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DESK

RESEARCH

Quality Assurance of VET
Services based on Rights
and Quality of Life

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1. INTRODUCTION

This research is part of the Quality Assurance of VET Services based on Rights and Quality of Life (QUASAR) project, which aims to improve quality assurance in social care and vocational education and training (VET) by promoting knowledge about trends and key issues in service provision and quality management, with an emphasis on respect for the human rights of users.

This text is part of the existing map of analysis and research on quality assurance, whose main target group is the providers of VET and social services for people with disabilities, but also organisations running quality management systems, policy makers, people with a disability or mental health issues and their families.

This research mapping and system analyses has resulted in the present document which provides an overview of selection of studies and an analysis of some quality assurance systems used in education, social care and VET, so that social service providers working with people with disabilities in Europe can take into account new trends in this field.

2. STATE OF THE ART

“Persons with disabilities have the right to have good conditions in the workplace, to live independently, to equal opportunities, to participate fully in the life of their community.

All have a right to a life without barriers. And it is our obligation, as a community, to ensure their full participation in society, on an equal basis with others.”

[Commission President von der Leyen at the European Day of Persons with Disabilities dated 03/12/2020.]

The European Disability Strategy 2010-2020 encouraged actions to make a difference for the life of approximately 87 million persons having some form of disability in the EU. It contributed to improve the situation for persons with disabilities in a number of areas, such as accessibility and rights.

However, persons with disabilities are still facing considerable barriers in access to healthcare, education, employment, recreation activities, as well as in participation in political life:

- 50.8% of persons with disabilities are employed compared to 75% of persons without disabilities;
- 28.4% of persons with disabilities are at risk of poverty or social exclusion compared to 18.4% of persons without disabilities;
- only 29.4% of persons with disabilities attain a tertiary degree compared to 43.8% of those without disabilities;
- 52% of persons with disabilities feel discriminated against.

[source: European Strategy for the Rights of Persons with Disabilities 2021-2030]

The gaps in educational outcomes between learners with and without disabilities are clearly suggesting that more action is needed.

The European Strategy for the Rights of Persons with Disabilities, developed for the decade 2021-2030 aims to cover all areas and to improve the lives of persons with disabilities in the EU and beyond.

Compliance with the UNCRPD is a key theme of the strategy and its actions. Guidelines and General Comments from the UNCRPD Committee in recent years emphasise the need for services to ensure compliance with the UN convention and take a rights-based approach. Quality systems operating in the disability and more broadly the social sector need to take this into account.

One of the flagship initiatives of the strategy is to develop a specific framework for Social Services of Excellence for persons with disabilities in 2024, 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 QUASAR project partners welcome this initiative, which shows a recognition of how important the topic is, and the project will bring insights into its development.

There is not yet a common approach to create the conditions for learners with disabilities to succeed. Indeed, among the key points of the current Strategy, we can clearly identify the need for inclusive and accessible VET programmes. Quality systems can play an important role in this when they encourage organisations to address such issues through their requirements.

In some countries there are specific legal requirements to implement a system to ensure inclusive and effective service delivery. In other countries there are just some rudimentary tools to promote such an approach or to evaluate the results achieved at the end of the year. Quality of life and rights of PWD, simply, do not play the role they should. Therefore, this project has focused on these specific issues in its research, evaluation, resources and recommendations.

Evaluating the results, achieving the desired objectives, improving the service is already a set of activities that requires significant efforts. Being able to do that systematically is even a more difficult challenge. A structured organizational framework and a well-defined *modus operandi* - something that is often referred to as a “quality system” - can meet the challenge.

In the following pages, some existing studies about the quality of services in the VET and social sector have been analysed and compared and a selection of national and international quality systems have been explored in terms of pro and cons, focusing on the context outlined above. Key trends and conclusions have been drawn from this.

It has been concluded that, at the moment, there is not a quality standard able to address all of the interested parties' requirements, needs and expectations. At the same time, the analysed standards do represent a solid foundation to provide insights into the framework for social services of excellence and to support the achievement of the Disability Strategy's goals.

3. MAPPING STUDY

A. PLATAFORMA DE ENTIDADES PARA LA PROMOCIÓN E INTEGRACIÓN SOCIAL DE PERSONAS CON ENFERMEDAD MENTAL (ISEM)

STUDIES	DATE
1. Modernising Social Services in Spain. Designing a New National Framework https://www.oecd-ilibrary.org/sites/4add887d-en/index.html?itemId=/content/publication/4add887d-en	OECD (2022), Modernising Social Services in Spain: Designing a New National Framework, OECD Publishing, Paris, https://doi.org/10.1787/4add887d-en
2. Executive summary INTERNATIONAL REPORT ON THE QUALITY OF DUAL VET IN SPAIN	International Report on the Quality of Dual VET in Spain - Fundación Bertelsmann. (2022, February 24). Fundación Bertelsmann. https://www.fundacionbertelsmann.org/publicaciones/international-report-on-the-quality-of-dual-vet-in-spain/

1. Modernising social services in Spain. Designing a new national framework

Short overview of the scope

Between 2020 and 2022, the OECD Directorate for Employment, Labour and Social Affairs (ELS), in collaboration with the Ministry of Social Rights and Agenda 2030 and with funding from the European Union through the Structural Reforms Support Programme, carried out a project with the aim of assessing the provision of social services in all the Autonomous Communities of Spain and, based on this assessment, making recommendations to improve the system as a whole.

This report examines the provision of social services in Spain and presents ways to improve the legal context, move towards more universal services, strengthen quality and build more evidence-based policies based on information collection and analysis of these variables (provision, legal context, quality...).

Main conclusions and recommendations

This study is presented as the result of a bibliographical research work and an intensive information gathering campaign in the field. The results revolve around four common problems in social services:

- the legal framework,
- access to services

- financing
- governance.

After presenting the main results of the study, with the problems mentioned above, the OECD presented a series of recommendations/conclusions addressed both to the central state and to regional and local authorities, as well as to social service providers. These are:

1. First recommendation - design a new legal context for social services, through a national law guaranteeing basic access conditions. For this, the following is important:
 - To define minimum social services throughout the country.
 - Advancing the coverage of subjective rights and their enforceability.
 - To improve the transferability of rights for people moving between autonomous communities.
2. Second recommendation - clearly explain the scope of social services with the aim of clarifying the definition of social services based on national and international practices. Emphasise in this case:
 - Strengthen government funding.
 - Addressing social protection gaps in certain areas.
 - Consider more comprehensive services based on international practice, including increasing the importance of preventive services, strengthening home-based services and transforming residential centres into supported housing or other community-based models, strengthening legal aid for vulnerable groups and addressing gaps in family and child protection services.
3. Third recommendation - improve the quality of social services. This is essential in this respect:
 - Rethink staffing and facilitate their training and development. This requires, for example, simplifying administrative procedures for both staff and users.
 - Design integrated services within a broader strategy and improve interoperability with other sectors.
 - Strengthen accountability requirements for private and third sector providers.
4. Fourth recommendation - Strengthen data-driven policy making, being basic:

- Improve the monitoring and evaluation system.
- Increase the use of data and factual evidence in policy making.
- To achieve this, it is important to encourage policy makers and professional teams to consult data on a regular basis.
- Disseminate the results of evaluations publicly.

Content relevant for the project

The content of this study is important for the objectives of the QUASAR project as it presents measured recommendations for a strengthened social services system. The implementation of these recommendations and the concentration of efforts around the issues described above would lead to improvements in the quality of service provision and thus in people's quality of life.

In addition, the conclusions/recommendations of this project serve to see where quality needs to move forward. In this case, these recommendations are addressed to different institutions that have the capacity to articulate better policies and legislation, resulting in quality systems and better measurement of social service delivery.

Furthermore, it is relevant to the project as it shows the perspective of the OECD, an international organisation that works to design policies and promote policies to achieve a better life and well-being for all people. It shows where we should be heading in terms of quality, presenting the possibility of creating a new legal framework with consolidated rights, in order to reduce service deficiencies and improve quality and access to services.

2. Executive summary international report on the quality of dual VET in Spain

Short overview of the scope.

This report is part of the technical support of DG Reform of the European Commission to improve the quality of Dual Vocational Training in the Spanish education system. It analyses the implementation of quality elements in this type of vocational training in 4 European countries: Denmark, the Netherlands, Portugal and Switzerland. The aim is to identify and analyse good practices in these countries for possible transferability to Spain. The analysis focuses on the 14 quality criteria included in the European Framework for Quality and Learning Effectiveness.

Main conclusions and recommendations.

The report includes information on the education systems in Denmark, the Netherlands, Portugal and Switzerland and analysed on the peculiarities and data of each country.

In the first part of the study, 10 of the 14 quality criteria are taken as a basis and analysed in the 4 European countries. In the second part of the study, the top priority recommendations drawn from the analysis are presented in order to promote the quality

of dual VET, specifying that it would be advisable to include most of the recommendations in national regulations and/or in new structural reforms.

It is important to mention that, although the demand for dual VET has been increasing in recent years, this form of education still lacks the recognition it should really have in Spain, and therefore the 19 recommendations that emanate from this analysis seek to improve the Spanish education and VET system.

