summary indicator (HLI) (Figure 4). HLI's are constructed for each of the five policy sectors. A more specific indicator tree for the education sector can be found in Annex C.

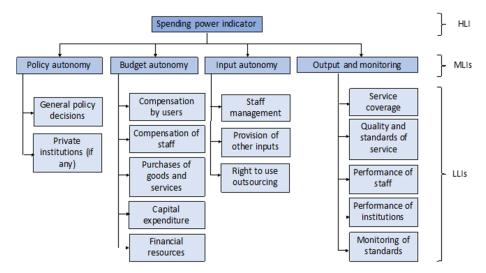


Figure 4. Spending power: sample indicator tree

22. In order to construct a composite indicator from individual survey questions, the country responses to each question are transformed into LLIs using the values shown in Table 2, which describe one specific aspect of decision-making in each sector. Indicator values are scaled between 0 and 10, with a higher value associated with greater decentralisation. While indicator values are scaled between 0 and 10, the ordinal ratings are arbitrary (Table 2). If answers to the questionnaire indicated shared responsibilities, which was often the case, the arithmetic mean of the indicator values for the decision-making levels involved was used.

Table 2. Coding values

Level of decision maker	Indicator value
Central	0
Regional	3
Local	7
Provider	10
Not applicable response	Not included
Social security fund (used for aged care indicators only)	0
Other (included in health survey only)	Not included

- 23. Service providers are considered a separate decision-making level receiving the highest indicator value. This implies that a move of spending responsibilities from a state or local government to providers increases sub-national autonomy. While allocating spending power to providers tends to bring services closer to citizens, it does not necessarily increase sub-central government power over a specific service. This should be taken into account when interpreting the results.
- 24. The average of each LLI is aggregated using the random-weights technique to form four MLIs, which represent the four autonomy categories. Using random weights assumes complete uncertainty about the most appropriate value of each of the individual weights used to construct the sub-index and overall summary indicator. This technique uses 1 000 sets of randomly generated weights for each LLI and then adds these weighted LLIs to obtain the MLI, so 1 000 intermediate indicators for each sub-central level of government are calculated. Accordingly, the resulting distribution of MLIs reflects the possible range

- of values. The figures for intermediate and summary indicators hence show both indicator values and confidence intervals derived from these distributions. The random weights are drawn from a uniform distribution between zero and one and then normalised so as to sum to one, for all LLIs forming the MLI. The MLIs are aggregated to yield a single high-level indicator (the HLI) portraying an overall picture of autonomy (Sutherland, Price and Joumard, 2006_[5]).
- 25. The strengths and weaknesses of composite indicators largely derive from the quality of the underlying variables (OECD and European Commission, 2008_[10]). While attempts were made to ensure the questions were clear and unbiased, the data are based on country survey responses. The accuracy of data will be affected by the interpretation of questions, the understanding and judgement of the responder and non-response errors. Further, though the brevity of the questionnaire and answer options was essential to improve comparability between countries and reduce the administrative burden on countries, the limited available response options made elaboration of country specificities difficult.

3.3. The role of providers as decision-makers

- 26. Service providers, including schools, long-term care facilities, transport companies, housing organisations and hospitals, represent an important level of decision-making. Greater provider autonomy implies a transfer of decision-making responsibility from a government level to the provider level. Providers are included in the questionnaire due to their important role in administrative decentralisation, despite providers not being a democratically controlled level of government. Given the providers' integral role in ensuring services are provided efficiently and equitability, their role in shaping spending and policy frameworks needs to be accounted for.
- 27. In many countries, there has been decentralisation of management and administration to the provider level, associated with the introduction of quasi-markets and competition. This type of decentralisation generally aims to make service delivery more efficient and flexible, and stimulate innovations. That said, many sub-central services are monopolistic in nature, and appropriate regulation of provider responsibilities is required. For example, for some services such as health care, where there is asymmetric information between patients and care staff, and a service may be vital, governments will likely have to set limits on the right of providers to define user fee levels.

3.4. Interpreting indicators across sectors

- 28. Differences in the design of the two questionnaires results in differences between the health data and the data collected for the other four sectors. The health survey was not specifically formulated to construct indicators, and as such, the checkbox questions on responsibilities between levels of government allowed for the following possible responses: central government; regional government; local government or 'other'. Given the varying nature of the 'other' responses, this has not been included in the spending power indicator. This means there is effectively a ceiling on the indicator values for health health cannot have an indicator value higher than seven whereas the indicator limit for all the other sectors is ten. This reduces comparability across the sectors, and sectors cannot be directly compared within countries, when looking at health and another sector.
- 29. It should also be noted that while the data collected on health care focused mainly on hospitals, there are also some questions on decision-making in health care more broadly. As such, the institutional indicator cannot be defined as solely quantifying the level of decentralisation of hospitals, as all survey questions are used to construct the indicator.

Box 2. Survey results compared to the previous pilot study

Bach et al. (2009_[2]) presented a pilot study that constructed an indicator of the spending power of sub-central governments. The indicator was produced for primary and secondary education, public transportation, childcare and elderly care, with five countries participating – Denmark, Germany, Portugal, the Slovak Republic and Switzerland. In addition, Ireland returned a questionnaire on primary and secondary education. Results from the pilot study tended to confirm the limited discretion of sub-national governments over their own budget. Education in particular was strongly shaped by central government regulation. Federal countries also tended to grant more spending power to sub-national governments than unitary countries.

With some technical amendments and a greater amount of participating countries, a similar framework was applied in this paper. Figure 5 compares the results from this pilot study with the more recent survey data. Further figures that specify differences in the MLIs can be found in Annex C. Ireland, Portugal and the Slovak Republic have not been included in the figures, as they did not provide responses to the recent questionnaire. Similarly, no updated data is available for Germany's education sector.

The technical methodology between the pilot and current indicators is the same, but the indicator coding and the survey questions differed slightly. The previous study also specified five areas of autonomy, whereas the current survey combined output and monitoring autonomy into one MLI, given the joint nature of decisions about output and quality, and whether and how monitoring outputs should be arranged. Combining output and monitoring also increased the sample of questions in this autonomy classification. Further, the transport section in the pilot survey only focused on road transport, whereas the updated survey focused on a greater scope of public transport options, including rail and buses.

The results for the education and long-term care sector are similar between the pilot study and the new data. The resulting indicators in the transport sector differ, however, likely due to the broader scope of transport services in the recent survey (*e.g.*, Denmark).

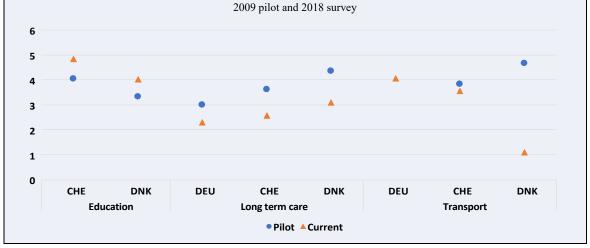


Figure 5. Comparison of high-level spending power indicators

4. Results across the five policy sectors and classifications of autonomy

30. This section uses the indicator methodology described above to assess and compare the sub-national spending power of 37 countries in the five selected policy sectors. Many of the charts below compare across countries, to assess similarities across spending power and autonomy classifications. Other charts average indicator scores across all participating countries, across a sector or across an autonomy classification, to highlight the high-level features of the data. The higher the spending power indicator value, the greater is subcentral autonomy over spending in that specific policy or autonomy area.

4.1. General results

- 31. The institutional structures of OECD and partner countries provide many cases of intergovernmental relations, from highly decentralised federal frameworks, found in Canada and Switzerland, to highly centralised unitary systems, in the case of Ireland and Greece. Local governments in some unitary countries, have a higher share in public spending than local and regional governments together in federal countries (Blochliger and King, $2006_{[6]}$). Countries operate more on a decentralisation and federalism spectrum, rather than a duality. South Africa and Spain, for instance, have quasi-federal systems and Italy is a highly regionalised unitary state.
- 32. The general results of the spending power indicators are shown below. Any conclusions using the spending power indicators must be taken with care since those indicators represent only one point in time. To assess dynamics, one needs to observe spending authority and its interactions over several time periods. The spending power indicators also rest on data retrieved through questionnaires, which require a thorough knowledge of the institutional and regulatory background of each policy area on the part of the respondent. Different respondents may have interpreted questions differently.
- 33. Figure 6 and Figure 7 below show the average spending power indicator across participating countries. As shown in Figure 6, the spending power of sub-national decision-makers tends to be lowest in health and long-term care, and highest in housing, transport and education. COFOG data confirm that sub-national expenditure shares for education are higher than those for health. This aligns with the hypothesis that over recent history, education and transport have been decentralised, while health care responsibilities have sometimes been re-assigned to central government (OECD, 2016c_[11]). The lack of COFOG II data makes comparisons with expenditure shares for long-term care, housing and transport difficult.
- 34. When looking at decentralisation across the different aspects of autonomy, there is considerable variability in the level of decentralisation in the social housing sector, and to a lesser extent, in transport and education (Figure 7). This variability is generally caused by greater decentralisation of input decisions. Inputs tend to be the most decentralised whilst policy autonomy and output and monitoring autonomy tends to be the most centralised. More specifically, policy autonomy in the long-term care and health sectors are the most centralised while policy decisions are least centralised in the social housing sector. Budgeting is most decentralised in the education sector, inputs are highly decentralised in the social housing sector, and output and monitoring autonomy is most decentralised in the transport sector.
- 35. The way responsibilities should be assigned between each policy area depends on a large set of parameters and is country-specific. However, these findings generally align with what would be expected. For instance, sub-national governments are more likely to

have responsibility for the implementation, financing and management aspects of service delivery, rather than setting broad policy objectives. For example, one might expect that central governments would be eager to monitor key service sectors, but providers are more likely to decide about the transit times of public transport services.

- 36. The delivery of public services, namely health and education, can have direct and profound impacts on income inequality and living standards, and thus would be expected to involve some centralised decision-making in the provision of these services. Certain policy aspects of most services lend themselves to some form of central government oversight, in terms of setting minimum access and quality requirements and data standards. For example, these minimum requirements may be in terms of immunisation requirements in the health sector, setting curricula in the education sector, or regulating education or training requirements in certain professions. The setting of national policy objectives may thus be justified on the grounds that some services have broader national, and sometimes international, implications.
- 37. The typical centralisation of monitoring and policy levers is also expected from an accountability and equity viewpoint. Fiscal decentralisation can also obstruct the redistributive role of the central government. With high levels of sub-national spending autonomy, the central government may not have sufficient resources to reduce any large income differences across the regions of a country. Centralised monitoring may be needed to reduce inequalities and ensure a broad access to services. Central governments in some countries achieve the same effect by carrying out equalisation transfers to guarantee a minimum level of public services and cater to basic needs for the entire population. However, this may not be possible in cases of insufficient central resources. Centralised monitoring and policy is also beneficial in the absence of strong local democratic processes, where sub-national governments do not feel accountable for their spending behaviours.

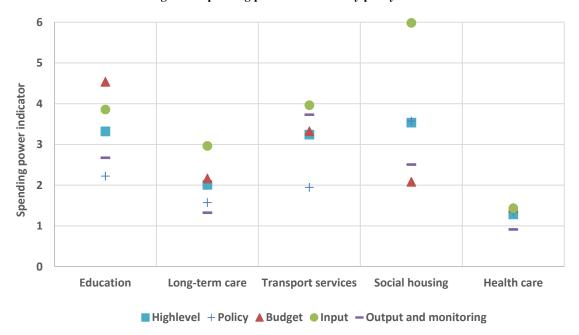


Figure 6. Spending power indicators by policy area

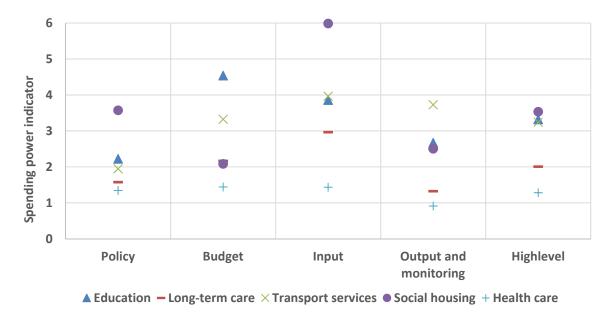


Figure 7. Spending power indicators by classification of autonomy

4.2. Results by country

38. Figure 8 shows the results when averaging the high-level indicators of the policy areas, excluding health care. Health care has been excluded because of the different coding values, and because many countries only responded to the health survey.

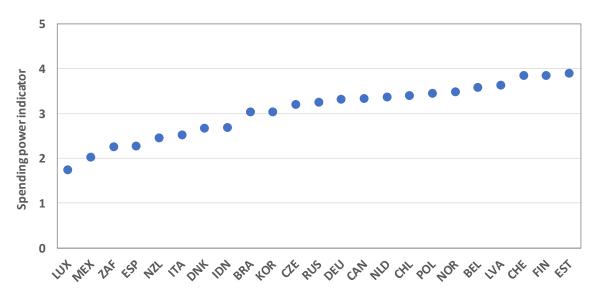


Figure 8. Average high-level spending power indicator

Note: Calculated as the arithmetic average across education, long-term care, transport and housing.

- 39. The results show a country range from highly centralised in the case of South Africa and Luxembourg to greater decentralisation in Finland and Estonia. Nonetheless, the spending power indicators do not vary considerably and no country has an average indicator greater than four, suggesting there is less power at the local and provider levels, compared to the central levels.
- 40. For the education sector specifically, Estonia is the most decentralised of the surveyed countries, but policy autonomy in Estonia remains relatively centralised (Figure 9 and Table A C.2. Comparisons of high-level spending power indicators across federal and unitary countries

	Federal	Unitary
Primary and secondary education	3.2	3.4
Long-term care sector	1.7	2.2
Transport services	3.4	3.1
Social housing	3.4	3.6
Health care	1.6	1.0

- 41. Figure A C.5). The Czech Republic is at the median, although fairly heterogeneous. By contrast, Belgium, Korea and Spain have more homogeneous decentralisation across the classifications of autonomy in the education sector. There are a number of countries with highly centralised education systems, including Luxembourg, Italy and Chile.
- 42. Policy autonomy is generally the most decentralised aspect of education. In Finland, Indonesia, Mexico and Spain, output and monitoring is the most centralised aspect of education, while it is on par with policy autonomy in some other countries.

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Figure 9. High-level spending power indicators in the education sector

43. Denmark, Finland and Latvia have the most decentralised long-term care sectors, with Denmark and Latvia having high levels of input decentralisation (Figure 10 and Figure A C.6). Korea, Spain and the Russian Federation have centralised long-term care systems. Germany has the highest level of variability across the aspects of autonomy, with centralised budgeting decisions but decentralised input decisions.

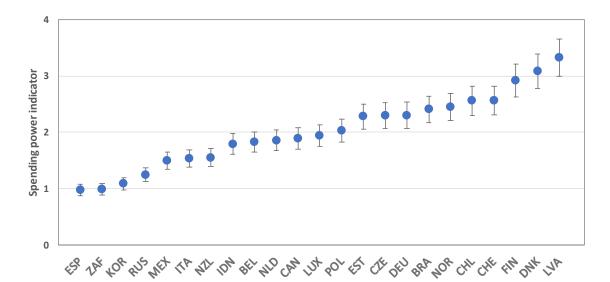


Figure 10. High-level spending power indicators for the long-term care sector

44. Similar to the education sector, policy is almost always the most centralised aspect of decision-making in the transport sector (Figure 11 and Figure A C.7). There is high dispersion of the degree of decentralisation across autonomy classifications in some countries, including Belgium, Germany and the Netherlands.

