

Analytical paper: Insights, Recommendations and Good Practices for Quality Services

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Introduction

EPR (European Platform for Rehabilitation) is a network of service providers to people with disabilities committed to high quality service delivery. EPR's mission is to build the capacity of its members to provide sustainable, high-quality services through mutual learning and training.

EPR believes that quality of services is a fundamental issue in service provision. When services are not of a high enough quality, they may not meet the needs that they aim to meet, or even create more needs. Inadequate quality services can negatively impact a person's quality of life, but also their dignity and human rights. Consequently, it is of utmost importance that services in the social sector are of a high quality.

The topic of quality of services in the social sector has been a priority for EPR and its members for many years, and in 2003 EPR launched what is now called EQUASS (European Quality in Social Services), which enhances the social sector by engaging social service providers in continuous improvement, learning and development, to guarantee service users quality of services throughout Europe. Its quality framework provides a comprehensive approach to quality management, features a rights-based approach and is a recognised tool for implementing the European Voluntary Quality Framework for Social Services.

EQUASS offers two comprehensive recognition programmes in social services: Quality Assurance and Excellence. These programmes enable social service providers to engage in an external independent assessment process by which they assure quality of their services to service users and other stakeholders. All EQUASS recognition programmes are based on a Quality Framework (a set of quality Principles), quality criteria and performance indicators that are customised for the social sector. An international Awarding Committee oversees the certification process.

What do we mean by quality?

EQUASS offers a framework and concept of quality which comprises 10 Principles and 50 Criteria. It was developed through stakeholder consultation and based on the Voluntary European Quality Framework for Social Services (Social Protection Committee, 2010). EQUASS' ten principles are: *Leadership, Staff, Rights, Ethics, Partnership, Participation, Person-Centred Approach, Comprehensiveness, Result-Oriented, Continuous Improvement*

Leadership

Social Service Providers demonstrate governance, leadership and social responsibility. They promote social justice by inclusion into the society. They set ambitious organisation and service goals and encourage best practice. Social Service Providers are committed to continuous learning and innovation.



Staff

Social Service Providers lead and manage their Staff to achieve the organisation's objectives and to deliver person-centred services. They are committed to employ qualified Staff, based on required knowledge, skills and competences. They promote diversity of staff in the workforce. Social Service Providers enhance a culture of Staff engagement and Staff wellbeing, development and continuous learning of all staff, for the benefits of person served. They show compliance with health, safety and appropriate working conditions of its Person Served and Staff (including volunteers).

Rights

Social Service Providers are committed to protect, promote and respect the rights of the Person Served in terms of equal opportunities, equal treatment and freedom of choice, self-determination and equal participation. This commitment is visible in the organisational values and in all elements of service development, service delivery of the social service provider. Social Service Providers ensure that Person Served understand and approve all their proposed individual interventions.

Ethics

Social Service Providers operate on the basis of ethical guidelines that respect dignity and wellbeing of Staff, Person Served and their families or care givers. They provide services based on trust, confidentiality and honesty to Person Served. Social Service Providers promote protection of Person Served from abuse and misconduct.

Partnership

Social Service Providers operate in partnership with relevant Stakeholders to support the organisation in achieving its vision and mission. The partnerships support the reliable sequence of comprehensive services and person centred outcomes. The partnerships contribute to the inclusion of Persons Served into society.

Participation

Social Service Providers ensure the full participation and active inclusion of Person Served and representation at all levels of the organisation and within the community. They involve Person Served as active participants in decision making in the service team. In pursuit of more equal participation and inclusion, Social Service Providers support the empowerment of the Person Served. They support advocacy to promote equal opportunities and participation for Person Served.

Person-Centred Approach

Social Service Providers provide services that are driven by the needs, expectations and capacity of Person Served. Services delivered take the physical and social environment of the Person Served into account. These services aim to improve the quality of life of the Person Served. Social Service Providers respect the individuals' contribution by involving the Person Served in self-assessment, planning, service delivery, feedback and evaluation.

Comprehensiveness

Social Service Providers ensure that the Person Served has access to a continuum of holistic and community-based services. They are committed to providing services that span from early intervention, to support and follow up. The services should be delivered in a coordinated way and through a Multidisciplinary Team approach, or in a Multi-Agency setting.

Result-Orientation

Social Service Providers aim to achieve planned results, benefits and best value for Person Served and relevant Stakeholders (including Funders). They demonstrate the achievements of the organisation and Person Served, in line with their mission and their core activities. Service impacts are measured and monitored, and are an important element of continuous improvement, transparency and accountability processes and continuously improving their services and results. They are proactive in meeting future needs of Person Served, Staff, Funders and Stakeholders, using evidence-based information for developing and improving delivered social services. They operate systems to compare service performance and continuous improvement.