Some of the recommendations, based on good practice in these countries, are:

- Eliminate the existing limitations in dual vocational training contracts (duration, age, validations...), really linking the student to the company.
- Involve VET institutions or VET education departments more in the validation of training plans.
- Introduce compulsory training for company tutors or trainers. That is to say, training in all Spanish regions for as long as necessary to contribute to the quality of education. All four countries analysed have in-company training courses for tutors/trainers.
- Include in the regulations an accreditation procedure for tutors/trainers to ensure that their profiles match the needs of the student body.
- It would also be advisable to establish a minimum ratio of one accredited tutor/trainer per company, e.g., in Switzerland and Portugal, this ratio exists.
- Conduct a standard and formal assessment of the competences that students acquire in-company. In the case of Portugal and Switzerland they hold an exam to assess the learning outcomes obtained in the in-company training.
- Establish mandatory and standardised student fees at national level.
- Creating a national monitoring system for dual VET, including nationally comparable key indicators, would be a strength. Indicators such as: participation rate, graduation rate, drop-out rates and reasons, satisfaction and continuity of training companies.

Content relevant for the project or the four quality systems.

It is relevant to the QUASAR project as it has among its fundamental objectives: to improve quality assurance in VET by promoting awareness of trends and key issues in quality assurance and quality management, including quality of life and rights aspects, thus contributing to the EQAVET - European Quality Assurance Reference Framework for Vocational Education and Training - which has guided Member States in developing and improving the quality of their VET systems. In this sense, the study is of relevance because it shows one of the main challenges of training systems: to move towards quality standards that ensure better implementation, development and effectiveness of these systems.

B. EUROPEAN PLATFORM FOR REHABILITATION (EPR)

SELECTED STUDIES	DATE
1. EASPD - Innovative Frameworks for measuring the Quality of services for Persons with Disabilities	2021
2. EPR Quality Study Mapping systems and trends - Summary Report	2019
3. EPR - Quality Services for Social Inclusion: Mapping Quality Regulations, Requirements and Trends in Vocational Rehabilitation for Persons with Disabilities	2020

1. Innovative Frameworks for measuring the Quality of services for Persons with Disabilities

Short overview of the scope of each study.

The report presents findings from a study commissioned by EASPD, the European Association of Service Providers for People with Disabilities, shortly after the European Commission adopted a new Strategy on the Rights of Persons with Disabilities. The strategy includes a proposal to develop a European Framework for Social Services of Excellence for Persons with Disabilities. This paper aims to support its development process through a review of existing frameworks for measuring service quality and gathering clues about how a European framework for measuring service quality could be elaborated.

Initial findings from mapping existing frameworks and analysing the different approaches against Quality of Life as conceptual orientation led to identifying a set of indicators in three levels including service outcomes, support practices, and processes and structures. Results were presented to and discussed by various stakeholder groups including EASPD's own task force on service quality, in which EPR also took part, other service providers and organisations representing people with disabilities.

Their feedback helped to formulate a framework and a list of indicators designed to determine good quality in services. The report points out that the framework and indicators were not meant to serve as a checklist but, more generally, as a tool to sensitise and increase awareness about quality among service providers. It should be noted that the authors present their work as a first step; the proposed framework and indicators need testing and trying and further development efforts (see later for more information).

Main conclusions and recommendations.

The study chose Quality of Life as conceptual starting point which gives a clear direction regarding process, output and outcome of services for persons with disabilities. Quality then is linked to the impact of the services on the living situation and the well-being of the people being served.

The first part of the report gathers findings from a literature review on quality services, quality assurance systems and legal provisions to improve quality in services. Some provisions present specific rules and a licensing system through which only vetted service providers get access to public funding. In other countries, legal provisions aim at assuring a quality of life for every citizen which in return implies substantial support for persons with disabilities so that they can lead a “normal” life like every other citizen.

The second part of the report describes the choice for 20 frameworks or tools used to develop a new framework suitable for service provision with persons with disabilities, as well as conceptual considerations around Quality of Life and quality in services. In their analysis, the authors filter and assemble what they consider to be the most useful elements from the different frameworks, and concluded on a catalogue of indicators regarding service outcomes at the level of an individual, staff outcomes and family outcomes, support practices, and processes and structures.

Outcomes at the level of an individual are grouped along Quality of Life domains e.g. self-determination/autonomy or material well-being, and their indicators grouped as self-reported (“what we would like the people [nb: the users] in receipt of services to say”) and objective (“what would we [nb: the service provider] see and hear”). Additional lists refer to staff outcomes and family outcomes. The second block of indicators deals with Support Practices (“what would we see or what would people tell us about the support they receive and their staff.”). Here, indicators are grouped under (1) Attitudes and ethos (2) Working methods and technical skills (3) Environment and Planning. A third block gathers indicators regarding Processes and Structures (“Ensuring staff have the skills and motivation to implement these practices and ensure quality of life outcomes for individuals supported are realised”), divided into Service/staff team level and Organisational level.

The authors conclude with a proposal for the future development of a framework to measure the quality of services for persons with disabilities, namely to carry forward the work in three next steps: (a) Testing out the framework and indicators (b) Develop a comprehensive measurement toolkit (c) Field test and conduct cognitive testing for the framework and associated toolkit with large cohorts of users, family members, staff, service providers and potentially also state authorities in charge of regulating, monitoring and funding the services. It is expected that the selection and description of indicators would be further refined, difficult-to-handle indicators filtered out, and the various stakeholder groups would provide clues how the indicators could be made to work for them. Finally, a

hint is given that the use of the framework would require setting up data capture tools, translation, training and technical assistance for the tool to become usable in European context.

Content relevant for the project

The authors did a thorough job in extracting and sorting elements from numerous publications on measuring quality in services for persons with disabilities. The Quality of Life approach also explains the meaningful distinction between subjective and objective indicators, in other words attention is paid to the user perspective and the service provider perspective. And even though the formulation of indicators is geared towards the latter, the findings from consultations underline how crucial it is to capture the “user experience” for measuring quality.

The indicators themselves cover a variety of Quality of Life domains, which means users, family members and service providers can present a lot of detail in response to the questions raised. It shows that it is important for quality management and assurance systems to take into account impact and outcome measurement, and to look at what extent this can be addressed by a cross-sectoral system. It would also be important to look at tools such as the QIAT tool measuring impact on QoL developed by the QOLIVET project can fit with assurance systems.

This indicator list seems truly useful for future work on measuring quality, and indicates the importance of quality of life in the context of quality measurement and assurance. However, none of the findings have been tried or tested with “real” people, likewise the authors present a list of things still to do. This piece of work, though incomplete, had a particular purpose, namely to inspire and serve as compass for a much wider EU policy making context, therein offering orientation how the new work on measuring quality in services could support efforts towards a European Framework for Social Services of Excellence for Persons with Disabilities.

What it lacks is proof of concept and the tools for practical application i.e. the “mechanics” of measuring, categorising and certifying, moreover getting quality recognised and recognisable for others. The paper remains at the level of inspiring and suggesting further steps in a longer development process.

2. Quality Study Mapping systems and trends - Summary Report

Short overview of the scope of the study

This paper is the summary report for the first of two studies conducted by Policy Impact Lab for the European Platform for Rehabilitation (EPR) on promoting quality in social

services. The study had two objectives: (1) Better understand the current and potential developments, trends and needs of the social service sector in the field of quality, with a focus on those providing vocational rehabilitation services (2) Inform the European Commission about the developments and needs of the sector in order to inform policy making. Main source of information were questionnaires and interviews with social service practitioners and service regulators in eleven countries, complemented with articles and policy reports from across Europe. In addition to the summary report, 11 country reports provide detail on the national situations of service provision, regulatory frameworks and the use of quality assurance systems such as ISO, EFQM or EQUASS.

The paper continues with describing the different national settings of social services, the care sector, vocational education and training, and vocational rehabilitation. In some countries VET and social services are “two different worlds” and find connection primarily through the service user if they access services from both sectors. In any sector, service providers feel pressured by regulators, service users and the general economic situation in the country, to develop services with limited resources, while trying to keep up with increased demands by the users for more and better services. It appears regulations, certifications or vetting systems, funding and competition for contracts, as well as a diverse market situation with public, private commercial and private non-profit service providers, may be different from country to country - but at times similar with regards to the struggle of finding the balance between cost, conformity with rules, and quality in the eyes of the service user.

The report presents further insights e.g. concerns about the commercialisation of social services, satisfaction or scepticism with existing quality assurance systems, the importance of “soft” quality criteria, or the limits of obligatory (state) certification systems in comparison to voluntary, more detailed and more sector supportive systems.

Main conclusions and recommendations

The findings from this study are interesting for several reasons: (1) Interviewees from eleven European countries contributed to the data collection (2) Observations refer to the wider social sector, even family support or health services, and highlight certain developments may not be specific to VET or Vocational Rehabilitation e.g. de-institutionalisation or the concept of person-centredness (3) Interviewees cover different institutional roles incl. service regulator, service provider, quality manager, etc. (4) National reports include information about the knowledge or popularity of ISO, EFQM or EQUASS, raise questions about regulator support for a particular system, to what extent it might affect competition, or the attractiveness of local accreditation systems e.g. the Portuguese “Social Responses Certification” which uses ISO 9001 and EFQM as basis.