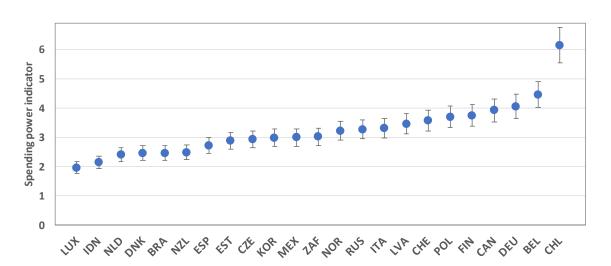


Figure 11. High-level spending power indicators for the transport sector

45. The social housing sector is the most decentralised on average, driven by high subnational power in input decisions. Denmark is the most centralised, Estonia is the most decentralised, while the Czech Republic is at the median (again). Policy decisions are also more decentralised relative to other sectors, while budgeting decisions tend to be relatively more centralised (Figure 12 and Figure A C.8).

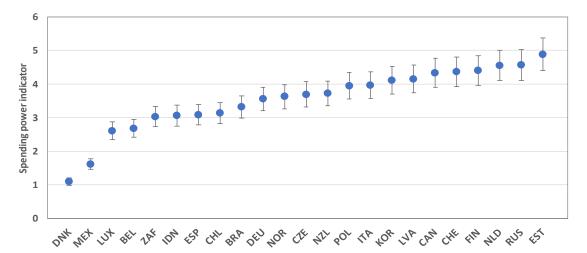


Figure 12. High-level spending power indicators in the housing development sector

46. There is little dispersion of responsibilities across governments within and between countries in the health care sector. Malta and Finland are outliers, but their output and monitoring decisions are still quite centralised. There is also a number of countries with completely centralised health care systems. Although still quite balanced, Denmark and Malta have the largest distribution across classifications of autonomy, with budgeting decisions in Denmark more decentralised than output and monitoring decisions, and input and budgeting decisions in Malta more decentralised than policy decisions (Figure 13 and Figure A C.9).

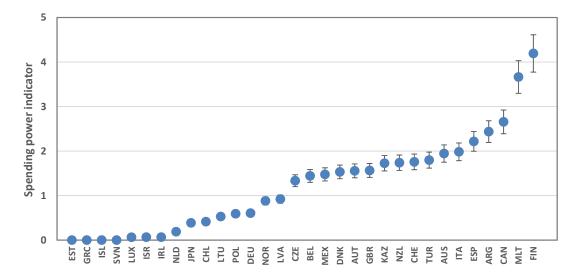


Figure 13. High-level spending power indicators in the health care sector

4.3. Decisions by level of decision-maker

47. Beyond providing a spending power indicator (which provides insight into the degree of decentralisation in an economy), it is also important to break down the data and

assess the dispersion of decision-making responsibilities for each level of decision-maker in each sector. This is done by assessing what proportions of decisions are made at each level of government for a specific policy sector. For instance, Table 3 highlights that on average 50% of decisions in education are made by central governments while only 41% of decisions are made at the central level for social housing. Sections 4.4 to 4.8 below detail these findings across the five service sectors, with additional information available in Annex A.

Table 3. Dispersion of responsibilities across decision-making entities, by sector

Proportion of decisions-making responsibility, by sector and governing level

	Central	Regional	Local	Provider	Social security fund	Not applicable	Other
Education	50	26	32	29		6	
Long-term care	51	37	27	21	7	7	
Transport services	54	34	39	39		3	
Social housing	41	28	53	27		7	
Health care	62	34	14				29

Note: This assessment is calculated by taking the proportion of countries that provided a 'yes' response (that a particular level of government is responsibility for deciding on a particular aspect of service delivery) to each question. These percentages are then averaged across all questions by each decision-making level and sector. This implies that all decisions are given an equal weighting of 1, rather than random weights. Percentages are not necessarily additive to 100 as in some instances multiple levels of government have equal responsibility.

4.4. The education sector

- 48. The education sector surveyed in the questionnaire relates specifically to the primary and secondary education sector, including the administration, inspection, operation or support of schools. As mentioned above, in the education sector, the central government has on average the most decision-making power with it being the sole or shared decision-maker in 50% of the aspects of education surveyed. Despite this, regional governments, local governments, and education providers all have important powers across the countries surveyed, with these entities being a sole or shared decision maker in 26%, 32% and 29% of decisions respectively. These results support the view that the decentralisation of education, especially education financing, has become a global feature.
- 49. This is a positive outcome, as studies show that fiscal decentralisation may raise the overall share of the budget devoted to public investment and education, thus increasing human capital (OECD, 2013b). Many studies also show that fiscal decentralisation may positively affect education performance, as measured by the OECD Programme for International Student Assessment (PISA) (OECD and KIPF, 2018_[4]).
- 50. To the extent that the central government has decision-making responsibility it tends to be most concentrated in policy, and output and monitoring decision making, while local government autonomy is most pronounced in regard to budgeting decisions and education providers have the most power over input decisions (Figure 14 and Figure 15). This aligns with the general hypothesis that areas of education services like setting the curriculum and setting overall standards for schools should be and generally are, centralised, while decision-making around school and teacher management is generally assigned to the sub-national level.

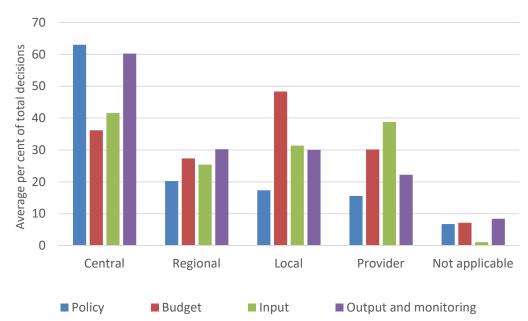


Figure 14. Distribution of responsibilities in education sector across decision makers

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

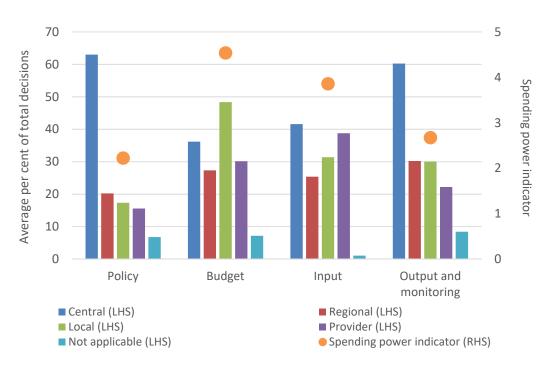


Figure 15. Distribution of responsibilities in education sector across autonomy classification

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

4.5. Long-term care sector

- 51. The long-term care sector includes a wide range of services that are provided over an extended period to people with a reduced degree of functional capacity. The OECD questionnaire focused mainly on services and benefits in the form of institutional care (e.g., nursing homes and assisted living facilities), home care by professional care providers, and included informal care, to the extent that governments offer subsidies, tax-credits or income support to assist relatives or friends acting as caregivers.
- 52. In the long-term care sector, the central government has the most decision-making power, with it being the sole or shared decision-maker in 51% of the aspects of long-term care surveyed. Despite this, regional governments, local governments, long-term care providers and social security funds all have some power across the countries surveyed, with these entities being a sole or shared decision-maker in 37%, 27%, 21% and 7% of decisions respectively.
- 53. Based on arithmetic averages, central government power is by far the most concentrated in decision-making regarding policy aspects of long-term care services, with respondents suggesting that the central government is in charge of 71% of policy autonomy decisions in long-term care. Regional governments have the most autonomy in budgeting, and output and monitoring aspects of long-term care, and the local government is also most likely to be in charge of budgeting (Figure 16 and Figure 17).

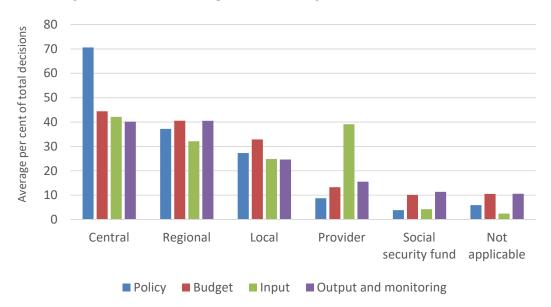


Figure 16. Distribution of responsibilities in long-term care across decision-makers

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all respondents.

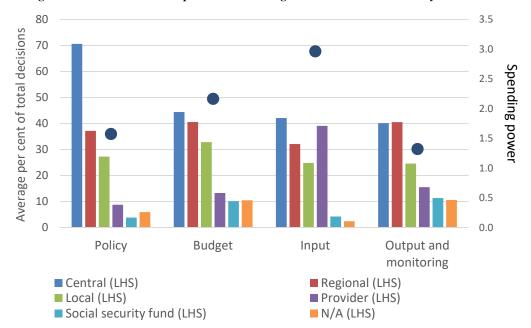


Figure 17. Distribution of responsibilities in long-term care across autonomy classifications

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

4.6. Transport services

- 54. Transport services includes the construction, maintenance, operation and administration of water, road and railway transport systems and facilities, and does not take into account non-scheduled bus services, funiculars, cable cars, chairlifts and air transportation.
- 55. In the transport services sector, the central government again has the most decision-making power on average, but power is more balanced towards transport providers and local governments. In contrast to the long-term care sector, regional governments have the least decision-making responsibilities, on average. There are also differences across the various transport sub-sectors, with rail services more centralised, and less likely to be the responsibility of local governments compared to other transport services. This is consistent with the premise that the local level often lacks the economics of scale to address urban-rural linkages across vast geographical areas, which are best undertaken by central governments. Bus services are more likely to be decentralised than the average, with high decentralisation of budgeting autonomy for bus services.
- 56. The central government responsibilities are relatively balanced across the four classifications of autonomy, but are still more skewed towards policy decisions. As would be expected, local governments are more likely to be in charge of transport services in urban areas, including buses, urban roads and bridges. The responsibilities of transport providers are more likely to be input orientated, especially with regard to the conditions and acquisition of workers (Figure 18 and Figure 19).

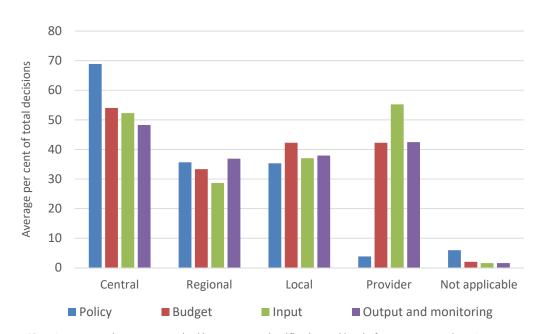


Figure 18. Distribution of responsibilities in the transport services sector across decisionmakers

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

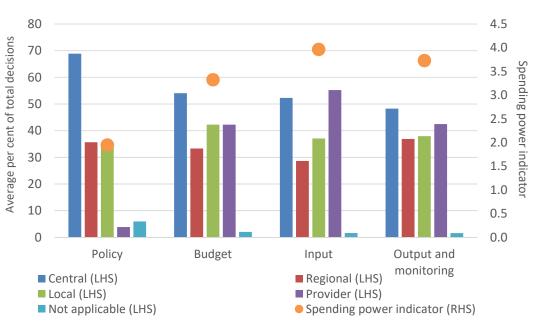


Figure 19. Distribution of responsibilities in the transport services sector across autonomy classification

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

4.7. Social housing sector

- 57. The section of the questionnaire relating to the social housing sector includes decisions relating to the administration of housing development affairs and social housing and the regulation of housing standards. Social housing is defined as housing provided for people on low incomes or with particular needs by government agencies or non-profit organisations.
- 58. The development and maintenance of housing facilities, including social housing, is an important aspect of sub-national service delivery. Access to good-quality and affordable housing is a fundamental need and is a crucial aspect of reducing poverty, increasing social inclusion. Housing development autonomy is most often assigned to local governments, with 54% of decision-making the responsibility of local governments. Central governments are on average responsible for 39% of the decision-making in the social housing sector, and autonomy for regions and providers are lower and fairly equal (Figure 20 and Figure 21).

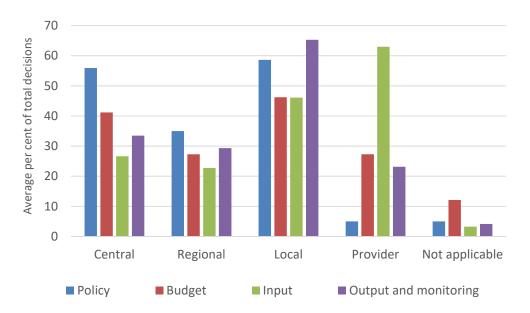


Figure 20. Distribution of responsibilities in the social housing sector across decision makers

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

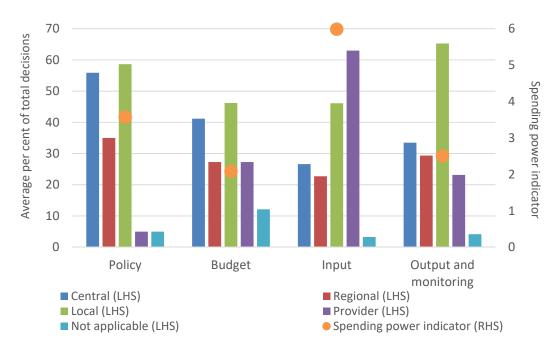


Figure 21. Distribution of responsibilities in the housing development sector across autonomy classifications

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

4.8. Health care

- 59. There is an imbalance between the powers of different decision-makers in health, with 62% of decisions in the sector controlled by the central government. This high centralisation could be due to a range of factors. There are obvious efficiencies that come from having certain aspects of health centralised, for example, data sharing requirements. Secondly, many of the positive social and economic benefits from having a high-quality health care system, maintaining minimum national standards and adequately funding preventative health flow to the country as a whole, rather than being confined to subjurisdictional borders. Further, due to the cost and complexity of many health systems and hospital procedures, a lack of economies of scale can discourage sub-national involvement.
- 60. Central and regional power is relatively diversified across the four classifications of autonomy, but, similar to other service sectors, the power of local governments and providers is more concentrated on aspects of decision-making that involve inputs.

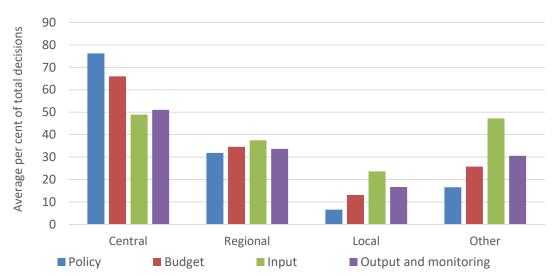


Figure 22. Distribution of responsibilities in the health care sector across decision makers

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

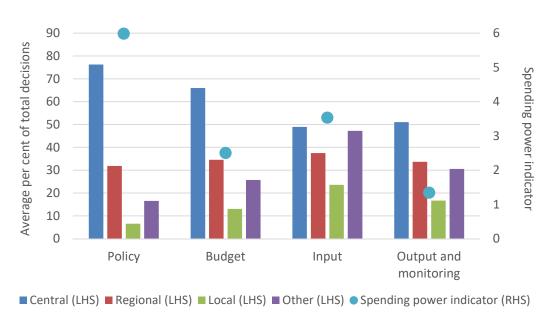


Figure 23. Distribution of responsibilities in the health care sector across autonomy classifications

Note: Survey questions are categorised by autonomy classification and level of government, and 'yes' responses are shown as proportion of all responses.