Continuous Improvement

Social Service Providers are committed to continuous Social Service Providers aim to achieve planned results, benefits and best value for Person Served and relevant Stakeholders (including Funders). They demonstrate the achievements of the organisation and Person Served, in line with their mission and their core activities. Service impacts are measured and monitored, and are an important element of continuous improvement, transparency and accountability processes and continuously improving their services and results. They are proactive in meeting future needs of Person Served, Staff, Funders and Stakeholders, using evidence-based information for developing and improving delivered social services. They operate systems to compare service performance and continuous improvement.

Excellence in services

Launched in 2021, the ESRPD announced: *building on the existing voluntary European Quality Framework for Social Services, the Commission will present, by 2024, a specific framework for Social Services of Excellence for persons with disabilities, to improve service delivery for persons with disabilities and to enhance the attractiveness of jobs in this area including through upskilling and reskilling of service providers.*

The EQUASS audit process encourages actions to be taken for continuous improvement. Quality of services is an ongoing journey, and not something only achieved at a moment in time. This is one reason why there are progress reviews in between audits, where organisations provide information on how they have acted on the feedback from the audit.

The EQUASS system comprises two levels; Assurance and Excellence. An organisation can be certified to be a quality service by achieving assurance. For EQUASS, Excellence means being result-oriented. It means being able to show actions taken for improvement, being able to show the results of these actions and comparing results with peers.

Recommendations and key elements for a Framework of Excellence

The framework should go beyond service provision itself, and address the conditions needed for providers to be able to provide quality services. Key issues that should be addressed are outlined in statements from the Coordinated Action for Social Services, including:

- Recognition of the sector as an essential part of our societies, along with healthcare, as the Covid-19 pandemic has highlighted the importance of social services in contributing to employment, social cohesion and inclusion across Europe.
- Social investment necessary to improve the resiliency of the sector, which should rely on robust funding policies, sufficient and well-trained staff and a strategy to deliver effective and quality support.
- Different funding and contracting models and adequacy of funding, especially as the pandemic has exacerbated the issue of underfunding.
- Workforce support, as social services often face staff shortages, and many professionals lack adequate means to provide quality assistance in valued and safe conditions¹.

Given the strong variety across countries in the provision of quality social services, there is the need to promote a framework which helps to ensure more cohesion and higher levels of quality everywhere in Europe. To achieve this, efforts must be made to raise awareness among providers and policy makers about the existence and the benefits of quality standards and certifications like EQUASS, which are already available but often not known by the sector's stakeholders. Furthermore, there is the need to work on aligning requirements for certifications for public-funded and private organisations, since in most countries such requirements apply to private providers but not to public ones (or vice versa)².

Equally important is the promotion of dialogue about quality in social services among the principal stakeholders, policy makers and governing institutions. The exchange of views and information should take place both at the European and local level, where most of the decisions regarding the operationalisation of social and VR services are taken. Furthermore, fostering the gathering and exchange of best practices on quality certifications among providers would be particularly useful to raise awareness about the relevance of quality and promote the adoption of such standards, especially in countries lacking specific regulatory frameworks.

It is necessary to address the issue of resources made available to social organisations to get voluntary certifications. The challenge regards especially funding, which should be increased overall, as social services have proven to be essential during the pandemic but continue to suffer from chronic underfunding. Providing more resources and making certifications more affordable especially to small organisations can play a key role in encouraging and developing quality services around Europe³.

When using public procurement, competition must be oriented towards better quality and more well-being and must be organised backed up by supportive regulatory and policy frameworks at all levels. A predatory competition that negatively impacts the provider infrastructure and plurality is detrimental.

¹ COVID-19 and Social Services: what role for the EU? Europe Expects Recognition, Urgency, Resilience. Joint Position Paper, p. 3; 25.06.2020

² Mapping systems and trends in quality social services for social inclusion, p. 5; 12.2019

³ Quality Services for Social Inclusion: Mapping Quality Regulations, Requirements and Trends in Vocational Rehabilitation for Persons with Disabilities, p. 6; 12.2020



The entire process of SRPP needs to be oriented towards the objectives of “*Aiming at full employment and social progress and to combat social exclusion and discrimination, [...] promote social justice and protection, equality between women and men, solidarity between generations and protection of the rights of the child.*” It is not sufficient that these objectives are incorporated in the subject matter of a contract.⁴

Tendering authorities should be made aware of and trained in Socially Responsible Public Procurement. The EU Buying Social guide is a valuable tool. It states, “*public buyers are encouraged to take into account ‘quality, continuity, accessibility, affordability, availability and comprehensiveness of the services, the specific needs of different categories of users, including disadvantaged and vulnerable groups, the involvement and empowerment of users and innovation’*” (p. 12; similar: p. 55). The Guide also contains an explicit reference to quality standards that “*can also be applied when procuring social services, such as the 2010 Voluntary European Quality Framework for Social Services.*”

To ensure a good understanding of the quality services that are necessary to fulfil a social need, it is important to evaluate the needs before initiating any procurement, such as in the competitive dialogue which foresees an exchange between the contracting authority and potential bidders on the solutions and service design to appropriately address those needs identified, based on the requirements of the public buyer. Public authorities must be made aware of and implement such processes.