One national report describes obligatory certifications as “somewhat narrow” while service providers opt for voluntary certifications “in order to develop their management processes, achieve credibility, as an impetus for internal reorganization and for better engagement of

relevant stakeholders in the design of services and their provision.” Could it be some regulators aim at minimum quality standards while some service providers think of excellence in services? This and reasons for opting for voluntary standards are important for those standards to consider.

Another national situation is burdened with administration and overregulation though slowly moving towards de-institutionalization and a rights-based approach to service provision. Meanwhile in another country, with a federal government system, all states consider quality as leading principle across many subsectors, but each state with different understanding of what makes quality. National law would also not pursue certification but accreditation systems for service providers, which e.g. for residential care requires monthly reporting on quality to the local authority. Apparently, if service providers fail to comply with set requirements, there is a real risk of quickly losing the licence.

It can also be that service providers are offered certification systems in abundance, hence the interest is centred toward those systems known to the local regulators and funders. One country leans on a twenty year old “National Strategy for Quality Improvement in Health and Social Services” accompanied with regular annual government updates on “quality and security for patients”. The strategy, apparently more a guidebook, presents six basic criteria: Effectiveness, Safety and security, Involvement of users and their influence, Coordination and continuity, Proper use of resources, and Accessibility and fair distribution. For the area of Vocational Rehabilitation, certifications are not obligatory except in two subsectors. Whereas quality standards and requirements are often formulated in great detail in the specifications for public tenders. Here, and one can assume this accounts for more areas in the social sector, attention is paid less to certification and more to the functioning of the internal quality system that the service provider organisation has in place.

Content relevant for the project

This study offers valuable insights into the different national “markets” of quality assurance in eleven countries, and therein the different market positions of ISO, EFQM and EQUASS for the vocational rehabilitation sector and/or for social services. Government settings (central, federal, national/local), regulatory provisions (obligatory accreditation and licencing, external or sectoral certification, monitoring and control), and types of service provider organisations (public, private, commercial, non-profit) influence how stakeholders and actors relate to quality systems. The economic situation appears to impact certain aspects but leaves service providers everywhere with pressure to offer more and better services.

But what does it actually mean, quality? One national report points out depending on region and sector the indicator for quality in services may differ dramatically. Service providers hesitate with yet another tool to certify the quality of their work, because the local

authority might have other ideas. Therefore it is important for systems to understand expectations at local, regional and national level. One national report describes the slow move towards a rights-based approach to services and highlights the increasing influence of service users actively advocating for their rights. Other reports emphasise the constant pressure to reduce costs and increase efficiency. The same reports mention service providers taking up optional quality assurance systems for the purpose of improving their work and their structures beyond basic requirements imposed by the state.

The study shows there are different ways how the triangle relationship between service user, service provider and service regulator/funder can be established, and how variations determine the defining, measuring and improving of quality in services. Beyond the setup, models and tools at hand, there are different market situations across Europe for quality assurance systems, and clues why they might not succeed in certain places.

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

First part: short overview of the scope of each study.

Policy Impact Lab conducted a mapping for a second of two studies commissioned by the European Platform for Rehabilitation (EPR) on promoting quality in services, here with a focus on Vocational Rehabilitation for persons with disabilities. The study had two objectives: 1. To better understand the current obligatory and voluntary regulations, requirements and trends in Vocational Rehabilitation for Persons with Disabilities across different European countries 2. To inform the relevant stakeholders and policy-makers on the current gaps and needs in quality standards for Vocational Rehabilitation.

Main sources of information were desk research on practitioner and policy reports, national legislation, academic articles, and interviews with service providers and service regulators in the countries covered by the study. The report presents an introduction into governance and organisation of Vocational Rehabilitation, regulations and trends on quality as well as the role of voluntary quality systems in the sector. It continues with case studies for seven EU countries and the UK and concludes with recommendations primarily for the use of EPR's EQUASS in Vocational Rehabilitation.

Main conclusions and recommendations.

The desk research reveals in most countries covered by this study Vocational Rehabilitation is governed and organised by several authorities, institutions, insurances and employers. The provision of services is regulated differently per country, though often with wider reaching rules on employment, disability or rehabilitation in general. Service quality

standards are introduced in various countries for the social sector, though not necessarily for Vocational Rehabilitation.

From a European perspective, countries appear to have different approaches how Vocational Rehabilitation “belongs” to employment and social policy, vocational education and training frameworks, general or medical rehabilitation. In addition, it makes a difference whether Vocational Rehabilitation services are offered by many similar, many different or a few large service providers dominating a national market. Differences may also occur if funding is offered nationally, regionally or locally, or depend on how long a national legal framework is in existence.

Quality certificates are rarely mandatory; it seems more common to formulate quality requirements in service contracts between funder and service provider including details on staff qualifications and training levels. Interviews with service users on job placement satisfaction appear to become an important tool to determine quality in services. And if employers or insurers get involved in the funding, performance-based pay for services is likely. Interviewees pointed out challenges, too, though different from country to country i.e. lack of investment in the sector, lack of ambition on quality by the authorities or by a service provider monopolising the market, not enough staff training or too much bureaucracy. Opinions about adequacy of quality regulations therefore vary from country to country, and consequently, interest in quality assurance systems varies between countries, too.

The study then presents an overview on the use of voluntary quality standards, systems or guiding principles by Vocational Rehabilitation service providers in the eight countries, including EQF, EQAVET, ISO, EFQM, EQUASS, CDMP (Certified Disability Management Professionals) and EPSR (European Pillar of Social Rights). What they have in common is that in most countries covered by this study they are not used, and in many organisations they are not known. The study thus recommends awareness-raising and advertising to work on quality in Vocational Rehabilitation services.

Content relevant for the project

Comparative study and country case studies provide an interesting insight into the practice of improving quality in Vocational Rehabilitation e.g. the differences between countries regarding regulations and markets, and practitioners regarding knowledge of systems and motivation/need to work on quality in service development. On the surface it seems as if quality has no priority in certain places; it may or may not be a topic for regulators and funders, with a tendency to impose requirements for the wider social sector, employment support sector or disability, less so tailored for Vocational Rehabilitation services.

Looking closer at practices in Vocational Rehabilitation, one national case study, where Vocational Rehabilitation is funded by insurers or the employer, shares ‘key dimensions of quality’ that illustrate quality can be central element for service design though understood in different ways. Here it is described as ‘procedure-based’, paying attention to the pace of

work, organisational processes and adherence to procedures. If the process and the procedures can deliver a high number of successful rehabilitation of employees, this is considered high quality and reason to hire the service provider again. Therefore impact can be important for a quality system to address. Cost plays an important role, though not necessarily favouring cheap solutions if they cannot deliver a proper return of investment. Employers rather look for cost-effectiveness which, on the long run, might give preference to large service providers able to invest e.g. in training and paying qualified staff vis-à-vis greater numbers of patients to serve. This shows that if a quality system can support cost-effectiveness this is an added value.

Several case studies notice limited or no influence of European principles and systems on the national market. The European Pillar of Social Rights (EPSR) is not well known among service regulators nor providers and is seen to offer no additional value when national guidelines promote the same principles. ISO seems relatively well known in national markets where international standardisation is used by the social service or social care sector. Where Vocational Rehabilitation is closely linked to medical rehabilitation, quality standards may be high but referring to different aspects than those covered e.g. by EFQM or EQUASS.

The study provides a range of insights into the role of mandatory and voluntary quality assurance systems in national context in eight countries - which appear to have eight different approaches to organising Vocational Rehabilitation. National case studies also present explanations why EQF, ISO, EFQM or EQUASS might not be picked up by service regulators or service providers. Findings and conclusions seem very relevant for the project. It would be relevant for a quality system to also address the challenge of not enough staff training, potentially offering affordable training, to ensure that the system is low on bureaucracy, and explore the success factors for quality systems to be affordable and feasible in different sectors and/or organisations. What level of investment, what degree of awareness raising, training and support for staff, what amount of admin is needed to get a quality assurance system to bring benefit for the users, to the services and the organisation?

C. THE REHAB GROUP

SELECTED STUDIES	DATE
1. Driving Up Quality, ESN	2022
2. Self Evaluation for Improvement	2019

1. Driving up Quality

Short overview of the scope of the study

This document is a report of a Social Service Quality Assurance working group of the European Social Network looking at quality assurance in social services across Europe. Members of the working group come from a number of organisations across 12 European countries working in organisations implementing quality initiatives, research organisations and social care providers. The purpose of the working group is to identify good practice in quality assurance in social services.

Main conclusions or recommendations

The ESN are of the view that there are three key stakeholders in what they term the “The Quality Triologue” these are people who use the services, public bodies and service providers, within this Triologue then quality of the care and support must be defined and agreed.

Based on research and consultation completed by the working group they identified 10 key trends influencing quality assurance in social services across Europe, they are:

1. Change in focus from input based to output-based quality measurement
2. An increased focus on person centred care
3. A shift from institutional to home, family and community-based services
4. The increasing role of quality standards and improvement agencies
5. A culture shift from quality monitoring to continuous improvement
6. Self-assessment as part of continuous improvement
7. External quality certification
8. Integration of health and social care
9. Procurement and quality in social services
10. Personal budgets

Under each area the document outlines examples for a range of member states.

In 2010 the EU produced a Quality Framework for Social Services, the aim of the framework was to create commonalities in systems across member states, however it remained unknown, and the ESN believes it is time to revise the framework and promote its use again as a common approach is needed.