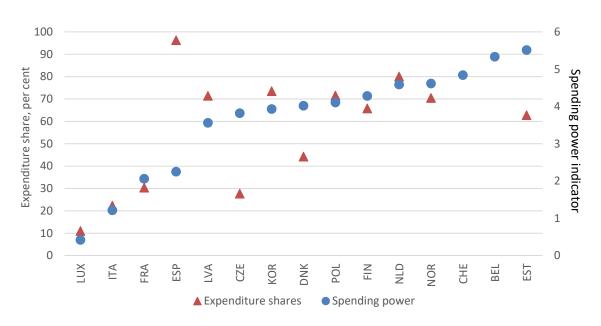
5. Spending power by institutional characteristics

5.1. Comparing spending power indicators and COFOG expenditure shares

- 61. The spending power indicators developed in this paper are meant as a complement to National Accounts expenditure shares, with the view that the accounting nature of expenditure shares implies that they do not capture the various approaches central governments can take to control sub-national spending, even if sub-national spending is high.
- 62. This is because a change in expenditure shares does not necessarily imply a change in effective government responsibility, because so-called "decentralised" expenditure can, in reality, be "deconcentrated" or "delegated" expenditure made on behalf of the central government. Expenditure shares also may not include spending at the provider level if the provider is not a government entity. Spending power indicators aim to provide a broader, more accurate view of decentralisation, by compiling qualitative, detailed information on how responsibilities are allocated across decision-makers, in practice, into a quantitative indicator.
- 63. The figures below compare the spending power indicators to existing National Accounts information in the form of sub-national expenditure and a proportion of general government expenditure, by sector. Figure 24 compares spending power indicator values for education, health care, transport and social housing to expenditure shares. More specifically, education is compared to the COFOG I function "education", health is compared to the COFOG I function "transport"; and housing is compared to the COFOG II function "housing development". There is no specific COFOG function for long-term care. For a number of countries, a lack of sub-national expenditure data has resulted in their exclusion from the figures below, especially for COFOG II data.
- 64. There is a stronger positive relationship between spending power indicators and expenditure shares in the education and health sectors compared with the transport and housing sectors. However, overall, there is little correlation between the two sets of metrics, and expenditure shares are generally higher than the equivalent spending power indicator. This suggests that simple National Accounts expenditure shares may poorly reflect subcentral spending power, because sub-central spending power is more limited than expenditure shares suggest. The inclusion of spending power indicators to complement existing financial data can provide a more comprehensive understanding of sub-national autonomy and authority.

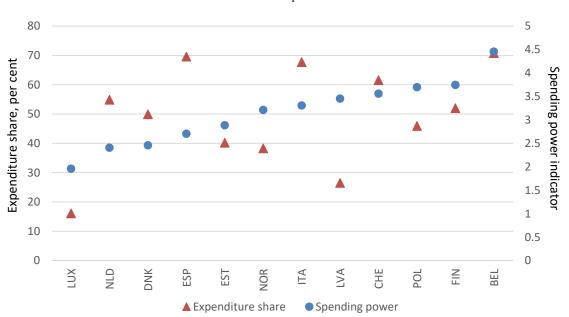
Figure 24. Spending power indicators and expenditure shares

Panel A: Education sector



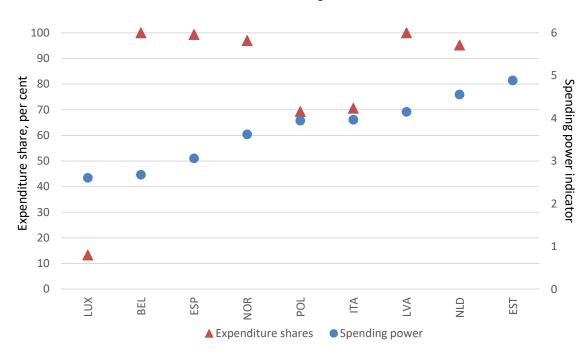
Note: National Accounts data are for 2016 and 2017 for Luxembourg.

Panel B: Transport sector



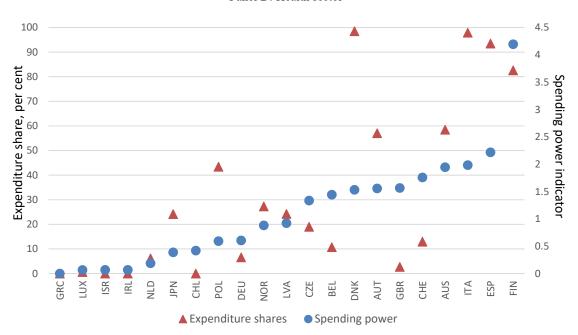
Note: National Accounts data are for 2016 and 2017 for Luxembourg.

Panel C: Housing sector



Note: National Accounts data are for 2016 and 2017 for Luxembourg.

Panel D: Health sector



Note: National Accounts data are for 2016 and 2017 for Luxembourg.

5.2. Comparing spending power in federal and unitary countries

5.2.1. Defining federal and unitary countries

65. Unitary and federal governments have different opportunities for fiscal decentralisation. Federal governments have constitutionally protected sub-national governments and share public power across governments. Given this, the possibility of autonomous decision-making at the sub-central level is obviously stronger. Quasi-subordinate levels in unitary countries have no constitutional powers or responsibilities, and can only exercise the powers that the central government delegates, leaving greater scope for intervention by central governments. That said, decision-making power and responsibilities for public services by sub-national governments vary widely across countries (Phillips, 2018_[1]). The classification of participating countries into federal and unitary categories is shown below in Table 4.

Table 4. Classification of federal and unitary countries

Classification for all participating countries across all sectors

Federal countries	Unitary countries	
Australia	Chile	Luxembourg
Austria	Czech Republic	The Netherlands
Belgium	Denmark	New Zealand
Canada	Estonia	Norway
Germany	France	Poland
Mexico	Finland	Slovenia
Spain	Greece	South Africa
Switzerland	Iceland	Turkey
Argentina	Italy	United Kingdom
Brazil	Ireland	Indonesia
Russian Federation	Japan	Lithuania
	Korea	Kazakhstan
	Latvia	Malta

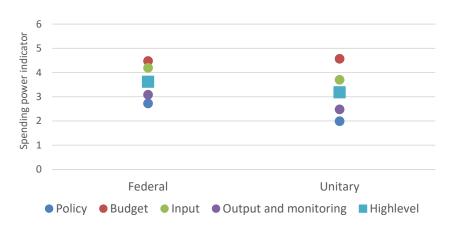
Note: It is difficult to classify all countries as either federal or unitary. Spain for instance is considered a quasi-federal country.

5.2.2. Spending power across federal and unitary countries

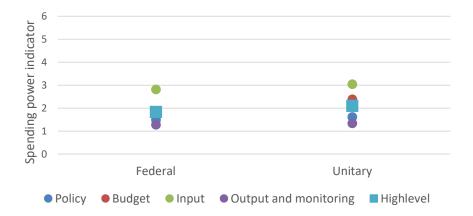
66. When comparing the results of federal and unitary countries, federal countries grant more spending power in the transport and health sectors (somewhat due to greater input and policy autonomy in federal countries), while unitary countries grant more sub-national autonomy in the other three sectors.

Figure 25. Comparing spending power indicators across federal and unitary countries

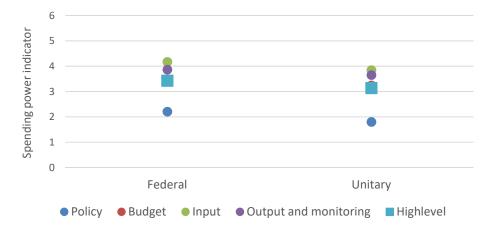
Panel A: Education

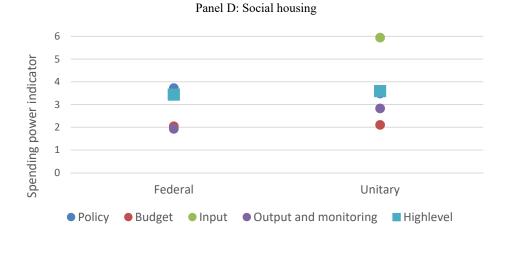


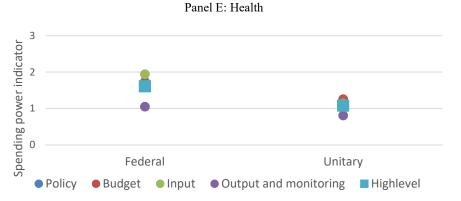
Panel B: Long-term care



Panel C: Transport







5.2.3. The complexity of shared spending power in federal and unitary countries

- 67. Shared responsibilities between different levels of governments affect the efficiency of intergovernmental fiscal relations. Table 5 summarises the extent to which decision-making is shared across government levels, by showing how often more than one box was ticked in the questionnaire.
- 68. As shown in the table below, it is rare for competences to be truly exclusive. Most responsibilities are shared across levels of government, either through explicit legislation or through residual policy acquisition. Shared responsibilities are spread unevenly among countries, but federal countries tend to share responsibilities more frequently than unitary countries, which aligns with the findings of (Bach, Blöchliger and Wallau, 2009_[2]). This is likely due to the constitutional structure of federations, where regional governments tend to have more power in the upper chamber or legislature, and have authority over municipalities in their jurisdiction. The number of shared responsibilities also depends on the service sector. Responsibilities tend to be more often shared in public transport services and social housing, compared with the other sectors. This likely reflects the network industry characteristics of the transport sector, and the expansive geographical coverage and scale of many transport services.

69. Greater decentralisation to sub-national actors increases the need for co-ordination in itself, but is even more necessary for policy areas where there is a lot of shared decision-making. Further, unclear assignments of responsibilities present a risk for overall efficiency and local political accountability. Shared responsibilities can be an issue when roles overlap, which generates inefficiencies and duplication in intergovernmental relations, and reduces transparency and accountability, as the public is unsure which level of government is responsible for the delivery of public services and government spending. Shared responsibilities make it more crucial to establish governance mechanisms to manage these joint responsibilities, including platforms for dialogue, fiscal councils and contractual arrangements (Allain-Dupré, 2018_[12]).

Table 5. Shared responsibilities

Proportion of decisions where more than one government level is involved (%)

	Education	Long-term care	Transport services	Social housing	Health care
Austria	•				13
Australia					78
Argentina					100
Russian Federation	34	38	44	26	
Belgium	59	42	16	23	39
Germany		35	82	45	20
Canada	11	23	92	73	13
Switzerland	28	21	54	48	65
Spain	21	68	76	93	19
Mexico	83	78	76	33	77
Brazil	69	68	62	80	
Average across federal countries	44	47	63	53	47
Ireland					0
Greece					2
Malta					2
Iceland					7
Japan					24
Kazakhstan					26
United Kingdom					29
Lithuania					31
Slovenia					31
Israel					49
Turkey					56
Chile	10	25	28	35	2
New Zealand	0	12	5	56	36
Luxembourg	6	38	13	28	32
Latvia	19	36	42	15	16
Denmark	23	11	33	25	67
Norway	37	35	37	31	26
Finland	31	31	42	22	44
Netherlands	0	60	45	40	26
Italy	11	58	44	59	29
South Africa	2	34	74	61	
Poland	43	44	61	48	41
Estonia	38	58	51	78	20
Czech Republic	47	48	59	39	59
France	50				
South Korea	67	14	48	73	
Indonesia	67	67	31	60	
Average across unitary countries	28	38	41	45	28

Note: The above calculations take account of any 'not applicable' or unanswered responses for each country. Spain is a quasi-federal country. Countries are ordered based on increasing average proportion of decisions.

5.3. Comparing spending power across countries with different types of fiscal constitutions

- 70. There are many ways to understand and categorise the concept of sub-central power. For example, categorising countries based on their constitutions and fiscal rules allows countries to be further classified based on their centralised and decentralised characteristics. Fiscal constitutions cover constitutional law as well as selected post-constitutional legislation like basic fiscal and financial laws.
- 71. Using the country categorisation specified in (Blöchliger and Kantorowicz, 2015_[13]), spending power indicators of federal countries are ordered by fiscal constitutional types in Figure 26 and Figure 27 (see Box 3). The small sample size should be noted when interpreting the results. These results assess the extent to which decentralisation can be clustered by fiscal constitutions. A country with a decentralised fiscal constitution should have a higher spending power indicator, as they should have greater sub-central fiscal autonomy. The results suggest that countries with integrated fiscal constitutions are generally more centralised than those with decentralised fiscal constitutions. However, this relationship breaks down when counties that are categorised with quasi-decentralised fiscal constitutions are included. The most robust positive correlation between decentralised fiscal constitutions and decentralisation are in the long-term care and health sectors.

Box 3. OECD research on fiscal constitutions

OECD work defines fiscal constitutions as consisting of five building blocks – autonomy, responsibility, co-determination, budget frameworks and stability (e.g., see OECD, 2015). Furthermore, it defines a coherent fiscal constitution as one that gives states similar degrees of autonomy on various budget items and aligns a certain level of autonomy with a matching level of responsibility.

Blöchlinger and Kantorowicz (2015) analyse fiscal constitutions of 15 federations or quasi-federations by means of a set of institutional indicators. They distinguish between decentralised, quasi-decentralised and integrated federal fiscal constitutions. They suggest that in decentralised federations, states enjoy high tax and spending autonomy; face high responsibility (constraints) for their own fiscal policy, have little codetermination power at the federal level; and intergovernmental budget rules and frameworks are relatively weak. The opposite is the case in integrated federations.

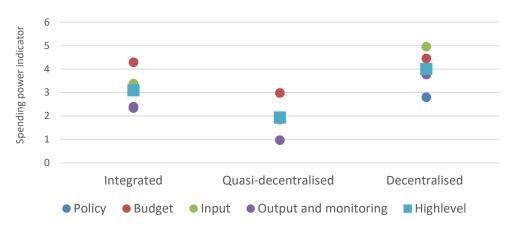
The United States, Canada and Switzerland are federations with a highly decentralised fiscal constitution, featuring what is sometimes referred to as competitive federalism. Spain, Germany and Russia feature relatively integrated or co-operative fiscal constitutions. Mexico, Argentina and Australia are in between.

Their results suggest that a fiscal constitution is more decentralised the higher fiscal autonomy and fiscal responsibility are, as well as when there is lower co-determination and the weaker budget framework. In addition, the completeness of fiscal constitutions is found to be negatively correlated with the autonomy of states, suggesting that federations tend to complete their fiscal constitution with the aim to constrain the autonomy of the states.

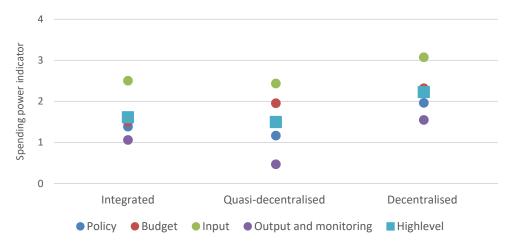
Sources: (Blöchliger and Kantorowicz, 2015[13]; OECD and KIPF, 2015[14])

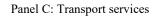
Figure 26. Comparing spending power indicators across decentralised, quasi-decentralised and integrated fiscal constitutions

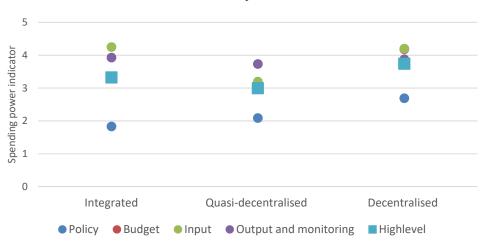




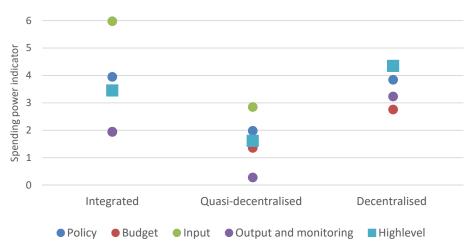
Panel B: Long-term care services







Panel D: Housing development services



Panel E: Health care services

3

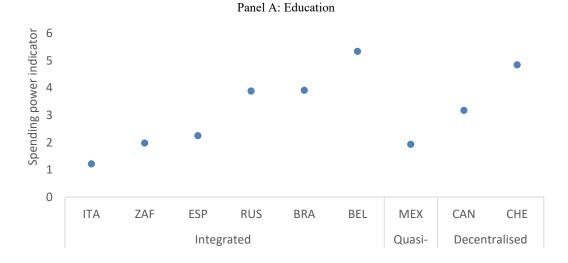
Jote 1

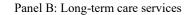
Integrated Quasi-decentralised Decentralised

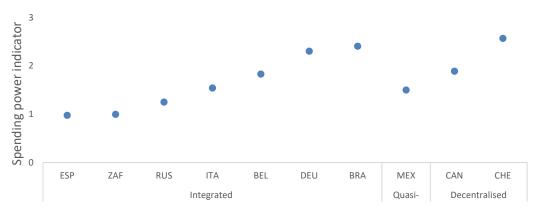
Policy Budget Input Output and monitoring Highlevel

Note: The vertical axis scale on the charts differs.