Trends and expectations for quality services

Trends and expectations for quality services can vary a lot across European countries, especially because there is not a common definition of social services sector, although it is usually considered as encompassing the care sector. In some countries, for instance, social services might not include childcare or occupational activities.

Despite this underlying variety across Member States, some common expectations from social services organisations can be identified. First of all, social organisations are increasingly considered as a key instrument for social cohesion. The demand for quality social services has been increasing in Europe, especially considering some key challenges such as an ageing population, demographic change and the post-Covid economic and social recovery⁵. In this context, the launch of the ESRPD by the EU Commission is the proof of the increasing importance of guaranteeing high-quality social services in Europe. This means that social organisations must meet higher expectations from both regulators and clients.

Secondly, there is a growing call for higher efficiency of social services, which however often lack adequate financial resources. The pandemic has had a negative impact on all Member States, but some of them suffered more than others due to pre-existing struggles during the 2008 financial crisis. For example, social organisations in Southern and Eastern European countries are more affected by chronic underfunding and, especially in the case of Eastern countries, by the malfunctioning of a system which needs to be innovated⁶. Despite the economic struggle, social services providers are increasingly asked to deliver more efficient services and to ensure quality, which can be a complex challenge for many organisations.

⁴ SSE-Statement-EC-Guide-Buying-Social; 06.12.21

⁵ Mapping systems and trends in quality social services for social inclusion, p. 3; 12.2019

⁶ *ibid*, p. 4; 12.2019



Thirdly, social services across Europe must meet high expectations from clients too, especially in terms of service delivery, quality management and inclusion. There is an increasing need to ensure a user-centred approach to social services so that they truly consider the needs of the recipient. However, recipients might also have difficulty in explaining their expectations, since as it was already mentioned not everyone conceives the nature and purpose of social services in the same way. The concept of quality remains a key part in the debate.

As for the trends in quality, there is wide variety across countries regarding the framework of regulations. Among the variables there is the structure of the state (federal states might have heterogenic internal regulations due to their autonomous regions), the level of governance that manages the provision of social services and the type of organisations operating in the social service market, be they state-owned or for/non-profit private organisations⁷. In most cases local authorities are essential for the provision of social services, which might lead to unequal quality according to the financial resources available locally. As for for/non-profit organisations operating in social services, the debate focuses on the one hand on the concern that their integration might affect quality of services, and on the other on the excessive inertia of state-owned organisations.

As far as certifications of quality are concerned, in most countries, states offer the basic regulatory framework by providing certificates or licenses, while they do not reward for optional certifications, which are not required in most countries. Moreover, there is the tendency to focus more on holistic and “soft” quality criteria like a client-oriented approach and less on the technical definition of quality⁸. The most popular certifications are ISO and EQUASS, but there are also some local or national certifications that social organisations can get to improve their organisational work (for example QUALISAP in France).

When it comes to vocational rehabilitation (VR), many countries do not have specific legislation on the provision of such services and do not oblige them to have quality certifications. For this reason, providers in some countries tend to consider the current frameworks insufficient and to look for other ways to ensure quality criteria. The main practices in which VR providers can ensure quality are by signing agreements with funding entities, guaranteeing that the staff meet educational standards or have required qualifications, using standardised assessments, and monitoring and adopting voluntary quality standards and certifications, such as EFQM, CDMP or EQUASS⁹.

Some examples of good practices promoting quality of services

Lithuania – implementing EQUASS to implement the VEQF

The Valakupiai Rehabilitation Centre (VRC), member of EPR, offers medical and vocational rehabilitation, social services, and a driving school to persons with moderate and severe disabilities. VRC focuses on providing quality services which continuously evolve to better fit the needs of persons with disabilities. Community integration and independence are at the core of every service provided. A holistic approach is taken to care, with the mental and physical health, employment and education included. The VRC acts as a national coordinator of EQUASS in Lithuania, broadening the assurance of quality services across the country, and is leading an ESF-funded project to implement “European Quality Framework for Social Services” in 120 service providers over 5 years, ending in 2022.