In addition to identifying the trends impacting quality assurance outlined above the ESN's group have commenced discussing the key principles that should underpin a new European quality assurance framework. These are based on existing European and national standards:

Human-rights-based
Safe

Outcomes-oriented
Person-centred
Respect
Partnership and trust
Choice
Empowering
Easy to access
Community-based
Transparent
Integrated and comprehensive
Accountability
Well-resourced/well-funded
Workforce support

Content relevant for the project or the four quality systems.

The content is very relevant for the objectives of this project as it identifies trends in quality and assurance and suggestions for principles of quality assurance in social services in Europe moving forward, this will all be relevant for the booklet produced by this group.

2. Self-Evaluation for Improvement, Care Inspectorate Scotland, 2019

Short overview of the scope of the study.

This document is a guide as opposed to a study. It has been developed by the Scottish care Inspectorate. The Inspectorate is of the view that self-evaluation is central to the improving the quality of care services. The guide is intended to provide a framework for care services to complete effective self-evaluation.

Main conclusions or recommendations.

Self-evaluation is central to the delivery of quality services and enables service providers to examine what they are doing and identify areas for improvement. It allows providers to make informed decision and ultimately improve the quality of life of service users. When done properly self-evaluation focuses on outcomes for people who use the service.

Self-Evaluation should focus on three key questions:

- How are we doing?
- How do we know that? This should be from process information but also from consultation
- What do we plan to do next? What are the priorities and what is the plan?

The document also provides guidance on how to include people who use services and remove barriers from achieving objectives.

Content relevant for the project

This guidance document is relevant for this project as it would provide useful information for inclusion in the booklet in particular in respect of consultation.

D. AJA EUROPE

SELECTED STUDIES	DATE
1. STUDENTS WITH DISABILITIES AND SLD IN THE ITALIAN UNIVERSITIES	2017-2022
2. IMPROVING THE QUALITY OF SCHOOL INCLUSION	2021

1. Students with disabilities and SLD in the Italian Universities

Short overview of the scope of the study

This is a set of studies regarding students with disabilities and SLD (specific learning disabilities) in the Italian universities, starting from 2017 survey developed by CENSIS - Center for Social Investment Studies up to 2022 survey developed by ANVUR - Italian National Agency for the Evaluation of Universities and Research Institutes.

Main conclusions and recommendations

2022 ANVUR survey involved 90 public, private and telematic universities out of a total of 98. Accordingly with the results (year of reference 2019-2020):

- there are 36,816 students with disabilities or with SLD who were enrolled in courses offered by the Italian universities: 2% of total students;
- 71% are enrolled in three-year courses, 15% in master's courses and 11.6% in single-cycle master's courses. Among those who continue in postgraduate courses, 94 are enrolled in the doctorate;
- most of them are enrolled in social area courses (35.4%) and from the scientific area (30.1%), followed by those from humanities (22.9%) and from healthcare area (10%);
- the 11,385 new registered students also have substantially followed in the footsteps of those who preceded them in the choice of university courses.

But it is actually among new registered students that the signs of the most significant change appears: students with SLD now exceeded students with disabilities. Students with SLD are 60% of those enrolled in three-year courses and 51% in 5 years courses.

Beside the above mentioned statistics, what is really useful to consider is the result of the 2017 CENSIS survey that identified the following key elements for improvement:

Criticalities identified by students (PWD and SLD)

- Bureaucracy
- Architectural [and cultural] barriers
- Specialized staff shortage
- Mobility (to from the location)
- Access to materials
- Admin support
- Counselling/tutoring (initial, in progress and for placement purposes)

Criticalities identified by operators

- ✓ Legal - training on the interpretation and application of the legislation on disability and specific learning disabilities in the university and non-university fields.
- ✓ Relational - acquisition of techniques to manage the relationship with the user according to the different personal conditions of disability, (hearing, vision, or autism). Particular interest in managing relationships and emergencies with persons with mental fragility or with psychiatric pathologies.
- ✓ Technological - training on the use of devices and assistive technologies, according to the different conditions of disability. [The issue has been further strengthened by the COVID emergency.]

Reasons to choose a specific university (%)

- For the course of study that I have decided to undertake 74.2
- Because it's the one most easily accessible from my place of residence 34.9
- For its prestige 26.1
- Because it offers services not offered by other universities 18.1

Italian universities have some requirements to assure the quality of the services, but they are really generic. Accordingly with the Guideline dated 2014 issued by the National University Conference CNUDD “The assurance of the quality of services is a transversal process that concerns all university structures and is especially important when referring to services for students with disabilities or SLD. From this point of view, [Universities] must constantly monitor the effectiveness of the services offered, through detection mechanisms that include periodic individual or group interviews and data collection, also through the administration of ad hoc questionnaires, aimed both at students who use the services and to the various actors involved in the provision of the services themselves (tutors, teachers, other students, etc.).”

What is actually clearly required by the Guideline is to identify persons with specific responsibilities to ensure that the needs of PWD and SLD students are satisfied. In addition to that, the criticalities, originally identified by students and operators, became KPIs that are constantly monitored and centrally reported for benchmarking purposes.

Content relevant for the project

The above-mentioned studies suggest an effective approach to the improvement of the services:

- Start by identifying interested parties needs, expectation, requirements;
- Create a set of common KPIs and specific targets;
- Allocate the resources;
- Define the responsibilities, within the provider, for the achievement of the desired results;
- Monitor your progress;
- Share the information among the providers;
- Improve.

2. Improving the quality of school inclusion

Short overview of the scope of the study

The study has been developed by the working group 7 “Education” belonging to the National Observatory on the Condition of People With Disabilities through several meeting with interested parties at all level and by looking at the available statistics on the subject <https://www.osservatoriodisabilita.gov.it/media/1399/lavori-del-gdl-7-25-novembre-2021.pdf> . It refers to the Italian scenario.

Main conclusions and recommendations.

The major criticalities arising from the data have been analyzed and The Working Group.

5 Action to improve the inclusion have been identified:

1: Improve the quality of school inclusion and education of pupils and students with disabilities through the enhancement of skills of school staff, with interventions of a pedagogical-didactic nature on the initial and in-service training of teachers;

2: Combat exclusion and early school leaving guaranteeing didactic continuity, regulating the education service (at home, at school, in the hospital) carried out by teachers, promoting the centrality of sport in the training course of male and female pupils and access to university or tertiary education ;

3: integrate the personalized learning plan into the plus large life project of the pupil with disabilities, involving families in structured and substantial way, to improve the effectiveness of the training course making the best use of the resources available;

4: Identify indicators for the quality of inclusion, including the outcomes of the school curriculum in terms of social inclusion and workforce, for the quality of the training of school personnel, for the monitoring of the social expenditure of the municipalities and the Regions, as well as the tools for the involvement of students and / or their families. In Italy, a school self- evaluation report, covering several indicators, is already in place but it is not specifically addressing indicators for the inclusion <https://snv.pubblica.istruzione.it/snv-portale-web/>. New criteria for inclusion indicators have been identified by the ad-hoc entity <https://www.orizzontescuola.it/sostegno-valutazione-qualita-inclusione-ruolo-invalsi-losservatorio-compiti-e-composizione/>

5: adapt school buildings and complexes to the relative legislation the removal of architectural barriers, guarantee the reasonable accommodations.

Content relevant for the project

Relevant for the project is the idea to promote a long-life individual project and to enhance the teachers' competences (general and special teachers) with regards to inclusive learning. By looking at the Italian scenario, there are no specific requirements for a quality assurance system. The effectiveness of the services mainly relies on:

1. individual skills & commitment,
2. the method more than the system: inclusive learning.

With reference to point 1 it could be useful to analyse the studies carried out by the European Agency for Special Needs and Inclusive Education about the Teacher Professional Learning for Inclusion <https://www.european-agency.org/activities/TPL4/>. An idea arising from the above mentioned project could be do develop an “inclusion teacher” or “disability manager” certification scheme.

With reference to point 2 it could be useful to analyse the studies carried out by the European Agency for Special Needs and Inclusive Education about inclusive learning and inclusive assessment <https://www.european-agency.org/>.

From several studies, it looks like a new couple has born: quality + equality. It could turn in a new conceptual starting point...”equalilife”.

4. SWOT ANALYSYS

A. EFQM SWOT ANALYSIS

Carried out by ISEM.

By way of introduction, it is important to mention that, for the description of the following lines, the documents indicated below have been used to map the state of the art, and which also form part of a list of QUASAR project documents, highlighting the case study of the INTRAS Foundation as an example of good practice in the case of the EFQM.

NAME	DATE	LINK TO
1. EFQM MODEL BROCHURE	2021	https://efqm.org/
2. Anuario 2022 CEG	2022	https://anuarioceg.clubexcelencia.org/
3. Claves para la evaluación de Entidades del Tercer Sector con el Modelo EFQM 2020	2020	https://www.clubexcelencia.org/conocimiento/plataforma-de-conocimiento/documentacion-webinar-club-evaluadores-claves-para-la
4. Results in clients EFQM 2018	2018	https://www.intras.es/

The EFQM Model is the world's most recognised and widely used management framework that helps organisations to approach transformation from a management perspective, to achieve success and significantly improve their performance. It is thus a relevant and vital tool for managing an organisation that wants a long-term sustainable future. Its structure is based on the following simple logic:



Direction

- Criterion 1: Purpose, Vision & Strategy

- Criterion 2: Organisational Culture & Leadership

Execution

- Criterion 3: Engaging Stakeholders
- Criterion 4: Creating Sustainable Value
- Criterion 5: Driving Performance & Transformation

Results

- Criterion 6: Stakeholder Perceptions
- Criterion 7: Strategic & Operational Performance

It is therefore a useful model to address the transformation and improve the performance of all types of organisations, both public and private, from schools and universities to hospitals and foundations. Therefore, the EFQM Labels are useful for any organisation, which is why organisations of all sizes have opted for it.