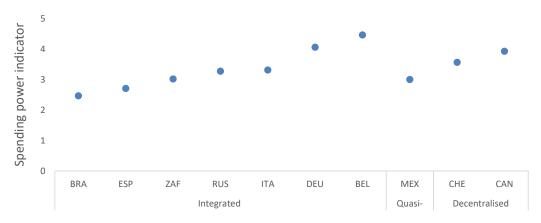
Figure 27. Comparing high-level spending power indicators across differing fiscal constitutions



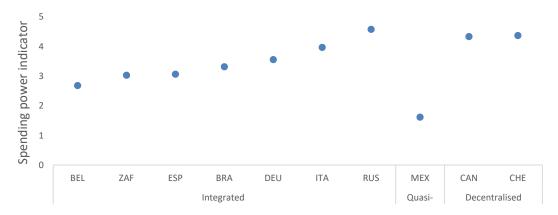


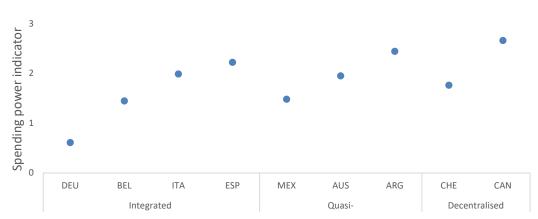


Panel C: Transport services



Panel D: Social housing services





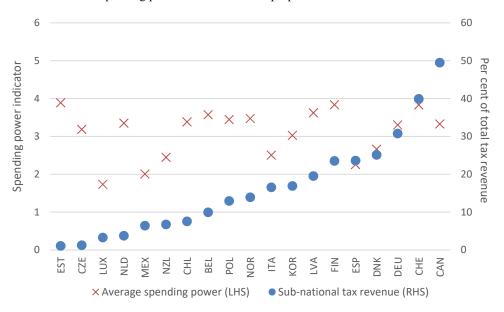
Panel E: Health care services

5.4. Comparing spending power and taxing power

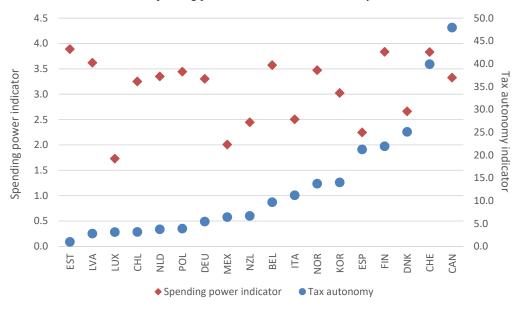
- 72. A frequent challenge for countries with multiple levels of government is the misalignment of responsibilities allocated to sub-national actors with the resources available to them. Decentralised authority over public goods and services induces competitive pressure among different jurisdictions and can promote sound investment and more productive spending. However, OECD and KIPF (2016_[8]) suggest aligning subnational taxing and spending autonomy to reap more of the efficiency effects.
- 73. The term tax autonomy (or taxing power) captures the extent of freedom sub-central governments exert over tax policy. Figure 28 compares tax and spending power. The first chart calculates sub-national taxing power as sub-national tax revenue as a proportion of total tax revenue. The second figure measures taxing power using the OECD's tax autonomy framework (Blöchliger and Nettley, 2015_[15]). There appears to be little correlation between taxing power and spending power. This is mostly caused by less variation in spending power, but the gap is large in some countries, including Belgium, Estonia and Latvia. Consistent with the view of OECD (2014), the spending autonomy indicators vary less among countries than the tax autonomy figures (Blöchliger and Kantorowicz, 2015_[13]). This suggests that at a high-level, the assignment of these core expenditure functions is similar across countries.
- Although further analysis is needed to unpack the relationship between spending and tax autonomy, these initial results may be a concern. Many of the disadvantages of decentralisation lie in the fact that sub-national governments may still depend (or think they can depend) on central governments for funding, which can weaken government accountability, increase financial mismanagement by sub-national governments, create confusion about the roles of the different levels of government, and reduce the agility of governments to change their priorities. Earlier OECD work analysed how sub-national and central governments affect each other's fiscal circumstances (Ahrend, Curto-Grau and Vammalle, 2013_[16]). They found that with respect to bailout expectations, regions with larger possibilities to influence national policies appeared to generally have higher debt, which would indicate that they have a greater capacity to extract concessions from the central government (reflected in a higher perceived probability of a bailout). Further, intergovernmental transfers, covering a large part of sub-central spending in most countries, are associated with slower growth, which could point at common-pool problems and a lack of incentives to raise own-source revenue (OECD and KIPF, 2018_[41]).

Figure 28. A comparison of spending power and taxing power

Panel A: Spending power indicator and the proportion of sub-national tax revenue



Panel B: Spending power indicator and tax autonomy indicator



Note: Average spending power is calculated as the arithmetic mean of high-level spending power indicators across the education, long-term care, transport and social housing sectors. Tax autonomy indicators are for 2014. Tax autonomy is calculated as sub-national decisions taken in autonomy as those labelled a through c in the OECD Fiscal Network Dataset, where a state or local government is autonomous if it sets the tax rate, or central governments may set upper and lower limits to taxation levels only, or central and local governments may set tax reliefs. For more information, see (Blöchliger and Nettley, 2015[15]).

6. Areas of further research

- Differing degrees of spending decentralisation are likely to imply different 75. outcomes. There is a rich literature on the relationship between decentralisation and economic outcomes. The results of empirical research in this area is mixed, but an earlier Fiscal Network paper (Blochliger, Egert and Fredriksen, 2013[17]) found that greater decentralisation, as measured by revenue or spending shares, is positively associated with GDP per capita levels, educational outcomes (as measured by international student assessments), and investment in physical and human capital (as a share of general government spending). Yet an accurate representation of spending decentralisation underpinning these studies is often missing, which could skew results. Studies like this one may be updated using institutional indicators, like the spending power indicator constructed in this paper, to more accurately reflect and better analyse the true relationship between spending decentralisation and public sector productivitiy, for instance. An initial effort in this direction can be seen in the accompanying paper that examines a range of decentralisation measures and how they relate to education outcomes (Lastra-Anadón and Mukherjee, 2019_[19]). Furthermore, the OECD Health Division has collaborated with the Fiscal Network to study how decentralisation influences the productivity of hospitals, using the health spending power indicators and micro-hospital data (Dougherty et al., 2019_[20]). Future research could also focus on the classifications of spending autonomy, and which are more important for higher productivity outcomes and more conducive to achieving policy objectives.
- 76. One area of particular promise are the measures of overlapping competencies. Future analysis may be able to make fuller use of these newly constructed measures. While this paper provides an improved measure of spending power by sub-national decision makers, it too has various drawbacks.
- 77. Often, a multiple-choice-type questionnaire will not capture all details of intergovernmental regulation and co-dependencies. Over time, the spending power survey can be refined to include more detailed questions that capture the diversity of service design more fully. This may include separating the education section of the questionnaire into primary schools and secondary schools, and similarly, surveying all different transport services separately. Future surveys could also aim to better understand the asymmetric approaches to decentralisation across and within countries, where some regional or municipal governments are delegated more power than others. Further thought should be given to the survey construction to ensure that future surveys capture all levels of government, with the need to split the local government level into multiple sub-levels to align with governance arrangements in some unitary countries. Future projects could also aim to identify or categorise decisions by importance.
- 78. Moreover, although the current survey went some way to increasing alignment with COFOG I classifications, compared to the pilot study, it would be useful to align future surveys more closely with COFOG I policy areas. This will allow spending indicators to be better linked and compared with existing financial information. This may however, make the resulting indicators less useful for policy analysis.

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Annex A. Additional information on decision making across five sectors

The education sector

Central government power in the education sector is most concentrated in policy, and output and monitoring decision making, while local government autonomy is most pronounced in regard to budgeting decisions and education providers have the most power over input decisions. The central government has, on average, the most decision-making power in education, with it being the sole or shared decision maker in 49% of the aspects of education surveyed. Despite this, regional governments, local governments, and education providers all have important powers across the countries surveyed, with these entities being a sole or shared decision maker in 26%, 33% and 28% of decisions respectively. While shared responsibilities in the education sector aren't as common as in other sectors surveyed, responsibilities are most likely to be shared between the providers and local government levels.

On average across participating countries, the central governments' largest roles are to establish the compulsory age of school enrolment and to establish minimum requirements for graduation (which is in the policy autonomy classification) with 91% of respondents suggesting that these are the responsibility of central governments. Central governments also have a significant role in establishing the structure of primary and secondary education systems, establishing the years of school attendance required, and establishing rules and requirements for teacher education/admission (with over 80% of respondents suggesting that this is a central government responsibility in all cases).

The regional government has an important role in the output and monitoring of school institutions and teachers, including: inspecting safety/security of schools (with 48% of respondents suggesting that this is a regional government responsibility); setting administrative incentives for schools (sanctions or rewards) associated with educational results as evaluated against the targets (38% of respondents); implementing incentives (consequences) for high/poor performing schools (33% of respondents); determining whether performance measurements of schools (38%) and teachers (29%) must be used. The regional governments also have a relatively significant role in financing education service, including in financing teachers' salaries and benefits, other than pensions (36% of respondents), which is classified as an area of budget autonomy.

The local government's largest role is in financing the maintenance of existing schools and related buildings with 77% of respondents suggesting that this is the responsibility of local governments. Local governments also have an important role to play in some budgeting responsibilities, like financing extra-curricula activities (55% of respondents); financing contracted and purchased services, including student meals and cleaning) (59% of respondents); and financing other resources including fuel, electricity, communications and insurance (and things not classified as teaching supplies or capital) (64% of respondents).

Providers of education include the head of a school, school boards, teachers, parents' associations, teachers' committees, and student representation. As would be expected, the greatest autonomy area for providers is in regard to the inputs of school institutions, including teachers, materials and suppliers. The providers largest role is in selecting the type of IT equipment used in schools (laptops, computers, software, projectors etc.) with

90% of respondents suggesting that this is the responsibility of providers. Providers also have important roles in deciding the employment status of teachers (e.g. short-term contract, ongoing employment) (57% of respondents); deciding on the placement of teachers across different schools (50% of respondents); hiring and firing teaching and non-teaching staff (55% of respondents); establishing salary scales and non-pension benefits for non-teaching staff (46% of respondents); and selecting textbooks (73% of respondents).

In regard to the spending power indicator, Estonia has the most decentralised education sector, followed by Belgium. However, across different autonomy classifications, Finland is the most decentralised in policy, the Netherlands in budget and input and Estonia in output and monitoring. Overall, the budget autonomy aspects of the education sector are the most decentralised.

Long-term care sector

In the long-term care sector, the central government has the most decision-making power, on average, with it being the sole or shared decision maker in 49% of the aspects of long-term care surveyed. Based on arithmetic averages, central government power is by far the most concentrated in decision making regarding policy aspects of long-term care services, with respondents suggesting that the central government is in charge of 71% of policy autonomy decisions in long-term care. Regional governments have the most autonomy in budgeting, and output and monitoring aspects of long-term care, and the local government is also most likely to be in charge of budgeting.

The central governments' most likely role is determining the type of public funding for private institutions, in the form of subsidies, tax exemption etc., which is included in the policy autonomy classification. 91% of respondents suggested that this is the responsibility of central governments. Central governments also have a significant role in determining the level of public funding for private institutions (82% of respondents); setting the legal framework in the form of a law or regulation establishing objectives, rights and obligations in elderly care (86% of respondents) and around health and elderly care insurance (82% of respondents); deciding whether cash benefits are subject to taxation (which is classified as budget autonomy) (86% of respondents); and establishing minimum requirements for the education of medical staff of public and private care providers (which is included under input autonomy) (77% of respondents).

The power of regional governments is broadly balanced between the various classifications of autonomy. That said, regional governments generally have more decision-making power than local governments, providers and social security funds across all autonomy aspects in the long-term care sector. Common roles of regional governments across participating countries include deciding on budget allocation among care institutions within the same region or municipality, which is an important element in budgeting decision making (55% of respondents suggested this is a sole or shared responsibility of regional governments); setting the legal framework (e.g. a law or regulation establishing objectives, rights and obligations in elderly care) (38%); granting concessions for opening of private care providers (care institutions and/or professional providers of home care) (45%); financing staffs salaries and benefits in public care institutions/public professional providers of home care (50%); and opening or closing of care institutions (50%).

Similar to the education sector, local governments have the largest role in deciding on the inputs into long-term care services. 50 and 55% of respondents suggested that local governments have the responsibility to finance new long-term care institutions and the

maintenance of existing long-term care institutions respectively; 50% suggested that local governments have the responsibility of opening/closing care institutions; and 36% suggested that local governments have the responsibility of finalising contracts on service provision with professional providers for home care.

In the long-term care sector, the provider level could include private or public nursing homes, professional home care providers and long-term care facilities, and not-for-profit organisations. It could also involve informal care provided by caregivers such as spouses/partners, but many survey questions are asked in a manner that specifies public or private entities. Common roles of local governments across participating countries include finalising contracts on service provision with care institutions (45% of respondents suggested this is a sole or shared responsibility of local governments); hiring and firing of medical, nursing or other staff (e.g. cleaners) of public care providers (50%); determining which services can be outsourced (55% of respondents); and choosing external providers for services to be outsourced (59%). On average, social security funds have a limited role in the long-term care sector, but are most likely to be involved with budgeting and output and monitoring decisions. Their biggest area of responsibility is in regard to paying cash benefits/allowances to care recipients (which are to be spent for care services, primarily for home or informal care), where 27% of respondents advised that this is a responsibility of social security funds.

In regard to the spending power index, Latvia has the most decentralised long-term care sector, followed by Denmark. However, across different autonomy classifications, Norway is the most decentralised in policy, Denmark in budget, Latvia and input and Poland in output and monitoring. Overall, the input autonomy aspects of the long-term care sector are the most decentralised.

Transport services

In the transport services sector, the central government again has the most decision-making power on average; however, power is now more balanced towards transport providers and local governments. In contrast to the long-term care sector, regional governments have the least decision-making responsibilities, on average.

The central governments responsibilities are relatively balanced across the four classifications of autonomy, but is still more skewed towards policy decisions. 82% of respondents stated that setting minimum environmental and emissions standards is the responsibility of central governments; 86% of respondents stated that determining the level and type of public funding for private transport providers (e.g. subsidies, tax exemption for providers) is the responsibility of central governments; 91% of respondents stated that financing the construction of highways is the responsibility of central governments and 86% of respondents stated that deciding the location of railway infrastructure and stations is the responsibility of central governments.

Regional governments generally have less power than local governments in the transport sector, with 34% of respondents, on average, suggesting that a decision in the transport sector is the sole or shared responsibly of regional governments, compared to 39% for local governments. Common roles of regional governments across participating countries include determining regional public transport policy (59% of respondents suggested this is a sole or shared responsibility for regional governments); deciding how a route is serviced (59% of respondents); financing the construction of bus, tramway or underground infrastructure (64% of respondents, establishing reductions and concessions on public

transport (59% of respondents); deciding the location of roads, bridges and tunnels (64% of respondents); and setting of timetables/transit times for public trains (59% of respondents.