⁷ ibid, p. 5-6; 12.2019

⁸ ibid, p. 6; 12.2019

⁹ Quality Services for Social Inclusion: Mapping Quality Regulations, Requirements and Trends in Vocational Rehabilitation for Persons with Disabilities, p. 4; 12.2020

It does so through supporting providers to achieve EQUASS Assurance certification. By committing to implement the EQUASS, the social service providers commit to deliver services that correspond to standards agreed upon at the European Level. Using this model, organisations can provide quality services which support the inclusion of persons with disabilities in society.

Portugal – quality benchmarking

FORMEM (Portuguese Federation of Vocational Rehabilitation and Employment Centres for People with Disabilities) was established in 1991 and currently represents 49 organisations that provide support to people with all kinds of disabilities. Their action is twofold. They work on an institutional level to improve the political and provision framework for people with disabilities and develop sharing and learning dynamics to enhance the efficiency and effectiveness of the support given by Portuguese social providers to people with disabilities. In 2012, FORMEM's board decided that improving governance and quality of services should be a priority to achieve an increasingly efficient and effective support to people with disabilities. To operationalize this goal, they started to organize “Quality Meetings”, where rehabilitation organizations discussed and shared their understandings and practices related to a specific theme connected to good management and social inclusion. These “Quality Meetings” continued to occur with 4 to 6 meetings per year and with great feedback. They succeeded in creating a reciprocal learning and trusting atmosphere that allowed the incorporation of the EQUASS principles as guidelines of the meetings, and gradually transforming them into a real environment for benchmarking and bench learning for social providers in Portugal. Today FORMEM promotes two benchmarking groups, one in the North of Portugal, one in the South, that assembles 80 participants including rehabilitation professionals, psychologists, nurses, executive and general managers, board members, human resources and financial managers from 30 social providers in Portugal. In addition to this, FORMEM has created a benchmarking database with 178 key performance indicators and results.

Sweden – comprehensive internal system

Since 1989 the Activa Foundation has been supporting the employment of people with disabilities in Sweden by offering VR and training opportunities. The Foundation is strongly committed to ensuring the quality of their services and has developed its own quality management system. Activa implements voluntary measures for quality assurance, such as the monitoring against quantitative performance indicators (for example the number of pwd employed), user satisfaction questionnaires for pwd and employers and staff and employment consultants training to improve their competences. Furthermore, Activa introduced an Individual Placement and Support (IPS), a model of supported employment which assist people with mental illness in finding a job, and it monitors the extent to which this tool is implemented within the organisation. The Foundation also consults a national knowledge base developed by the Swedish Board of Health and Welfare in order to identify which services can bring better results for recipients.

Estonia – implementing European Voluntary Quality Framework

In Estonia, from 2010 to 2014 in the framework of a European Social Fund project, providers of services to persons with disabilities and other disadvantaged persons implemented the European Voluntary Quality Framework for social services in their organisations - private, semi-public and public entities alike. One outcome of the project is that meeting the requirements of the Framework, together with financial considerations, has become one of the criteria for the funding of social services by public authorities in Estonia.

The Framework was implemented through the EQUASS Assurance tool, and saw an increase in the level of quality, efficiency of service governance, promotion of users' rights and their enhanced participation¹. This practice, which has earned the Ministry and the partner organisations multiple awards, can be replicated through public procurement.

Ireland – quality in public procurement

Examples of public procurement taking quality well into account. The JobPath tender, Ability tender, both in relation to activation to access the labour market, the first for Long-term unemployed, the latter for persons with a disability. They included clear instructions, extensive preparatory scoping work carried out by the tendering body, experience from international and national best practice was incorporated into the tender scope, detailed briefings for Tenderers were provided, responsive and comprehensive responses to requests for clarifications were given, qualitative criteria out-weighed price criteria. Necessary minimum Quality standards are specified, Tenderers are asked to state quality awards & accreditations. Generally recognised quality standards, both national and international, are a necessary minimum; if not mandatory, then as a criterion that is scored and difficult to succeed without it. Tenderers may be disqualified for Regulatory non-compliance. Which standard will vary between tenders based on factors such as target beneficiaries, type of service and depth of intervention. Examples might be HIQA compliance/experience, and for training, accredited to bodies such as QQI, City & Guilds.

Finland - Housing action: Quality criteria for evaluating and developing housing solutions

The quality criteria for housing solutions were prepared by the Advisory Board of Housing for People with Intellectual and Developmental Disabilities, which is a network of NGOs and public bodies in the disability. The quality criteria for housing solutions provide guidelines on evaluating and developing housing solutions for persons with disabilities. Housing solutions for persons with disabilities shall be founded on equality with others. This calls for action to promote the rights of persons with disabilities on an equitable basis with other people.

<https://verneri.net/asumisen-tekoja/wp-content/uploads/2018/11/quality-criteria-for-evaluating-and-developing-housing-solutions.pdf>



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