International data on the EFQM model show that this recognition is present in more than 45 countries around the world, with Spain being the country with the highest number of EFQM certificates, in force: 359 in total, according to data provided by the Club Excelencia en Gestión in its 2022 yearbook. These figures are increasing every year and show the growing interest of Spanish entities in excellent, innovative and sustainable management. Madrid is the region with the highest number of EFQM certificates (120 seals), followed by the Canary Islands (58 certificates), Andalucía (38 certificates) and finally, with the same number of seals, are both Castilla y León and Catalonia with 28.

As mentioned above, it is a model that can be adapted to any type of sector such as education, health, industry, services, public administrations, etc.

In this sense, it is worth highlighting that third sector entities are the ones that have implemented this system the most, as despite the variety of these types of entities, they are all concerned with showing their transparency and improving their professionalism, with the ultimate aim of being more efficient and working more systematically in order to provide a better service to society. In this field, this essay shows a good practice carried out by the INTRAS Foundation, a non-profit organisation created in 1994 which, with a team of almost 600 professionals at present according to the data collected by the entity's 2022 report, accompanies people with mental health problems in the recovery of their life projects and which in 2019 achieved the EFQM +400 CERTIFICATE. This organisation opted for the EFQM model over the ISO standard because it is a model that NGOs can adapt to their distinctive features and because, in particular, this model gives decisive importance to the results in society, i.e., to the clients (people with mental health problems), both in the definition and in the management and planning of services.

Currently, the EFQM uses the guiding principles and the seven criteria mentioned above to focus on a specific theme, such as the SDGs, Innovation, Circular Economy or a specific sector, for example, Education.

The education sector is one of the major areas seeking continuous improvement through the EFQM Model and believes that having a certificate that endorses its excellent, innovative and sustainable management is a differential and critical factor in its success. This is why it is the most widely used model for managing excellence. In fact, its use is growing as the Criteria for Excellence involve all levels of the centre and allow a common vision of shared goals and objectives to be achieved. It is important to mention that there is the EFQM-Hamdan Educational Model which works in a simple way: it uses the same principles as the EFQM Model and adapts them specifically to the improvement of educational institutions. The use of this model provides the opportunity to analyse the school context (as the school should not be seen in a linear, mechanical and predictable way, but rather, it is better understood as a complex adaptive system made up of interdependent elements and individuals operating in a dynamic living world) while recognising the need for a systemic and organised intention. This is why working with the EFQM Model as a management framework in the education sector allows us to understand the reality of the school through self-assessment and to develop improvement plans and strategies. This, together with the involvement of all the people in the organisation in the self-evaluation process and decision-making, are considered factors that have an impact on improving the quality of the services offered to students, families and different interest groups.

SWOT analysis is a useful tool for evaluating the strengths, weaknesses, opportunities, and threats of a particular system or organization. When applying it to the EFQM (European Foundation for Quality Management) quality system in the vocational education and social services, the analysis could look as follows:

STRENGTHS	WEAKNESSES
<p>1. Established Framework: The EFQM quality system provides a well-established framework for evaluating and improving the quality of vocational education, training, and social services.</p> <p>2. Focus on Excellence: EFQM emphasizes a culture of excellence, encouraging organizations to strive for continuous improvement and high performance.</p>	<p>1. Complexity: Implementing the EFQM quality system may be challenging for organizations due to its complexity and the need for a comprehensive understanding of the framework.</p> <p>2. Resource Intensive: The system requires significant time, effort, and resources for successful implementation and maintenance, which may pose a challenge for smaller organizations with limited budgets. It also</p>

<p>3. Stakeholder Engagement: The system promotes stakeholder engagement, ensuring that the needs and expectations of students, trainers, service users, and other relevant stakeholders are considered.</p> <p>4. Best Practices Sharing: EFQM provides a platform for sharing best practices and learning from other organizations within the sector.</p> <p>5. Performance Measurement: The system encourages the use of performance indicators and measurement tools to assess the effectiveness and efficiency of processes and outcomes.</p> <p>6. Projects and calls: the EFQM gives extra points in tenders and different subsidies.</p> <p>7. Methodology: It has very precise indicators to measure the quality of activities.</p> <p>8. Globality: it is applicable and recognised for its popularity in many countries. Both in the case studies on EQUASS read in France and in Portugal, Spain's neighbouring countries, the EFQM model is still chosen because, for example, in France it is supported by the government.</p> <p>9. High stakeholder participation: the main advantage is that it is not based on a standard like other quality management systems, but is based on a self-assessment involving all stakeholders. It allows the model to be implemented without the need for an external consultant.</p>	<p>demands a significant amount of time in self-assessment.</p> <p>3. Resistance to Change: Some stakeholders within the vocational education, training, and social services sector may resist changes associated with implementing the EFQM system, leading to resistance and slow adoption</p> <p>4. EFQM does not focus on people's quality of life. It is more about quality philosophy and organisational methodology.</p> <p>5. Economic costs: the costs associated with obtaining or maintaining certification are high.</p> <p>6. Lack of accredited entities for assessment: the Club Excelencia en Gestión is the only accredited entity in Spain https://www.clubexcelencia.org/</p>
OPPORTUNITIES	THREATS
<p>1. Enhanced Quality Culture: EFQM provides an opportunity to foster a culture of quality and continuous improvement within organizations, leading to better vocational education, training, and social services.</p> <p>2. Collaboration and Networking: The system facilitates collaboration and</p>	<p>1. Competing systems: There may be other quality management systems or accreditation frameworks available in the sector, which can lead to competition and confusion among organisations about which system to adopt, such as the emergence of models like EQUASS, which are more based on the quality of life of users.</p>

networking among organizations in the sector, allowing for the exchange of ideas, knowledge, and best practices.

3. Recognition and Accreditation: Successful implementation of the EFQM quality system can lead to recognition and accreditation, enhancing the reputation and credibility of organizations in the sector. It is recognised worldwide and by regional governments.

4. Implementation: Extensive experience of organisations and professionals evaluating the EFQM model.

5. Experience: There are many experiences of this model throughout Spain.

6. Legislation: It recognises European values in the

- The Charter of Fundamental Rights of the European Union.

- The Charter of Fundamental Rights of the European Union.

- The European Convention on Human Rights.

- The European Union Directive 2000/78/EC.

- The European Social Charter.

7. International context, the EFQM also recognises:

- The United Nations Global Compact (year 2000).

- The 17 United Nations Sustainable Development Goals (SDGs).

2. Changes in the regulatory landscape: Changes in regulations and policies in the vocational education, training and social services sector may force organisations to adapt their quality systems to meet new requirements, which may pose additional challenges and costs.

3. External factors: Economic fluctuations, political changes or social trends may have an impact on funding and resource allocation, potentially affecting the implementation and sustainability of the EFQM quality system.

B. EQUASS SWOT ANALYSIS

Carried out by EPR

SWOT analysis is a useful tool for evaluating the strengths, weaknesses, opportunities, and threats of a particular system or organization. When applying it to the EQUASS (European Quality in Social Services) quality system in the Social Sector and the Vocational Education and Training (VET) sector, the analysis could look as follows:

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> • Social sector specific; clear relevance for the social sector - USP; rights, ethics, participation • Used in many different social services and VET providers <p>EQUASS is more demanding, but it is tailor-made to service providers like us – a quote from a service provider using EQUASS</p> <ul style="list-style-type: none"> • Proven impact / added value for customers <p>Impact on Social Services (Study 2022 of the impact of implementing EQUASS in Lithuania): This implementation of quality aspects via the EQUASS quality system has changed the organisation of the work within the social service providers in a significant and positive way, and is recognised</p> <p>The described changes are completely in line with the needs of the service users</p> <ul style="list-style-type: none"> • Core loyal customer base • Person-centred • Can be seen as EFQM/ISO+ - with the addition of rights etc. • Affordable for medium sized organisations in general • Focused on results – principle 9 Result Orientation: Social Service Providers aim to achieve planned results, benefits and best value for Person Served and relevant 	<ul style="list-style-type: none"> • Decreased involvement of external stakeholders – only two members of Awarding Committee • Not well known outside of key markets • Lack of self-assessment accessible to service providers without consulting • Expensive for small organisations (but not compared to other systems?) • Lack of sustainability beyond project funding in many markets/under investment in social sector • Some auditors criticise audit processes as too bureaucratic • The link between the Assurance and Excellence levels of certification connection is not very fluid, the processes are separate³ • Outcome-oriented could be a quality principle; results not specific to service delivery • Quality of life <p>Is only addressed in one criteria and 2 indicators; is not a high priority for the system, could be a separate principle.</p> <p>Out of key QoL domains, does not address: personal development, interpersonal relations, material well-being, emotional well-being (EASPD study)</p> <p>Quality assurance has been moving away from structural and process standards oriented inspection to outcome-oriented performance</p>

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./needing to show outcome measurement

- Focus on continuous improvement (recommendations are given in audit & progress report, Progress report encourages further development).