As would be expected, local governments are more likely to be in charge of transport services in urban areas, including buses, urban roads and bridges. Indeed, some common roles of local governments include determining urban public transport policy (82% of respondents suggested this is a sole or shared responsibility for local governments); deciding how a route is serviced (64% of respondents); financing the construction of bus, tramway or underground infrastructure (73% of respondents); financing the construction and maintenance of urban roads and kerbs (91% of respondents); financing the construction of park and ride/walk parking spots (82% of respondents); deciding on maintenance of bus, tramway or underground infrastructure (73% of respondents); and opening/closing of public bus routes and setting timetables (73% of respondents). Further, although local governments, on average, have responsibility for financing the construction or maintenance of some significant aspects of the transport systems, they also have some control over cost recovery, including by setting fares/tariffs for buses (73% of respondents, which is the highest proportion for any decision-making level); setting fines for parking tickets (73% of respondents); and establishing reductions and concessions on public transport (64% of respondents).

The responsibilities of transport providers are more likely to be input orientated, especially in regard to the conditions and acquisition of workers. In the transport sector, providers could include railway operating companies, railway construction companies, bus companies, freight companies etc. Some common responsibilities of providers include financing the acquisition of new buses and new trains (82 and 59% of respondents suggested this is a sole or shared responsibility for transport providers, respectively); financing drivers' salaries and benefits (other than pensions) (91% of respondents); hiring and firing construction and maintenance workers (86% of respondents); and hiring and firing drivers (95% of respondents). Many transport providers are also responsible for important output and monitoring services, including setting timetables and transit times for public transport lines, monitoring transit times, and providing information to the public on timetables and routes. This did not vary markedly between different public transport services.

In regard to the spending power index, input autonomy is the most decentralised aspect of transport services, followed by output and monitoring, then budget, then policy autonomy. Belgium has the most decentralised service sector overall, while Indonesia has the most centralised. Across different autonomy classifications, Canada is the most decentralised in policy, Switzerland in budget, Belgium in input output and monitoring.

Housing development sector

Housing development autonomy is most likely be assigned to local governments, with 53% of decision making the responsibility of local governments. Central governments are on average responsible for 40% of the decision making in the housing development sector, and autonomy for regions and providers are lower and fairly equal.

Central governments have the most power in the policy autonomy space. That includes their ability in setting standards for disability access (82% of respondents suggested this is the sole or shared responsibility of central governments); setting regulatory housing

standards (safety, building heights, size etc.) (73% of respondents); and determining subsidies or tax exemptions for providers of housing (77% of respondents).

Regional governments are responsible for some important policy decisions including deciding the amount/units and location of social housing (41% of respondents suggested this is the sole or shared responsibility of regional governments); approving the location of new housing/housing developments (41% of respondents); financing the construction of new social housing developments (45% of respondents); and deciding on the allocation of funding for social housing developments among regions, districts or municipalities (45% of respondents). However, the above decisions are generally areas of shared responsibility with the local government, where local governments typically have more power.

The local government has significant responsibility in the output and monitoring aspects of the housing sector, especially in regard to social housing, including selecting the placement of users of social housing (73% of respondents suggested this is the sole or shared responsibility of local governments); and monitoring quality of social housing (73% of respondents). Local governments also have considerable power in the policy decisions including deciding the amount/units and location of social housing (91% of respondents); and approving the location of new housing/housing developments (91% of respondents).

Similar to other service sectors, the power of housing providers, including private developers, and non-profit or private organisations that provide social housing, is concentrated in the input aspects of housing. These include the hiring and firing of staff involved in the construction of housing (e.g. construction workers, architects) (82% of respondents suggested this is the sole or shared responsibility of providers); determining working conditions of staff involved in the construction of housing (e.g. construction workers, architects) and staff involved in the upkeep of housing (e.g. cleaners) (82 and 77% respectively); and determining which services can be outsourced (64% of respondents).

Health care

There is a wide amount of variation between the powers of different decision makers. Most power lies with the central government, which is in charge of 62% of decisions (which were surveyed), in the health sector, on average. The regional government is in charge of 34%, the local government is in charge of 14% and other decision makers have autonomy over 29% of decisions. Central and regional power is relatively diversified across the four classifications of autonomy; however, the power of local governments and providers is more concentrated in aspects of decision making that involve inputs.

Central governments have the most power in the policy autonomy space, but also exhibit significant power across the other aspects of autonomy. Decisions that are significantly influenced by central governments include: setting the level of taxes which will be earmarked for health care (76% of respondents suggested this is the sole or shared responsibility of central governments); setting the total budget for public funds allocated to health care (78% of respondents); setting the legal framework (e.g., a law establishing objectives, rights and obligations in hospitals) (81% of respondents); and regulating private hospital activity (e.g., setting the rules for concessions and funding for private hospitals) (76% of respondents).

Similarly, the decisions making of regional governments is relatively balanced across policy, budgeting, input and output decisions, but is slightly more likely in regard to input decisions. Regional governments are responsible for some important policy decisions including determining the opening or closing of hospital units (42% of respondents

suggested this is the sole or shared responsibility of regional governments); deciding resource allocation between sectors of care (e.g., hospital care, outpatient care, long-term care) (42% of respondents).

Power at the local level is fairly low. Some decisions that local governments are jointly responsible for are: financing the maintenance of existing hospitals (21% of respondents suggested this is the shared responsibility of local governments); hiring and firing staff (24% of respondents); and the planning and provision of necessary hospital infrastructure (26% of respondents).

In regard to the spending power index, input and budgeting autonomy is the most decentralised aspects of health services, while output and monitoring is the most decentralised. Finland has the most decentralised health service sector overall.

Annex B. OECD questionnaire on the spending power of sub-national governments

Definitions for terms used in the questionnaire

Spending power:

Spending power is defined as the ability of a sub-national government to control and influence its own expenditures. With this questionnaire, we want to measure to what extent the rules and regulations that govern the inputs, processes and outputs of sub-national services are under the control of sub-central decision makers.

Levels of government:

In this questionnaire, the levels of government (or decision-making units) are distinguished as:

- Central government: decision makers in the central government (e.g. central parliaments, cabinets, one or several central ministries).
- Regional/state government: decision makers at the regional level (e.g. states, cantons, Länder, provinces, territories) if there is one.
- Local government: decision makers at the local level, including both general and special purpose governments (e.g. municipalities, counties, councils, intermunicipal organisations).
- 1. In the schools sector it could include: school districts.
- 2. In the transport sector, it could include: transport districts, metropolitan transport organisations.
- 3. In the housing sector, it could include: municipal companies.
- Providers: decision makers at provider level.
- 4. In the schools sector it could include: the head of school, school board, parents' association, teachers' committee, student representation.
- 5. In the aged care sector, it could include: public or private nursing homes and aged care facilities, non-profit organisations, public or private professional home care providers, informal care provided by caregivers such as spouses/partners.
- 6. In the transport sector, it could include: public or private railway operating companies, railway construction companies, bus companies, freight companies.
- 7. In the housing sector, it could include: private developers, providers of public housing, non-profit organisations.

Performance measurement systems

A performance measurement system is defined as: the systematic collection of information or data that is then used to monitor or understand what public and/or private services are

being offered or delivered. The motives for the performance measurement system and the information collected will differ between countries and health care areas. Regular collection, use, and/or dissemination of information help to distinguish between ad hoc use of indicators (which are not covered under this questionnaire) and the formal 'performance measurement systems' that we are assessing in this questionnaire.

Some performance measurement systems may focus on efficiency/productivity, whereas others may provide a broader view of service delivery to also measure quality and equity of service delivery.

For example, a performance measurement system may:

- monitor access to different services across geographical areas of the population, or access by specific target groups
- aim to measure and compare costs or outputs of care/services/materials across providers or sub-national governments
- measure performance through qualitative mechanisms in the form of formal external inspections to ensure providers are meeting minimum national standards; surveys on user consumer experience and well-being; and/or league tables that rank specific providers.

FILTERING AND INITIAL QUESTIONS

1. For which country does this questionnaire relate (mandatory):
2. Please provide the email address of the appropriate contact(s):
3. We would greatly encourage you to complete this questionnaire in its entirety, however if you feel that either or both of the options below better reflect the circumstances in your country, please select the appropriate option.
☐ The central government is solely responsible for all aspects of service delivery across all sectors surveyed (education, aged care, transport and housing development). There are no autonomy areas with shared responsibilities. Please ensure all my answers reflect this and include my country in the survey > You do not need to complete any of the 'autonomy' (policy, budget, input, output and monitoring) sections
☐ There are no performance measurement systems established by the central or regional governments for any sectors surveyed (education, aged care, transport and housing development). Please ensure all my answers reflect this and include my country in the survey > You do not need to complete the 'performance measurement systems' sections
All of the above > You do not need to complete the rest of the survey
☐ None of the above > Please continue to the next page and complete all of the survey

PART 1: SPENDING POWER IN PRIMARY AND SECONDARY EDUCATION

This section of the questionnaire relates specifically to the primary and secondary education sector. Specifically, it includes:

- The provision of primary and secondary education
- Administration, inspection, operation or support of schools and other institutions providing primary and/or secondary education
- Scholarships, grants, loans and allowances to support pupils pursuing secondary education

This questionnaire does not cover education provided through home schooling.

For the following questions, please tick the appropriate box for each question. Multiple boxes can be ticked for areas or tasks that involve shared responsibilities/roles. If a question is not currently relevant to your country, try to answer the questions in terms of 'who would likely be responsible for...' before exercising the 'Not applicable' option.

1. Policy autonomy

This section asks to what extent sub-central decision makers exert control over main policy objectives and main aspects of service delivery.

a) Who is responsible for:	Central government	Regional/state government	Schools	Not applicable
General education policy decisions				
Establishing the structure of primary and secondary education systems				
Establishing the compulsory age of school enrolment				
Establishing the years of school attendance required				
Deciding on the hours of school attendance required each day/year				
Deciding on maximum teacher to student ratios				
Establishing minimum requirements for graduation				
Deciding on funding for extra curricula activities				
Establishing rules for student admission to schools				
Establishing school catchment areas				
Private/independent schools			 	
Granting concessions for opening of private schools				

Determining the level or type of public funding for privately managed schools							
Establishing public regulations (e.g. curriculum, exams)							
Enforcing public regulations (e.g. curriculum, exams)							
b) Please feel free to provide any additional information or comments on policy autonomy in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.							

2. Budget autonomy

This section asks to what extent sub-central decision makers exert control over the budget (e.g. is budget autonomy limited by upper level regulation).

a) Who is responsible for	Central government	Regional/state government	Local government	Schools	Not applicable
Compensation of staff					
Financing teachers' salaries and benefits, other than pensions					
Financing teachers' pensions					
Financing non-teaching staff salaries and benefits, other than pensions					
Financing non-teaching staff pensions					
Purchases of goods and services					
Financing teaching supplies and materials, like pens and textbooks					
Financing other resources (e.g. non-teaching supplies, equipment not classified as capital, fuel, electricity, communications, travel expenses, and insurance)					
Financing contracted and purchased services (expenditure on services obtained from outside or outsourced providers including student meals and cleaning)					

Schools	Personnel management - Teachers								
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the school Establishing the budget envelope for student scholarships Financing extra-curricula activities Department of the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites. 3. Input Autonomy This section asks to what extent sub-central decision makers exert control over the civil service (personnel management, salaries) and other input-side aspects (e.g. right to tender	a) Who is responsible for				Saha	ools N			
Schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the school Establishing the budget envelope for student scholarships Financing extra-curricula activities b) Please feel free to provide any additional information or comments on budget autonomy in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.	service (personnel management, salaries) and other input-side aspects (e.g. right to tender								
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the school Establishing the budget envelope for student scholarships Financing extra-curricula activities b) Please feel free to provide any additional information or comments on budget autonomy in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing									
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Schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the school Establishing the budget envelope for student scholarships	in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing								
Schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the school Establishing the budget envelope for student	Financing extra-curricula activities								
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household contributions Deciding on budget allocation among schools Deciding on budget allocation within the									
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schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources Establishing the school budget envelope Deciding on a scale for student/household									
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.) Financial resources	•								
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors etc.)	Establishing the school budget envelope								
schools and related buildings Financing IT equipment (laptops, computers, software upgrades, projectors	Financial resources								
	computers, software upgrades, projectors								
Financing new schools and related buildings	Financing new schools and related buildings								

a) Who is responsible for	Regional/ state government	Schools	Not applicable
Personnel management - Teachers			
Hiring and firing teachers			
Establishing teachers' salary scales and non- pension benefits			
Establishing pension rules and benefits for teachers			
Establishing rules and requirements for teacher education/admission			

Establishing rules and requirements of training for established teachers									
Determining working hours for teachers									
Deciding the employment status of teachers (e.g. short-term contract, ongoing employment)									
Deciding on the placement of teachers across different schools									
Deciding on placement of head teachers/principals across different schools									
Personnel management – Other staff									
Hiring and firing non-teaching staff									
Establishing salary scales and non-pension benefits for non-teaching staff									
Establishing pension rules and benefits for non-teaching staff									
Deciding on working hours for non-teaching staff									
Deciding on the employment status of non- teaching staff (e.g. short-term contract, ongoing employment)									
Other needs									
Selecting text books									
Selecting type/brand of IT equipment (laptops, computers, software, projectors etc.)									
Determining which services can be outsourced (services obtained from outside providers such as cleaning, student meals, etc.)									
b) Please feel free to provide any additional information or comments on input autonomy in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.									
4. Output and Monitoring Autonomy This section asks to what extent sub-ce	4. Output and Monitoring Autonomy This section asks to what extent sub-central decision makers exert control over standards								

This section asks to what extent sub-central decision makers exert control over standards such as quality and quantity of services delivered and devices to monitor and evaluate standards, such as benchmarking.

a) Who is responsible for	Central	Regional/state	Local	Schools	Not	
	government	government	government	Schools	applicable	

Performance of students						
Deciding whether standardised tests must be used						
Deciding on the type and content of standardised tests						
Setting rules for publication of test results						
Curriculum						
Regulating how many hours need to be taught per subject						
Establishing curricula						
Performance of schools and teachers						
Deciding on the performance targets that should be reached by schools						
Deciding on class sizes						
Determining whether performance measurements of teachers must be used						
Determining whether performance measurements of schools must be used (e.g. school inspections)						
Determining safety/security requirements for schools						
Inspecting safety/security of schools						
Setting administrative incentives (sanctions or rewards) associated with educational results as evaluated against the targets						
Implementing incentives (consequences) for high/poor performing schools						
Setting financial or administrative incentives for teachers (sanctions or rewards) as evaluated against targets						
b) Please feel free to provide any additional information or comments on output and monitoring autonomy in the primary and secondary education sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.						

5. Performance measure	ement sy	vstems			
The following questions secondary education sec		out performa	ance me	asuremen	t systems in the primary and
 a) Is the public and/or pri that has been established 					rmance measurement system,
Yes, public					
Yes, private					
Yes, both public and	private				
☐ No					
example, who are the m	ain act	ors, what is rics, definiti	the gen	eral data ood and p	collection and dissemination poor performance. Please feel
				nisms are	a useful component of the
governments' performar	ice mea	surement sy	stem.		
Measurement practice		nechanism is to the perspect ment?			Please provide comments or examples on how the mechanism is used, including at what level it is
	Very useful	Somewhat useful	Not useful	Not used at all	implemented (consequence for individual schools, sub-central governments, teachers etc.) (if applicable)
Performance results (in the form of outputs/outcomes) determine/alter the allocation of funding/resources					
Performance results cause performance targets to be adjusted					
Caps/limits on budgets					
The monitoring of quality assurance of services across the country, or specific target groups					
Minimum national standards					
The monitoring of access to					

specific target groups					
Satisfaction/ experience surveys for the consumer/citizen					
Other (please specify):					
Potential consequences of the p	erforma	nce measu	rement sys	stem	
Public dissemination of performance information					
Public league tables, rankings or ratings					
Following good performance results, additional funding					
Following good performance results, rewards through relaxation of budget rules					
Following poor performance results, financial sanctions through withdrawal of funding or less funding					
Following poor performance results, penalties through increased administrative oversight					
Following poor performance results, technical assistance for improving service delivery					
Other (please specify):					
comments on formal ever performance system. A obstacles to developing the e) Are you aware of any education sector that has performance or the performance or the performance of the per	aluation lternati a performation performance ormance	n processes vely feel mance sys mance mea established e of their su	s and plan free to p tem. surement d by sub-1 ubordinate	s for furt rovide co systems in national g e government	This could include additional ther development the current omments on challenges and in the primary and secondary governments, to monitor their ments?
	s or me	trics, defin	itions of	good and	poor performance, plans for

PART 2: SPENDING POWER FOR THE AGED CARE SECTOR

In this questionnaire, elderly care is understood as services for seniors in a broad sense. It refers to a wide range of services that are provided over an extended period of time to people with a reduced degree of functional capacity, physical or cognitive, and who are consequently dependent on help with basic activities of daily living (e.g. bathing, dressing, eating, getting in and out of bed or chair, moving around and using the bathroom). This care component is not confined to skilled nursing and respite care, but rather frequently provided in combination with help with basic medical services such as wound dressing, pain management, medication, health monitoring, prevention, rehabilitative therapies and services of palliative care.

Elderly care can also be combined with lower-level care related to help with instrumental activities of daily living, such as help with housework, meals, shopping and transportation as well as supervision and a wide range of supportive personal care provided by family caregivers and/or home health care agencies. Training to help older people adjust to or overcome many of the limitations that often come with ageing may also be included.

Elderly care may be provided in a variety of settings and forms of benefits which may vary considerably among OECD member states. This questionnaire focuses on services and benefits which are covered by public funds or social insurance and which can take the following forms:

- Institutional care: Elderly care provided in a public or private institution (e. g. nursing homes, assisted living facilities, community centres, adult day care facilities);
- Home care/individual care: Refers to care services that are provided to recipients at their homes by professional care providers (public or private). In some countries, seniors may receive cash benefits instead of benefits in kind.
- Informal care: Refers to care given by informal caregivers such as spouses/partners, other members of the household and other relatives, friends, neighbours and others. Informal care is normally provided in the home and is typically unpaid. This questionnaire is concerned with informal care to the extent that governments offer subsidies, tax-credits or income support in order to assist relatives or friends acting as caregivers.

This category also includes social protection for older people in the form of cash benefits (such as old-age pensions and partial retirement pensions) and benefits in kind (such as lodging provided to elderly persons in specialised institutions or staying with families, allowances paid to the person who looks after an elderly person, miscellaneous services and goods provided to elderly persons to enable them to participate in leisure and cultural activities).

For the following questions, please tick the appropriate box for each question. Multiple boxes can be ticked for areas or tasks that involve shared responsibilities/roles. If a question is not currently relevant to your country, try to answer the questions in terms of 'who would likely be responsible for...' before exercising the 'Not applicable' option.

1. Policy autonomy

This section asks to what extent sub-central decision makers exert control over main policy objectives and main aspects of service delivery:

a) Who is responsible for	Central government	Regional/ state government	Local government	Care providers	Social security funds	Not applicable
General policy decisions		<u> </u>				
Setting the legal framework (e.g. a law or regulation establishing objectives, rights and obligations in elderly care)						
Setting the legal framework around health and elderly care insurance						
Deciding on the various forms of elderly care provision (public/private institutions vs. professional home care)						
Deciding on eligibility criteria for access to elderly health care services (e. g. defining degrees of need for care, minimum age)						
Deciding on eligibility criteria for access to transport concessions for elderly citizens (e. g. minimum age, maximum income)						
Deciding on the eligibility criteria for entry to retirement homes and palliative care facilities						
Deciding on the eligibility criteria to receive government payments for families/friends who act as caregivers to an elderly person						
Deciding on the eligibility criteria to receive tax credits/tax concessions for families/friends who act as care- givers to an elderly person						
Establishing catchment areas for care institutions/professional providers of home care						
Private institutions (e. g. care institutions, professional providers of individual care)						
Regulating private service provision (e. g. setting the rules for concessions and funding for private						

User fees/co-payments

elderly care services and

of home care.

Designing and implementing a scale of user fees or co-payments for

differentiation according to social

situation of care recipients, for private care institutions or private providers

care institutions, use and design of voucher-systems)						
Granting concessions for opening of private care providers (care institutions and/or professional providers of home care)						
Determining the type of public funding for private institutions (subsidies, tax exemption)						
Determining the level of public funding for private institutions (subsidies, tax exemption)						
b) Please feel free to provide in the aged care sector, inclu- levels of government (if appl	ding explana	tions of how	responsibiliti	es are sha	red betw	een
2. Budget autonomy						
This section asks to what ext				ontrol ove	er the bud	lget
This section asks to what ext (e.g. is budget autonomy limit				ontrol ove	er the bud	lget
This section asks to what ext		Regional/		Care	Social	lget Not applicable
This section asks to what ext (e.g. is budget autonomy limit	Central	Regional/ state	Local	Care	Social security	Not
This section asks to what ext (e.g. is budget autonomy limit a) Who is responsible for	Central	Regional/ state	Local	Care	Social security	Not
This section asks to what ext (e.g. is budget autonomy limit a) Who is responsible for Cash benefits/subsidies/tax credits Paying cash benefits/allowances for care recipients which are to be spent for care services, primarily for home	Central	Regional/ state	Local	Care	Social security	Not

Designing and implementing a scale of user fees or co-payments for elderly care services and differentiation according to social situation of care recipient, for public care institutions or public providers of home care.						
Compensation of staff						
Financing staffs' salaries and benefits in public care institutions/public professional providers of home care						
Financing staff pensions, in public care institutions/public professional providers of home care						
Purchases of goods						
Financing materials and machines directly related to elderly care						
Capital expenditures						
Financing new aged care institutions						
Financing maintenance of existing aged care institutions						
Financial resources						
Establishing the budget envelope for individual elderly care institutions						
Deciding on budget allocation among regions, districts or municipalities						
Deciding on budget allocation among care institutions within the same region or municipality						
b) Please feel free to provide a in the aged care sector, include levels of government (if appli	ling explanat	ions of how	responsibilit	ies are sha	red betwe	een

3. Input Autonomy

This section asks to what extent sub-central decision makers exert control over the civil service (personnel management, salaries) and other input-side aspects (e.g. right to tender or contract out services)?

a) Who is responsible for	Central government	Regional/ state government	Local government	Care providers	Social security funds	Not applicable
General rules for institutions						
Determining rules for public and private care institutions (e. g. maximum patient-caregiver-ratio, standards concerning the premises and equipment, safety rules and medical facilities, etc.)						
Determining rules for professional providers of home care (e. g. maximum patient-caregiver-ratio, standards concerning equipment, safety rules, etc.)						
Finalising contracts on service provision with care institutions (who concludes the contract with the care recipient?)						
Finalising contracts on service provision with professional providers for home care (who concludes the contract with the care recipient?)						
Staff management						
Hiring and firing of medical and/or nursing staff of public care providers						
Hiring and firing of other staff of public care providers (e.g. cleaners)						
Determining salary scales for medical and/or nursing staff in public care providers						
Determining other working conditions for staff in public care providers (working hours, pension rules, superannuation rules)						
Establishing minimum requirements for the education of medical staff of public and private care providers						
Establishing minimum requirements for the training and education of nursing and care staff of public and private care providers						
Establishing rules/requirements for the training of medical staff of public and private care providers						

Establishing rules/requirements for the training of nursing and care staff of public and private care providers						
Deciding on employment status of staff (e.g. short-term contracts, ongoing employment) of public care providers						
Right to use outsourcing						
Determining which services can be outsourced (services obtained from outside providers, such as cleaning, meals, etc.)						
Choosing external providers for services to be outsourced						
b) Please feel free to provide ar in the aged care sector, includir levels of government (if applica	g explanation	ons of how res	ponsibilities	are shared	between	
4 Output and Monitoring Auto	nomv					
4. Output and Monitoring Autor This section asks to what exten such as quality and quantity o standards, such as benchmarkin	t sub-centra f services d					
This section asks to what exten such as quality and quantity o	t sub-centra f services d g.		Local	Care		Not applicable
This section asks to what exten such as quality and quantity o standards, such as benchmarkin	t sub-centra f services d g.	elivered and d Regional/state	Local	Care	Social security	
This section asks to what exten such as quality and quantity o standards, such as benchmarkin a) Who is responsible for	t sub-centra f services d g.	elivered and d Regional/state	Local	Care	Social security	
This section asks to what extensuch as quality and quantity of standards, such as benchmarking a) Who is responsible for Elderly care coverage	t sub-centra f services d g.	elivered and d Regional/state	Local	Care	Social security	
This section asks to what extensuch as quality and quantity of standards, such as benchmarking a) Who is responsible for Elderly care coverage Opening or closing of care institutions Deciding on the allocation of benefits (e.g. who gets the spaces in care institutions out of the eligible	t sub-centra f services d g.	elivered and d Regional/state	Local	Care	Social security	
This section asks to what extensuch as quality and quantity of standards, such as benchmarking a) Who is responsible for Elderly care coverage Opening or closing of care institutions Deciding on the allocation of benefits (e.g. who gets the spaces in care institutions out of the eligible contenders)	t sub-centra f services d g.	elivered and d Regional/state	Local	Care	Social security	

Conformity with general policy goals						
Monitoring of elderly care supply (does supply meet care recipients' needs, ensure access for seniors from different regions or different social groups)						
Monitoring whether seniors use cash benefits for the intended purposes						
Performance of institutions						
Deciding whether performance measurements/targets of care institutions and/or professional providers of home care must be used						
Deciding on the specific performance targets for care institutions and/or professional providers of home care						
Monitoring the quality of care in care institutions and/or professional providers of home care (in the form of checking institutions are meeting targets, surveying users or undertaking inspections)						
Deciding on administrative and/or financial sanctions/rewards for care institutions and/or professional providers of home care that meet/exceed/do not meet standards						
Performance of staff						
Deciding whether performance assessment of medical/nursing staff must be used (in care institutions and professional providers of individual care)						
Setting performance incentives for staff and consequences for high/poor performance						
b) Please feel free to provide monitoring autonomy in the responsibilities are shared between links to relevant reports or webs	aged care	e sector, in	cluding exp	lanations	of how	

5. Performance measure	ement sy	vstems			
The following question sector.	s are al	bout perform	nance m	easureme	ent systems in the aged care
, .	by a pe	•			l/or professional providers of em, that has been established
Yes, public					
Yes, private					
Yes, both public and	private				
☐ No					
Yes but under the sa	me fran	nework as P	art 1. Se	e the resp	onse to Part 1.
For example, who are the	e main a s or met	actors, what crics, definiti	is the ge ions of g	neral data	mance measurement system. collection and dissemination oor performance. Please feel
c) If yes, please indica governments' performan				nisms are	a useful component of the
	If the m	surement sy nechanism is m the natio	stem. used, hov	v useful is	Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad
governments' performan	If the m	surement sy nechanism is m the natio	stem. used, hov	v useful is	Please provide comments on how the mechanism is used (e.g. what level it
governments' performan	If the m it (from perspect) Very	surement symethem is mechanism is mechanism is mechanism is mechanism. Somewhat	used, how onal gove	v useful is ernment's Not used at	Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad
governments' performant Measurement practice Performance results (in the form of outputs/outcomes/quality of care) determine/alter the	If the m it (from perspect) Very	surement symethem is mechanism is mechanism is mechanism is mechanism. Somewhat	used, how onal gove	v useful is ernment's Not used at	Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad
Performance results (in the form of outputs/outcomes/quality of care) determine/alter the allocation of funding/resources Performance results cause performance targets to be	If the m it (from perspect) Very	surement symethem is mechanism is mechanism is mechanism is mechanism. Somewhat	used, how onal gove	v useful is ernment's Not used at	Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad
Performance results (in the form of outputs/outcomes/quality of care) determine/alter the allocation of funding/resources Performance results cause performance targets to be adjusted	If the m it (from perspect) Very	surement symethem is mechanism is mechanism is mechanism is mechanism. Somewhat	used, how onal gove	v useful is ernment's Not used at	Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad

The monitoring of access to elderly care services across the country, or specific target groups							
Satisfaction/ experience surveys by the consumer/citizen							
Minimum national standards							
Other (please specify):							
Potential consequences of the pe	erforma	nce measur	ement sys	stem			
Public dissemination of performance information							
Public league tables, rankings or ratings							
Following good performance results, additional funding							
Following good performance results, rewards through relaxation of budget rules							
Following poor performance results, financial sanctions through withdrawal of funding or less funding							
Following poor performance results, penalties through increased administrative oversight							
Following poor performance results, technical assistance for improving service delivery							
Other (please specify):							
d) Please feel free to provide any additional information. This could include additional comments on formal evaluation processes and plans for further development the current performance system. Alternatively feel free to provide comments on challenges and obstacles to developing a performance system.							

Yes	
☐ No	
example, processes	blease provide a general explanation of the performance measurement system. For who are the main actors, what is the general data collection and dissemination s, key indicators or metrics, definitions of good and poor performance, plans for evelopment. Please feel free to provide links to relevant websites or reports.

PART 3: SPENDING POWER IN THE TRANSPORT SECTOR

In this section of the questionnaire, public transportation refers to all types of line operations by buses, tramways, roads, trains or boats. Non-scheduled bus services, funiculars, cable cars, chairlifts and air transportation are not included.

Specifically, the following areas are included:

- Administration of affairs and services concerning operation, use, construction and maintenance of:
 - inland, coastal and ocean water transport systems and facilities (harbours, docks, navigation aids and equipment, canals, bridges, tunnels, channels, breakwaters, piers, wharves, terminals, etc.)
 - o road transport systems and facilities (roads, bridges, tunnels, parking facilities, bus terminals, etc.)
 - o railway transport systems and facilities (railway roadbeds, terminals, tunnels, bridges, embankments, cuttings, etc.)
- Supervision and regulation of water, road and railway transport users.
- Construction or operation of water, road and railway transport systems and facilities.
- Production and dissemination of general information, technical documentation and statistics on transport system operations and transport facility construction activities.
- Grants, loans or subsidies to support the operation, construction, maintenance or upgrading of water, road and railway transport systems and facilities.

For the following questions, please tick the appropriate box for each question. Multiple boxes can be ticked for areas or tasks that involve shared responsibilities/roles. If a question is not currently relevant to your country, try to answer the questions in terms of 'who would likely be responsible for...' before exercising the 'Not applicable' option.

1. Policy autonomy

This section asks to what extent sub-central decision makers exert control over main policy objectives and main aspects of service delivery.

a) Who is responsible for	Central government	Regional/ state government	Local government	Providers	Not applicable
General policy decisions					
Determining urban public transport policy					
Determining regional public transport policy					
Setting minimum standards for geographical coverage					
Setting minimum environmental and emissions standards					

Deciding how a route is serviced (by bus, tramway, boat, road, train etc.)							
Deciding on size and load specifications/regulations for passenger and freight road transport							
Deciding on vehicle and driver licensing regulation							
Establishing programmes to reduce the use of private vehicles/transfers (e.g. park and ride programmes, educational programmes, ridesharing information)							
Deciding on regulations for taxis and ridesharing companies (Uber, Lyft)							
Making the decision whether the provider must become a member in a public transportation association ²							
Private services							
Granting concessions for opening of routes provided by private company							
Determining the level and type of public funding for private transport providers (e.g. subsidies, tax exemption for providers)							
Setting public regulation/standards on private providers (safety, training)							
b) Is it common in your country that pagency or a public transport associate				l transportat	tion		
c) Please feel free to provide any additional information or comments on policy autonomy in the transport sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.							