- Innovation Principle 9; Innovation: Social Service Providers are committed to continuous learning and innovation. Criteria 3: The Social Service Provider demonstrates its commitment to long-term quality goals, continuous learning, innovation and new technology.

Impact on Social Services (Study 2022) - Significant positive changes in: Business efficiency, Innovation

- Rights addressed as separate principle

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.

The UNCRPD is clearly set as the context for EQUASS. As regards rights, pp17-25 of the principles criteria and indicators

For example, Principle 3 Rights, criteria 13 (p17) The Social Service Provider guarantees

measurement, based on indicators with a focus on the beneficiary's quality of life (Malley et al., 2016)

- Rights

Better: Rights-based?

Needs more guarantee of assuring rights are met when an organisation is certified?

Doesn't relate directly to CRPD rights that are cross-sectoral

EQUASS can be used in any setting/social service, so a residential setting can be certified if it passes the audit and its requirements. Should there be a requirement for an organisation to commit to moving to community-based services when within its remit?

the rights of Person Served and these rights are outlined in a Charter of Rights that is based on international human rights conventions.

8. Comprehensiveness: Social Service Providers ensure that the Person Served has access to a continuum of holistic and community-based services

“It is important for us to work for the UN Convention on the Rights of Persons with Disabilities; EQUASS makes sure of that. I recommend EQUASS because it is a fun, tangible way of working for the staff. Staff is also very proud of their work, and the certification boosted them even more” (quote from a service provider in Sweden)

Impact on Social Services (Study 2022): Significant positive changes in Rights

- Quality of life (criteria 32, principle person-centred approach)

The Social Service Provider has a clear concept of Quality of Life for Person Served and implements activities, which are based on a needs assessment of the Person Served, with the aim of improving their Quality of Life.

Indicator 50. The social service provider has defined and implemented the concept of Quality of Life for persons served. (Documentation of defined the concept of Quality of Life is required)

51 The Social Service Provider has tangible results of the activities that improve the quality of life of person served. (Documentation of results on improving the Quality of Life of Person Served is required)

Out of key QoL domains, addresses: rights, social inclusion, self-determination, physical well-being

OPPORTUNITIES

THREATS

- Expansion into other sectors; social enterprise, mainstream VET;

Increased promotion in certain sectors with big potential, such as care for older people

- New services
 - o Training
 - o Access to tools
 - o Personal certification - quality professional
 - o Create an EQUASS community of clients & restarting benchmarking
- Linking EQUASS & ISO audits
- Show how EQUASS helps effectiveness /efficiency
- Increased interest among policy makers at EU level about quality
- New/returning experts could bring in new insights and improvements
- AJA Europe partnership
- ESF/development funding to develop EQUASS at national level
- Markets where weak / no national quality certification
- Expansion in some existing markets
- Interest from outside Europe (Georgia, Middle East, India)
- Quality of Life

Opportunity to link to QOLIVET project tool QIAT; if the system requires a service provider to implement a tool to measure quality of life and implements actions to address results of measurement

- Increasing number of governmental standards and required certification making EQUASS less attractive

- Certification alternatives - self-assessment tools

- Increased focus on outcome measurement/user involvement in quality assessment

- Better-known international certifications make market development in some cases and market penetration challenging

- Lack of financial resources in interested/former customers in some countries to recertify

Loss of customers due to lack of action of EQUASS

C. NEW DIRECTIONS SWOT ANALYSIS

Carried out by The Rehab Group.

Over the last number of years, the Irish Health & Social Care sector have undertaken a large transformation project to transform the delivery of day services for adults with disabilities. The overall aim of the project is ensure services provide the highest quality service to each person, based on their unique needs. In order to provide a context for the delivery of services, Irelands, Health Service Executive developed quality standards, 'New Directions' to support all stakeholders ensure the delivery of quality services. The new standards set out twelve pillars of support that form the basis for the delivery of quality community based social services.

The standards recommends that 'day services' ensure the practice of individualised outcome-focussed supports to allow adults using services to live a life of their choosing in accordance with their own wishes, needs and aspirations.

All state funded adult day services for people aged 18 and over, with intellectual disabilities, autism, or people with complex physical disabilities are required to meet the standards. The objective of the standard is to empower the person to make choices and plans and to be an active, independent member of their community.

The New Directions standard require service providers and key stakeholders to involve people with disabilities in the design, delivery, monitoring and evaluation of the services and supports provided. The Standards aim to be a catalyst for community inclusion and self-determination in the lives of people with disabilities.

While the standards provide guidance on quality service delivery, it does not currently offer accreditation that is transferable to other countries. However, these evidence-based standards would be a useful reference in terms of the development of quality standards for social services.

STRENGTHS	WEAKNESSES
<ul style="list-style-type: none"> • Uniform quality within Irish context • National policy – quality standard can be implemented across public & private organisations • Benchmark for quality of services • Better model for cross referral to different services (education, social services) • Strong focus on individual needs • Strong focus on choices in line with CRPD • Strong focus on individuals participation in developing own service 	<ul style="list-style-type: none"> • Overarching statement rather than targeted questions • Self – evaluation & action plan (open to interpretation) • No external monitoring • Time intensive work • Funding • Danger of tokenism, skills building required • No accreditation available (not transferable in Europe)

<ul style="list-style-type: none"> • Contributing to greater inclusion & integration • Inclusion of person in the planning & delivery of services 	
<p style="text-align: center;">OPPORTUNITIES</p>	<p style="text-align: center;">THREATS</p>
<ul style="list-style-type: none"> • Modernise traditional service delivery • Enhance the profile of people with disabilities in society • Enhanced participation in communities • Individualised supports 	<ul style="list-style-type: none"> • High level of funding required to implement true quality services • Realignment of existing work force • Lack of opportunities in communities • Traditional funding streams & annualised • Traditional staffing structures • Lack of good integrated ICT & recording systems • Change from traditional 9-5 to more flexible approach

D. ISO 9001 SWOT ANALYSIS

Carried out by AJA Europe.

ISO 9001:2015 Quality management systems is a standard that sets out the criteria for a quality management system (QMS). A QMS can be certified by a Conformity Assessment Body (although this is not a requirement). It can be used by any organization, large or small, regardless of its field of activity. In fact, there are over one million companies and organizations in over 170 countries certified to ISO 9001.

The standard is based on 7 quality management principles:

- 1 – Customer focus
- 2 – Leadership
- 3 – Engagement of people
- 4 – Process approach
- 5 – Improvement
- 6 – Evidence-based decision making
- 7 – Relationship management

In addition, the current version of the standard is forcing the organizations to address risks and opportunities.

Using ISO 9001 helps ensure that customers get consistent, good-quality products and services, which in turn brings many business benefits.

Additional info:

<https://www.iso.org/files/live/sites/isoorg/files/store/en/PUB100373.pdf>

Standard preview: <https://www.iso.org/obp/ui/#iso:std:iso:9001:ed-5:v1:en>

SWOT Analysis as follows:

STRENGTHS	WEAKNESSES
<p>1. Widespread. 1.077.884 certificates all over the world (31/12/2021 https://www.iso.org/the-iso-survey.html) of which 11.751 in the Training/Education sector (EAC 37).</p> <p>2. Well known.</p>	<p>1. Not specific for VET providers. It is a set of requirements for any type of organization, despite sector and dimension.</p> <p>2. Not exactly based on rights and quality of life.</p>

<p>There is a huge number of professionals and organizations providing 9001 training, consultancy, audit and certification.</p> <p>3. Required.</p> <p>In some countries, being 9001 certified is mandatory in order to participate in public tenders.</p> <p>4. Functional.</p> <p>Could be functional for receiving funds, being nationally recognized or in order to be an approved supplier.</p> <p>5. Integrable.</p> <p>Can be integrated with other management systems especially with other ISO management system (MS) in that all of the ISO MS standards have the same harmonised structure.</p>	<p>It generically sets requirements for addressing Interested parties' requirements, needs, expectations.</p> <p>3. Improvement process strictly regulated.</p> <p>There are very strict rules, set by ISO, so that any improvement will be very demanding and will take a lot of time.</p>
<p align="center">OPPORTUNITIES</p>	<p align="center">THREATS</p>
<p>1. "The one and only".</p> <p>VET providers could prefer to allocate resources just in 9001 more than investing additional resources to implement a sector-specific standard.</p>	<p>1. Market loss.</p> <p>More specific standards could be developed based on 9001 and, using 9001 as a trojan horse, they could replace 9001.</p>

5. RANKING AND EXPLANATION

A. EFQM RANKING

Carried out by ISEM.

1. Does the standard address whether the service provider measures how it improves quality of life?

Score: 1 - Not at all.

Explanation: In the EFQM model, quality of life is neither mentioned nor applied in reference to the improvement of the quality of life of users and their environment.

2. Does it meet the standard if the service provider respects and promotes the rights of users?

Score: 3 - Promoted.

Explanation: It is a model that focuses on people through stakeholders. EFQM works with its key stakeholders to develop a common understanding and focus on how, through joint development, it can contribute to and draw inspiration from the UN SDGs and the aspirations of the UN Global Compact.

So, taking into account that the third sector and the education sector are two of the major areas seeking continuous improvement through the EFQM Model, the rights of users are indeed promoted and respected.

The EFQM, as the studies collected show, focuses:

- Firstly, on the development and well-being of people.
- Secondly, on the strategy/objectives to be achieved with their people.
- Finally, on the recognition and care of them.

3. Does the standard take into account international rights documents?

Score: 3 - Promoted.

Explanation: The EFQM model is a globally recognised framework. It is therefore assumed and expected that any organisation using the EFQM Model respects and complies with the European values set out in the following provisions:

- The Charter of Fundamental Rights of the European Union
- The Charter of Fundamental Rights of the European Union.
- The European Convention on Human Rights.

- The European Union Directive 2000/78/EC.
- The European Social Charter.

Similarly, EFQM recognises and supports:

- The United Nations Global Compact (year 2000), which includes ten principles for socially responsible and sustainable business activities (www.pactmundial.org).
- The 17 SDGs, which are a call for countries and their organisations to act and promote social equality, good governance and prosperity, while protecting the planet.

4. Does the standard address whether the provider protects the client/student from abuse and risk of avoidable harm?

Score: 2- Mentioned.

Explanation: Risk analysis and risk treatment is raised as a challenge in the third sector document and is therefore taken into account.

5. Does the standard address ethical behaviour of staff/staff?

Score: 4 - Mandatory.

Explanation: EFQM is based on the participation of all members of the organisation, taking into account ethical and social aspects. People are the main drivers in this change towards achieving the best possible results.

In addition, between 2018 and 2019, the EFQM model underwent an internal improvement process to identify which improvements needed to be implemented. Emphasis was placed on two ideas relating to staff:

- The importance of letting go of individualism and the value of working together.
- The importance of recognising the richness of the diversity of the people you employ. This means aligning with the values of each person.

6. Does the standard address staff/staff competencies?

Score: 2 - Mentioned.

Explanation: Criterion 1: Purpose, vision, strategy has as a sub-criterion point 1.3 based on understanding the ecosystem, own capabilities and important challenges. Competence and capacity do not refer to the same term, however, they are related to each other because if the competences of the stakeholders are analysed, the capacities of the professional team can be analysed.

7. Does the standard address staff/staff supervision and support?

Score: 2 - Mentioned.

Explanation: The EFQM model does not directly address staff supervision and support, but only provides a generic structure and criteria for assessing and improving key aspects of an organisation, including staff management, as mentioned above. By taking a holistic approach and focusing on business excellence, the EFQM model can help to foster a working environment in which staff supervision and support are central to achieving quality and excellence objectives, with the organisation itself having to set these objectives.

8. Does the standard address whether the provider is oriented to the needs of the service users/pupils?

Score: 4 - Mandatory

Explanation: Criterion 1: Purpose, vision, strategy has as sub-criterion 1.2 the identification and understanding of stakeholder needs. Criterion 3: Stakeholder engagement uses the understanding of stakeholder needs and expectations to achieve continuous engagement. In addition, Criterion 6: stakeholder perception, focuses on results based on feedback from key stakeholders on their personal experiences and perceptions obtained from different sources (meetings, surveys, press, social media, reports...).

In short, EFQM recognises that stakeholders' needs may change over time and therefore it is important to collect and analyse feedback, experiences, perceptions... in order to improve and change your products, services or solutions.

9. Does the standard support the promotion of continuous improvement?

Score: 4 – Mandatory

Explanation: Since the EFQM model was born, it has been characterised as an instrument of reference and continuous improvement for all organisations to develop a culture of improvement and innovation, i.e. it is part of the nature of the EFQM to be better day by day.

10. Does the standard address whether the service provider collaborates with service users in the planning, delivery and review of services?

Score: 3 – promoted.

Explanation: EFQM is based on seven key criteria covering different aspects of an organisation's management. One of these criteria is "Partnerships and Resources", which refers to how the organisation collaborates with its stakeholders and clients/users to achieve mutually beneficial outcomes. Within this criterion, active and effective collaboration with all of them is valued in order to understand their needs and expectations and to satisfy them in an optimal way.

11. Does the standard support whether the service provider supports the decision-making and choices of users/learners?

Score: 1 – Not at all.

Explanation: Does not directly address whether the service provider supports the decision-making and choices of clients and/or learners.

12. Does the standard address whether the service provider has processes in place to ensure that service delivery is effective?

Score: 1 - Not at all.

Explanation: It does not mention whether the service provider has processes in place to ensure that service delivery is effective.

13. Does the standard address partnership/collaboration with other stakeholders?

Score: 4 - Mandatory

Explanation: In Criterion 3: Engage stakeholders, sub-criterion 3.1. focuses on building sustainable relationships.

EFQM encourages the development of partnerships as work is more effective when relationships based on trust and mutual benefit are shared. In addition, participation in networks and platforms is important to identify opportunities for creativity and innovation (EFQM basic premises).

14. Does it support the standard if the provider applies a rights-based approach?

Score: 1 - Not at all.

Explanation: EFQM is not operationally aimed at promoting and protecting human rights.

15. Does the standard address the involvement of the client's environment? E.g. social network, family, etc.

Score: 4 - Mandatory

Explanation: Part of the implementation of EFQM as explained above is to involve stakeholders. For example, in the education sector it is essential to create sustainable relationships with the students' families. It is also essential to attract, engage, develop and retain staff talent (teaching and non-teaching). In addition, the development, well-being and prosperity of society is also promoted as the latter is also a stakeholder. Therefore, the environment is taken into account. Similarly, the results block takes into account the perception of these groups. In the case of education, the perception of: students, parents, teaching and non-teaching staff, the community, etc. is important.

16. Does the standard support legal implementation/compliance with safety standards/requirements?

Score: 1 – Not at all.

Explanation: Not mentioned.

17. Does the standard address whether the service provider has an internal quality management system?

Score: 4 - Mandatory.

Explanation: EFQM measures where an organisation is on the road to transformation. It then assesses whether or not the organisation already has a quality management system in place.

18. Does it support the standard if the supplier follows its strategic plan?

Score: 4 - Mandatory

Explanation: The fundamental thread of the EFQM Model shows the logical connection between an organisation's purpose and strategy to generate outstanding results. Criterion 1: Purpose, vision, strategy maintains as sub-criterion 1.4 the development of strategy. The latter:

- Describes how it intends to fulfil its purpose.
- It details the plans for achieving the strategic priorities and approaching the organisation's vision.

In addition, the Execution block focuses on developing the strategy effectively and efficiently, i.e. what the organisation does to prepare for the future.

19. Does it support the standard if the supplier works towards its mission and vision?

Score: 4 - Mandatory

Explanation: An outstanding organisation is characterised by: an inspiring purpose, an ambitious vision and a strategy that generates results. Criterion 1: Purpose, vision, strategy encompasses this question and in a way sub-criterion 1.1 is intended to define purpose and vision. In this sense, the vision of the organisation:

- Describes what it is trying to achieve in the long term.
- Serves as a clear guide for choosing current and future courses of action.
- Together with the purpose, it provides the basis for defining the strategy.

20. Does the standard support: the promotion of innovation?

Score: 4 – Mandatory

Explanation: Continuous improvement and innovation are key aspects that make up the EFQM model. Criterion 2: Organisational culture and leadership and its sub-criterion 2.3. focus on how to enable creativity and innovation. Similarly, Criterion 5: Managing performance and transformation, in its sub-criterion 5.3. addresses the promotion of innovation and technology.

This system aims to answer these two questions: What has it achieved so far? And what does it want to achieve in the future? In short, the EFQM is ultimately about creating an innovative, quality-based culture of its own.

21. Does the standard address international best practice in the VET and care sector?

Score: 2 - mentioned.

Explanation: EFQM is flexible and adapts to any type of organisation, size, sector, activity, complexity, reality and geography... so there are indeed success stories in education, health, third sector... etc.

22. Does the standard address efficiency?

Score: 2 - Mentioned.

Explanation: Feedback regarding effectiveness and efficiency in the steering and implementation blocks is collected, understood and shared.

23. Is the level of quality affordable?

The costs related to obtaining or maintaining it are high. Small organisations may not have a large budget for quality issues even though the EFQM model can be adapted to their needs.

24. Is the quality standard financially sustainable for the service provider to continue to implement it?

Financial sustainability over time is complicated by high maintenance costs.

On the other hand, other aspects of environmental and social sustainability are covered in the 2020 model. For example, Criterion 4. Creating sustainable value is rated at 200 points, twice as high as the other performance and management criteria, reflecting the relevance of sustainability not only in terms of economics.

25. Does the quality standard bring external benefits to the supplier (ex. points for participation in tenders)?

EFQM gives extra points in tenders and different subsidies. It is a model recognised in the case of Spain by the Autonomous Communities, unlike other quality models.

26. Is there a self-assessment tool?

The EFQM model is a model based on self-assessment. An organisation can carry out the self-assessment process with or without external support, although the coordination of the self-assessment should be carried out by someone with experience in the model.

The self-assessment is based on a detailed analysis of the organisation's management performance using the model's criteria as a guide. It should be noted that the new version is from the year 2020 and is structured into: 3 blocks; 7 criteria; 23 sub-criteria and 3 integrated REDER matrices, unlike what had been done until the last model in 2013.