² Public transport associations are bodies for integrated public transport services that offer a "one stop shop" to public transport users.

2. Budget autonomy

This section asks to what extent sub-central decision makers exert control over the budget (e.g. is budget autonomy limited by upper level regulation).

a) Who is responsible for	Central government	Regional/ state	Local government	Providers	Not applicable
Financing of capital	government	government	government		
Financing the construction of railway infrastructure (including stations)					
Financing the construction of bus, tramway or underground infrastructure (including stations and stopping points)					
Financing the construction of urban roads and kerbs					
Financing the construction of highways					
Financing the maintenance of railway infrastructure (including stations)					
Financing the maintenance of bus, tramway or underground infrastructure (including stations and stopping points)					
Financing the maintenance of urban roads and kerbs					
Financing the maintenance of harbours, breakwaters and piers					
Financing the maintenance of highways					
Financing of transport communication systems					
Financing the construction of park and ride/walk (or ridesharing) parking spots					
Vehicles					
Financing the acquisition of new buses					
Financing the acquisition of new trains					
Financing the maintenance of buses					
Financing the maintenance of trains					
Staff					
Financing drivers' salaries and benefits (other than pensions)					
Financing drivers' pensions					

Financing salaries and benefits (other than pensions) of construction workers	_	П	П				
Financing pensions of construction workers							
Fares/Tariffs							
Setting fares/ tariffs for buses							
•							
Setting tariffs for road tolls			Ш	Ш	Ш		
Setting tariffs/tax rates for heavy vehicle charging							
Setting fines for parking tickets							
Establishing reductions and concessions on public transport (e.g. for students, elderly, disabled)							
Contracting out/tendering							
Deciding whether a service is provided inhouse or contracted out							
Defining rules for contracting out/tendering							
Selecting external providers							
b) Please feel free to provide any additional information or comments on budget autonomy in the transport sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.							
3. Input Autonomy This section asks to what extent sub-	-central decid	sion makers	evert contro	over the o	oivil		
This section asks to what extent sub-central decision makers exert control over the civil service (personnel management, salaries) and other input-side aspects (e.g. right to tender							

or contract out services)?

a) Who is responsible for	Regional/ state government	Providers	Not applicable
Construction and maintenance workers for transport systems			
Hiring and firing of construction and maintenance workers			
Establishing workers' salary scales and non- pension benefits			
Establishing pension rules and benefits for workers			

Deciding the employment status of construction and maintenance workers (e.g. short-term contracts, ongoing employment)			
Drivers			
Hiring and firing of drivers			
Establishing salary scales and non-pension benefits for drivers			
Establishing pension rules and benefits for drivers			
Deciding on the employment status of drivers (e.g. short-term contracts, ongoing employment)			
Deciding on training requirements of public bus/coach/tram drivers			
Deciding on training requirements of train drivers			
Deciding on regulation of hours of work (for bus, train, tram, coach and lorry drivers, etc.)			
Capital inputs and capital decisions			
Deciding the location of railway infrastructure and stations			
Deciding the location of bus routes and stops/terminals for public transport			
Deciding the location of roads, bridges and tunnels			
Deciding the location of boats routes and terminals for public transportation			
Deciding on maintenance of railway infrastructure (including stations)			
Deciding on maintenance of bus, tramway or underground infrastructure (including stations and stopping points)			
Deciding on maintenance of harbour and water infrastructure			
Determining the source of capital inputs for the construction of train, tram and bus routes			
Determining the source of capital inputs for the construction of harbours, breakwaters and piers			

b) Please feel free to provide any additional information or comments on input autonomy in the transport sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.

4. Output and Monitoring Autonomy

This section asks to what extent sub-central decision makers exert control over standards such as quality and quantity of services delivered and devices to monitor and evaluate standards, such as benchmarking.

a) Who is responsible for	Regional/state government	Providers	Not applicable
Routes and timetables			
Opening/closing of public train routes			
Setting of timetables/transit times for public trains			
Monitoring transit times for public trains			
Providing information to the public on train timetables and routes (through websites, pamphlets etc.)			
Opening/closing of public underground train/metro routes			
Setting of timetables/transit times for public underground trains/metros			
Monitoring transit times for public underground trains/metros			
Opening/closing of public bus routes			
Setting of timetables/transit times for public buses			
Monitoring transit times for public buses			
Providing information to the public on bus timetables and routes (through websites, pamphlets etc.)			
Opening/closing of public boat and ferry routes			
Setting of timetables/transit times for public boats and ferries			
Monitoring transit times for public boats and ferries			
Quality of services			

Setting quality and safety standards for the construction of transport routes (e.g. roads, trams, trains)					
Setting quality and safety standards for vehicles (buses/trains/trams) (e.g. age of vehicles, substitution of old vehicles)					
Setting quality and safety standards for stopping points and stations					
Setting accessibility standards of vehicles, stopping points and stations (e.g. standards for disabled, standards for escalators and elevators)					
Enforcing accessibility standards of vehicles, stopping points and stations					
Setting security standards/targets for public transport					
Monitoring user congestion					
Enforcing vehicle and driver licensing regulations					
Enforcing regulations for taxis and ridesharing companies					
Performance of staff					
Deciding whether performance assessment of drivers must be used					
Establishing performance incentives for drivers					
Establishing consequences for high/poor performance of drivers					
b) Please feel free to provide any additional information or comments on output and monitoring autonomy in the transport sector, including explanations of how responsibilities are shared between levels of government (if applicable), or by providing links to relevant reports or websites.					

5. Performance measurement systems

The following questions are about performance measurement systems in the transport sector.

a) Are public and/or pri system, that has been est					a performance measurement			
Yes, public								
Yes, private								
Yes, both public and private								
□No								
Yes but under the same framework as Part 1. See the response to Part 1.								
b) If yes, please provide a general explanation of the performance measurement system. For example, who are the main actors, what is the general data collection and dissemination processes, key indicators or metrics, definitions of good and poor performance. Please feel free to provide links to relevant websites or reports.								
c) If yes, please indica governments' performan				nisms are	a useful component of the			
Measurement practice		nechanism is um the nation ctive)?			Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad			
	Very useful	Somewhat useful	Not useful	Not used at all	implementation)			
Performance results (in the form of outputs/outcomes) determine/alter the allocation of funding/resources								
Performance results cause performance targets to be adjusted								
Caps/limits on budgets								
The monitoring of quality assurance of services across the country, or specific target groups								
Minimum national standards								
The monitoring of access to services across the country, or specific target groups								

Satisfaction/ experience surveys for the consumer/citizen					
Other (please specify):					
Potential consequences of the po	erforma	nce measui	rement sys	stem	
Public dissemination of performance information					
Public league tables, rankings or ratings					
Following good performance results, additional funding					
Following good performance results, rewards through relaxation of budget rules					
Following poor performance results, financial sanctions through withdrawal of funding or less funding					
Following poor performance results, penalties through increased administrative oversight					
Following poor performance results, technical assistance for improving service delivery					
Other (please specify):					
comments on formal ev	aluatioi Iternati	n processes vely feel	and plan	s for furt	This could include additional ther development the current omments on challenges and
	ıb-natio	nal govern	nments, t		the transport sector that have or their performance or the

f) If yes, please provide a general explanation of the performance measurement system. For example, who are the main actors, what is the general data collection and dissemination processes, key indicators or metrics, definitions of good and poor performance, plans for further development. Please feel free to provide links to relevant websites or reports.

PART 4: SPENDING POWER IN THE HOUSING DEVELOPMENT SECTOR

This section of the questionnaire relates to the housing development sector, including both private aspects of development and safety, as well as public housing services. Specifically, it includes:

- Administration of housing development affairs and services; promotion, monitoring and evaluation of housing development activities whether or not the activities are under the auspices of public authorities; development and regulation of housing standards
- Slum clearance related to provision of housing; acquisition of land needed for construction of dwellings; construction or purchase and remodelling of dwelling units for the general public or for people with special needs
- Production and dissemination of public information, technical documentation and statistics on housing development affairs and services
- Grants, loans or subsidies to support the expansion, improvement or maintenance of the housing stock.

It excludes the development and regulation of construction standards; and the provision of social protection in the form of cash benefits and benefits in kind to help households meet the cost of housing.

Social (or public) housing is defined as housing provided for people on low incomes or with particular needs by government agencies or non-profit organisations.

For the following questions, please tick the appropriate box for each question. Multiple boxes can be ticked for areas or tasks that involve shared responsibilities/roles. If a question is not currently relevant to your country, try to answer the questions in terms of 'who would likely be responsible for...' before exercising the 'Not applicable' option.

1. Policy autonomy

This section asks to what extent sub-central decision makers exert control over main policy objectives and main aspects of service delivery.

a) Who is responsible for	Central government	Regional/ state government	Local government	Housing providers	Not applicable
General policy decisions on social housing					
Setting the requirements/criteria for citizens to apply for social housing					
Establishing criteria for eviction from social housing					
Deciding the amount/units and location of social housing					
Setting restrictions/requirements to privatise social housing services					
General policy decisions on housing development					

					85
Deciding on slum clearance or revitalisation					
Setting regulatory housing standards (safety, building heights, size etc.)					
Setting standards for disability access					
Setting the criteria for approval of new housing developments					
Approving the location of new housing/housing developments					
Determining subsidies or tax exemptions for providers of housing					
in housing development, including ex- levels of government (if applicable),					
2. Budget autonomy This section asks to what extent sub- (e.g. is budget autonomy limited by the section asks).			ert control o	ver the buc	lget
a) Who is responsible for	Central government	Regional/	Local government	Housing providers	Not applicable
Infrastructure financing					
Financing the construction of new social housing developments (excluding costs for construction workers – see below)					
Financing the maintenance of social housing developments (excluding costs for					

a) Who is responsible for	Central government	Regional/ state government	Local government	Housing providers	Not applicable
Infrastructure financing					
Financing the construction of new social housing developments (excluding costs for construction workers – see below)					
Financing the maintenance of social housing developments (excluding costs for construction workers – see below)					
Financing the acquisition of furniture in social housing developments					
Deciding on the allocation of funding for social housing developments among regions, districts or municipalities					
Deciding on the allocation of funding for social housing developments within the same region or municipality					
Deciding how funding is distributed amongst policy priorities (e.g. on maintenance versus new housing stock)					

Housing grants and tax rates					
Designing and implementing a scale for contributions by users of social housing					
Deciding levels and rates of property taxes on private residences (e.g. transfer duties, land rates)					
Setting grant or subsidy amounts, or loan concessions available to private developers to build additional housing stock					
Setting grant or subsidy amounts, or loan concessions available to individuals/households to build additional housing stock					
Compensation of staff					
Financing salaries and benefits (other than pensions) of construction workers and architects					
Financing pensions of construction workers and architects					
Financing salaries and benefits (other than pensions) of staff that help with the maintenance social housing (e.g. cleaners, plumbers)					
Financing pensions of staff that help with the maintenance social housing (e.g. cleaners, plumbers)					
Financing salaries and benefits (other than pensions) of administrative civil servants					
Financing pensions of administrative civil servants					
Contracting out/tendering					
Defining rules for contracting out/tendering					
Selecting external providers					
b) Please feel free to provide any addi in housing development, including ex levels of government (if applicable),	planations of	how respons	ibilities are s	hared betw	een

3. Input Autonomy

This section asks to what extent sub-central decision makers exert control over the civil service (personnel management, salaries) and other input-side aspects (e.g. right to tender or contract out services)?

a) Who is responsible for	Central government	Regional/ state government		Housing providers	Not applicable
Staff management					
Hiring and firing of staff involved in the delivery of housing policy (e.g. administrative civil servants)					
Determining working conditions of staff involved in the delivery of housing policy (e.g. administrative civil servants) (salary scales, pension rules, working hours, contractual basis of staff)					
Hiring and firing of staff involved in the construction of housing (e.g. construction workers, architects)					
Determining working conditions of staff involved in the construction of housing (e.g. construction workers, architects) (salary scales, pension rules, working hours, contractual basis of staff)					
Hiring and firing of staff involved in the upkeep of housing (e.g. cleaners)					
Determining working conditions of staff involved in the upkeep of housing (e.g. cleaners) (salary scales, pension rules, working hours, contractual basis of staff)					
Right to use outsourcing					
Determining which services can be outsourced (services obtained from outside providers, such as cleaning)					
b) Please feel free to provide any addit in housing development, including expl levels of government (if applicable), or	anations of h	ow responsibil	ities are share	d between	

4. Output and Monitoring Autonomy

This section asks to what extent sub-central decision makers exert control over standards such as quality and quantity of services delivered and devices to monitor and evaluate standards, such as benchmarking.

a) Who is responsible for	Central government	Regional/state government		Housing providers	Not applicable
Coverage and conformity with general policy goals					
Opening/closing of social housing					
Selecting the users of social housing					
Selecting the placement of users of social housing					
Tracking and regulating the users of social housing					
Determining forms and processes to apply for social housing					
Monitoring quality of social housing					
Monitoring compliance with regulations and standards (safety, building heights, size etc.)					
Monitoring all housing development contracts					
Monitoring the uptake of housing grants or loans provided by the government					
Monitoring quality and safety of private developments					
Determining application forms and processes for approving private housing developments					
b) Please feel free to provide any monitoring autonomy in housing responsibilities are shared between links to relevant reports or websites.	g developn levels of go	nent, includin	g explanat	ions of 1	how
5. Performance measurement system	ns				
The following questions are about phousing.	performance	measurement	systems in re	egard to so	ocial
 a) Is social housing covered by a established by the central government 	-	ce measureme	nt system,	that has b	oeen
Yes					
☐ No					

Yes but under the sar	me fran	nework as P	art 1. Se	e the resp	onse to Part 1.
For example, who are the	e main a s or met	ectors, what rics, definit	is the ge	neral data	mance measurement system. collection and dissemination poor performance. Please feel
c) If yes, please indica governments' performan				nisms are	a useful component of the
Measurement practice		nechanism is m the natio			Please provide comments on how the mechanism is used (e.g. what level it is implemented, broad
	Very useful	Somewhat useful	Not useful	Not used at all	implementation)
Performance results (in the form of outputs/outcomes/quality) determine/alter the allocation of funding/resources					
Performance results cause performance targets to be adjusted					
Caps/limits on budgets					
The monitoring of quality assurance of services across the country, or specific target groups					
Minimum national standards					
The monitoring of access to services across the country, or specific target groups					
Satisfaction/ experience surveys for the consumer/citizen					
Other (please specify):					
Potential consequences of the p	erforma	nce measure	ement sys	stem	
Public dissemination of performance information					

Public league tables, rankings or ratings										
Following good performance results, additional funding										
Following good performance results, rewards through relaxation of budget rules										
Following poor performance results, financial sanctions through withdrawal of funding or less funding										
Following poor performance results, penalties through increased administrative oversight										
Following poor performance results, technical assistance for improving service delivery										
Other (please specify):										
	t challe	nges, form			ne performance measurement esses, or any plans for further					
	ed by s	ub-nationa	l governm		s in the social housing sector monitor their performance or					
Yes										
☐ No										
example, who are the m	ain actors or me	ors, what i trics, defir	s the generations of g	eral data good and	nce measurement system. For collection and dissemination poor performance, plans for ant websites or reports.					

Annex C. Additional tables and figures

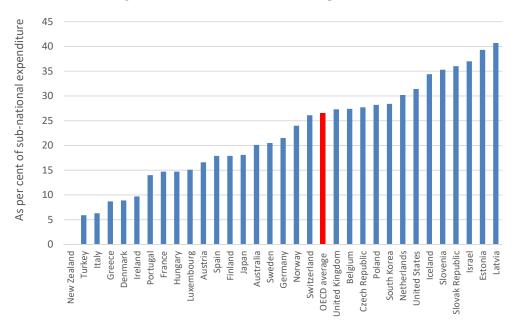


Figure A C.1. Sub-national education expenditure, 2015

Note: OECD weighted average (by population size of each country). Excludes Canada, Mexico and Chile. Source: OECD Regions and Cities database.

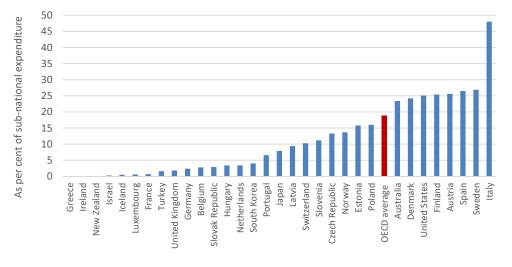


Figure A C.2. Sub-national health expenditure, 2015

Note: OECD weighted average (by population size of each country). Excludes Canada, Mexico and Chile. *Source*: OECD Regions and Cities database.

As per cent of sub-national expenditure 10 Hungary Portugal Slovenia Sweden Norway Turkey Latvia Poland Greece Korea Finland Belgium **United States** Czech Republic Australia Austria Netherlands Iceland **New Zealand** Slovak Republic Israel Switzerland Luxembourg OECD average Germany France

Figure A C.3. Sub-national social protection expenditure, 2015

Note: OECD weighted average (by population size of each country). Excludes Canada, Mexico and Chile. Source: OECD Regions and Cities database

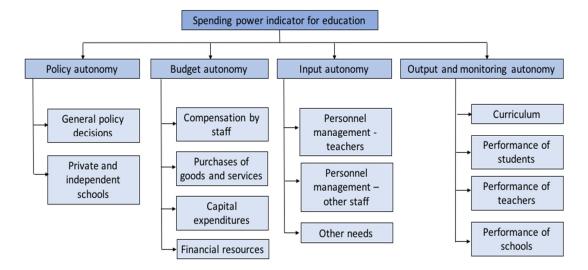


Figure A C.4. Spending power in education - indicator tree

Table A C.1. Medium-level and high-level indicators

		BRA	ITA	CHE	ESP	LVA	IRL	EST	MEX	POL	RUS	IND	CAN	DEU	FIN	NLD	BEL	AUT	KOR	NOR
Education	Policy	2.9	0.9	3.7	2.3	2.3		2.4	2.0	3.5	1.5	3.7	1.9		4.5	1.5	4.7		3.1	1.5
	Budget	5.6	2.0	5.9	2.7	4.3		7.0	3.0	5.5	5.4	4.8	3.0		5.7	7.0	5.7		4.9	6.1
	Input	4.0	0.9	5.4	2.7	4.4		5.9	1.8	3.2	4.5	5.2	4.5		4.2	7.6	6.3		3.4	5.4
	Output/ monitoring	3.1	1.1	4.3	1.2	3.2		6.6	1.0	4.2	4.2	1.1	3.3		2.7	2.1	4.6		4.3	5.4
	Highlevel	3.9	1.2	4.8	2.2	3.6		5.5	1.9	4.1	3.9	3.7	3.2		4.3	4.6	5.3		3.9	4.6
Long-term care	Policy	2.5	1.6	2.4	0.7	2.4		2.6	1.2	1.2	0.9	1.7	1.5	1.5	2.0	1.1	1.3		0.3	3.4
	Budget	2.3	1.8	2.5	1.4	3.5		2.0	2.0	1.0	1.5	1.8	2.1	0.3	3.7	3.1	2.0		1.1	2.2
	Input	3.0	2.5	3.5	1.3	5.5		3.1	2.4	3.3	1.6	3.3	2.7	5.5	3.3	1.0	2.7		3.0	3.1
	Output/ monitoring	1.8	0.3	1.8	0.5	2.0		1.5	0.5	2.7	1.0	0.4	1.3	2.0	2.6	2.2	1.4		0.0	1.1
	Highlevel	2.4	1.5	2.6	1.0	3.3		2.3	1.5	2.0	1.2	1.8	1.9	2.3	2.9	1.9	1.8		1.1	2.4
Transport	Policy	1.9	2.3	2.3	1.5	1.2		1.6	2.1	2.1	2.2	0.4	3.1	2.0	2.2	1.3	2.6		1.3	2.9
	Budget	2.6	3.2	4.4	3.1	3.9		3.2	3.0	4.0	4.0	2.3	4.0	3.5	4.2	3.4	3.2		3.0	2.9
	Input	2.7	3.6	4.2	3.2	3.9		3.5	3.2	4.8	3.7	3.2	4.2	5.5	3.9	2.5	6.6		3.0	3.9
	Output/ monitoring	2.7	4.1	3.4	3.1	4.7		3.4	3.7	3.9	3.2	2.7	4.4	5.1	4.8	2.4	5.4		4.6	3.2
	Highlevel	2.5	3.3	3.6	2.7	3.5		2.9	3.0	3.7	3.3	2.1	3.9	4.1	3.7	2.4	4.5		3.0	3.2
Housing	Policy	3.1	4.8	3.5	3.6	3.5		3.6	2.0	3.8	5.4	2.5	4.2	4.3	4.3	3.3	3.7		3.0	3.5
	Budget	2.4	1.6	3.4	1.9	2.5		3.1	1.4	2.3	1.9	1.5	2.2	2.0	3.4	2.2	1.3		2.5	2.1
	Input	5.7	6.4	7.2	4.7	7.9		8.5	2.8	7.0	8.1	6.8	8.0	6.1	6.1	8.6	5.7		8.4	5.6
	Output/ monitoring	2.0	3.1	3.5	2.0	2.7		4.4	0.3	2.7	2.9	1.5	3.0	1.9	3.8	4.3	0.0		2.5	3.2
	Highlevel	3.3	4.0	4.4	3.1	4.1		4.9	1.6	3.9	4.6	3.1	4.3	3.6	4.4	4.6	2.7		4.1	3.6
Health care	Policy		2.2	1.8	2.4	1.1	0.0		1.6	0.5			2.9	0.6	5.3	0.3	1.7	2.0		0.2
	Budget		1.0	2.6	2.3	1.4	0.3		1.3	1.0			2.9	1.0	4.9	0.4	1.3	1.2		0.7
	Input		2.8	2.3	2.7	0.8	0.0		1.7	0.9			3.0	0.7	3.5	0.0	2.2	2.0		0.9
	Output/monitoring		1.9	0.3	1.5	0.4	0.0		1.2	0.0			1.8	0.2	3.1	0.0	0.5	1.0		1.7
	Highlevel		2.0	1.8	2.2	0.9	0.1		1.5	0.6			2.7	0.6	4.2	0.2	1.4	1.6		0.9

		LUX	AUS	CZE	DNK	GRC	ISR	JPN	NZL	SVN	GBR	LTU	MLT	ARG	KAZ	CHL	ZAF	ISR	TUR	FRA
Education	Policy	0.4		2.6	1.6		-	-	0.4			-			-	1.1	1.7			0.5
	Budget	1.0		4.1	6.1				2.9							2.4	4.3			0.4
	Input	0.2		5.6	5.6				4.7							2.6	1.8			0.1
	Output/monitoring	0.0		3.0	2.8				0.3							0.7	0.2			0.5
	Highlevel	0.4		3.8	4.0				2.0							1.7	2.0			0.5
Long-term care	Policy	1.6		1.7	1.1				1.5							1.1	1.2			
	Budget	1.5		2.7	4.2				2.6							3.8	1.2			
	Input	3.0		3.2	4.8				1.6							4.2	1.0			
	Output/monitoring	1.6		1.6	2.3				0.5							1.1	0.5			
	Highlevel	1.9		2.3	3.1				1.6							2.6	1.0			
·	Policy	0.8		1.3	1.4				0.7							6.8	0.4			
	Budget	1.8		3.3	2.5				2.4							5.1	3.4			
	Input	3.1		3.4	3.4				4.7							6.1	4.3			
	Output/monitoring	2.1		3.7	2.4				2.2							6.6	3.9			
	Highlevel	2.0		2.9	2.5				2.5							6.1	3.0			
Housing	Policy	1.2		3.3	3.5				1.8							7.2	2.7			
	Budget	0.4		1.4	0.9				2.5							1.9	2.5			
	Input	4.3		8.3	0.0				7.9							0.9	5.1			
	Output/monitoring	4.6		1.6	0.0				2.6							2.5	1.8			
	Highlevel	2.6		3.7	1.1				3.7							3.1	3.0			
Health care	Policy	0.0	2.2	2.0	1.5	0.0	0.0	0.0	2.1	0.0	2.5	0.5	2.1	2.2	2.1	0.3		0.0	1.6	
	Budget	0.3	1.9	1.0	2.7	0.0	0.3	0.3	2.0	0.0	1.6	8.0	4.5	2.6	2.0	0.6		0.3	1.8	
	Input	0.0	2.1	1.7	1.7	0.0	0.0	0.9	1.5	0.0	0.9	8.0	4.7	2.7	2.3	0.0		0.0	1.9	
	Output/monitoring	0.0	1.7	0.7	0.3	0.0	0.0	0.4	1.3	0.0	1.3	0.0	3.5	2.2	0.4	8.0		0.0	1.9	
	Highlevel	0.1	1.9	1.3	1.5	0.0	0.1	0.4	1.7	0.0	1.6	0.5	3.7	2.4	1.7	0.4		0.1	1.8	

Table A C.2. Comparisons of high-level spending power indicators across federal and unitary countries

	Federal	Unitary
Primary and secondary education	3.2	3.4
Long-term care sector	1.7	2.2
Transport services	3.4	3.1
Social housing	3.4	3.6
Health care	1.6	1.0

Figure A C.5. Medium-level spending power indicators in the education sector

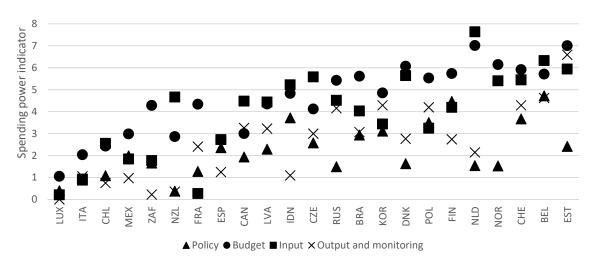


Figure A C.6. Medium-level spending power indicators in the aged care sector

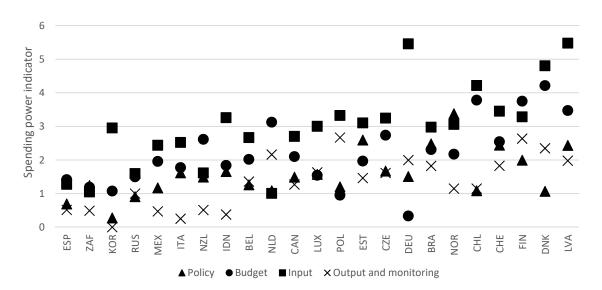


Figure A C.7. Medium-level spending power indicators in the transport sector

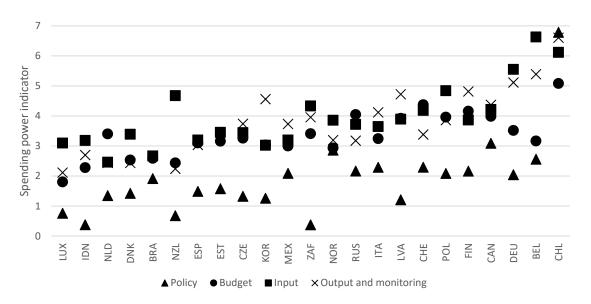
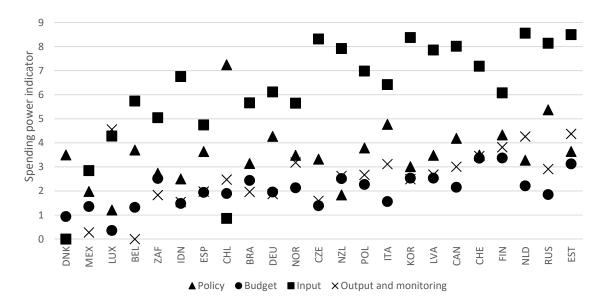


Figure A C.8. Medium-level spending power indicators in the housing development sector



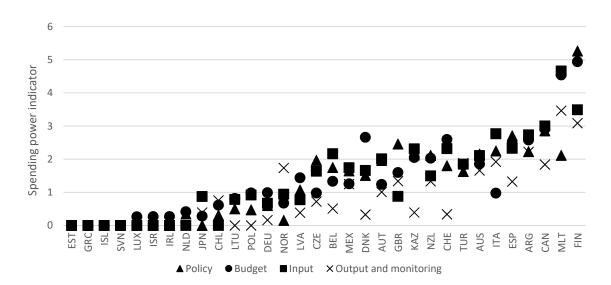
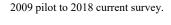
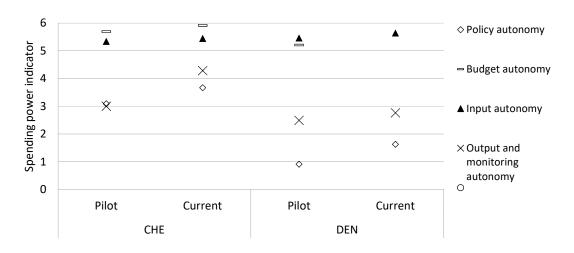


Figure A C.9. Medium-level spending power indicators in the health care sector

Figure A C.10. Comparisons of medium-level spending power indicators in the education sector

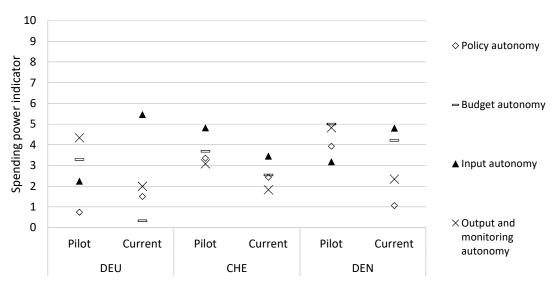




Note: The output and monitoring autonomy figures for the pilot study have been calculated as the arithmetic average of the separate output autonomy and monitoring autonomy medium-level spending power indicators.

Figure A C.11. Comparisons of medium-level spending power indicators in the long-term care/elderly sector

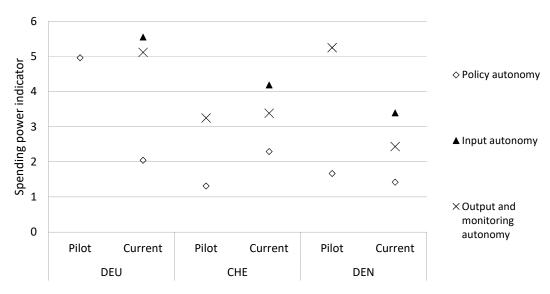
2009 pilot to 2018 current survey.



Note: The output and monitoring autonomy figures for the pilot study have been calculated as the arithmetic average of the separate output autonomy and monitoring autonomy medium-level spending power indicators.

Figure A C.12. Comparisons of medium-level spending power indicators in the transport sector

2009 pilot to 2018 current survey.



Note: The output and monitoring autonomy figures for the pilot study have been calculated as the arithmetic average of the separate output autonomy and monitoring autonomy medium-level spending power indicators.