The EFQM is a non-regulatory model and therefore is not based on a standard like the rest of the quality management systems, but is based on self-assessment in which all stakeholders participate.

B. EQUASS RANKING

Carried out by EPR.

1. Does the standard address whether the service provider measures how it improves quality of life?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 7 - 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.”*

Criteria 32: The Social Service Provider has a clear concept of Quality of Life for Person Served and implements activities, which are based on a needs assessment of the Person Served, with the aim of improving their Quality of Life.

Indicator 50: *“The Social Service Provider has defined and implemented the concept of Quality of Life for Person Served. (Documentation of a defined concept of Quality of Life is required)”*.

Indicator 51: *The Social Service Provider has tangible results of the activities that improve the quality of life of person served. (Documentation of results on improving the Quality of Life of Person Served is required)”* – this means that QoL must be measured (but this could be more explicit).

2. Does the standard address if the service provider respects and promotes the rights of users?

Score: 4 - Mandatory.

Explanation: Rights addressed as separate principle – 3. *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.*

The UNCRPD is clearly set as the context for EQUASS. As regards rights, pp17-25 of the principles criteria and indicators

For example, Principle 3 Rights, *criteria 13 (p17) The Social Service Provider guarantees the rights of Person Served and these rights are outlined in a Charter of Rights that is based on international human rights conventions.*

3. Does the standard take into account international rights documents?

Score: 3 - Promoted.

Explanation: EQUASS Principle 3 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.”*

Criteria 13: *“The Social Service Provider guarantees the rights of Person Served and these rights are outlined in a Charter of Rights that is based on international human rights conventions”.*

Indicator 21: *“The Social Service Provider has implemented a Charter of Rights for Person Served based on international human rights conventions. (Documentation of Charter of Rights for Person Served is required)*

Indicator 22: *“Staff are aware about the rights of Person Served and demonstrate respecting the rights of Person Served.”*

Note: Maybe will need to be addressed more strongly in the future (only that often its not up to the service provider to choose the services to provide but the decision makers)

4. Does the standard address whether the provider protects the client/student from abuse and risk of avoidable harm?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 4 – 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”*

Criteria 22: *“The Social Service Provider operates mechanisms that prevent the physical, mental and financial abuse of Person Served”.*

Indicator 35: *“The Social Service Provider has implemented procedures that prevent the physical, mental and financial abuse of Person Served. (Documentation on procedures that prevent the physical, mental and financial abuse, is required)*

Additional EQUASS Excellence requirement: *“The Social Service Provider has Results on protecting the Person Served from abuse and misconduct. (Documentation of Results on protecting the Person Served from abuse and misconduct is required)*

5. Does the standard address ethical behaviour of staff/staff?

Score: 4 - Mandatory.

Explanation: Principle 4 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.*

Criteria 18: *The Social Service Provider promotes ethical behaviour and wellbeing for Staff, Person Served and their families or caregivers. Indicator 29. Staff, Person Served and their families or caregivers demonstrate how they act according to the organisation's policy on ethics and wellbeing for all*

6. Does the standard address staff/staff competencies?

Score: 4 - Mandatory.

Explanation: Criteria 7: *“The Social Service Provider defines and implements a Staff recruitment and retention policy that promotes the selection of qualified Staff based on required knowledge, skills and competences”*

7. Does the standard address staff/staff supervision and support?

Score: 2 - Mentioned.

Principle 7 Staff: Criteria 9 *The Social Service Provider implements measures for Staff development based on a plan for personal growth, continuous learning and development. INDICATOR 15 The Social Service Provider reviews their Development Plan with the Staff on regular basis.*

Criteria 10 *The Social Service Provider defines and implements requirements for competence in the identified roles and functions of Staff and evaluates them on an annual basis. Indicator 18. The Social Service Provider has evaluated competence requirements, roles and responsibilities of Staff on an annual basis.*

Criteria 12 *The Social Service Provider operates specific measures that enhance the motivation of Staff.*

These words are not specifically addressed in EQUASS.

8. Does the standard address whether the provider is oriented to the needs of the service users/pupils?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 7 – *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.*”

Criteria 31: *“The Social Service Provider delivers services that are responsive to individual choices, needs and abilities of the Person Served and that are in line with the organisation's mission, vision and values”.*

Indicator 48: *“The Social Service Provider supports Person Served to express their needs, expectations and choices.”*

Indicator 49: *“The Social Service Provider delivers services based on the needs and expectations of the Person Served.”*

9. Does the standard support the promotion of continuous improvement?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 9 – *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.*”

Note: The principle mentions continuous improvement but the criteria and indicators to follow do not. Whereas the next principle is...

EQUASS Principle 10 – *Continuous Improvement: “Social Service Providers are committed to continuous learning 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”*

Criteria 48: *“The Social Service Provider defines and implements a system of continuous improvement of the results of services, the ways of working and learning.”*

Indicator 73: *“The Social Service Provider has implemented a system of continuous improvement and learning. (Documentation on the system of continuous improvement and learning, is required)”*

Additional EQUASS Excellence requirement: “Q. *The Social Service Provider has tangible results of improving services.* (Documentation on tangible Results of improving Services, is required)”

Additional EQUASS Excellence requirement: “R. *The Social Service Provider has tangible improved results.* (Documentation on tangible improved Results, is required)”

Indicator 74: “*The Social Service Provider demonstrates that it uses information about the future needs of Person Served and Stakeholders to develop and improve its services.*”

10. Does the standard address whether the service provider collaborates with service users in the planning, delivery and review of services?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 7 – *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*

However, it doesn't use the concept of co-production or contribution of equal value.

11. Does the standard support whether the service provider supports the decision-making and choices of users/learners?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 3 – *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.*

Criteria 15: *The Social Service Provider respects that Person Served freely pursue personal goals and aspirations in line with their choices, needs and abilities.*

It doesn't use the concept of co-production or contribution of equal value though.

12. Does the standard address whether the service provider has processes in place to ensure that service delivery is effective?

Score: 4 - Mandatory.

Explanation: Criteria 40 *The Social Service Provider delivers services to the Person Served in a coordinated way.*

Criteria 41 *The Social Service provider delivers services to the Person Served in a Multi-Disciplinary or Multi-Agency setting.*

Principle 9. 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.* Criteria 42 *The Social Service Provider identifies its Business and Service results and has formal periodic and independent reviews.*

Additional EQUASS Excellence requirement: *The Social Service Provider has tangible organisational results.*

13. Does the standard address partnership/collaboration with other stakeholders?

Score: 4 - Mandatory.

Explanation: EQUASS Principle 5 – 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.*

Criteria 24: *The Social Service Provider works in partnership with relevant Stakeholders to ensure a continuum of comprehensive services and inclusion of Persons Served.*

Indicator 38: *The Social Service Provider demonstrates the use of partnerships ensuring a continuum of comprehensive services and inclusion of Person Served.*

Criteria 25: *The Social Service Provider evaluates the results and benefits of its partnership for the Person Served and for the organisation.*

Indicator 39: *The Social Service Provider has relevant tangible results and benefits of its partnership for Person Served and for the organisation.* (Document of results and benefits of its partnership is required).

14. Does the standard ensure the provider applies a rights-based approach?

Score: 3 - Promoted.

Explanation: See section on rights

No explicit reference to rights-based approach as such.

15. Does the standard address the involvement of the client's environment? E.g. social network, family, etc.

Score: 4 - Mandatory.

Explanation:

EQUASS Criteria 34: *The Social Service Provider takes the physical and social environment of the person served into account when developing, delivering and evaluating the services provided to the person served.*

Indicator 54: *The Social Service Provider delivers services that address the physical and social needs of the Person Served.*

EQUASS Criteria 37: *The Social Service Provider operates services from a holistic approach based on the needs and expectations of the Person Served, family or care givers.*

Indicator 59: *Services are based on the holistic assessment of needs and expectations of Person Served, family and caregivers that takes the Person Served's life situation and environment into account.*

16. Does the standard support legal implementation/compliance with safety standards/requirements?

Score: 3 - Promoted.

Explanation:

EQUASS Criteria 8: *The Social Service Provider operates its service in compliance with mandatory national legislation for health and safety, providing appropriate working conditions, adequate and agreed Staff levels and Staff ratios, and measures for rewarding Staff and volunteers.*

Indicator 12: *The Social Service Provider shows compliance with national legislation requirements for health and safety, appropriate working conditions, adequate and agreed staff levels and ratios.*

Could be addressed in more detail

17. Does the standard address whether the service provider has an internal quality management system?

Score: 3 - Promoted.

Explanation: Principle 1. Leadership: Criteria 2: *The Social Service Provider defines and implements a system for management that promotes a Quality Culture.*

Quality culture and quality goals but a quality system not specifically mentioned (though processes need to be defined & mission, vision, values, annual planning, outcomes, continuous improvement etc are).

18. Does the standard address whether the supplier follows its strategic plan?

Score: 4 - Mandatory.

Explanation: EQUASS Criteria 4: *The Social Service Provider defines and implements an annual planning and review process reflecting the organisations objectives and service activities delivered.*

Indicator 6: *The Social Service Provider has implemented annual planning. (Documentation of Annual Plan is required).*

Indicator 7: *The Social Service Provider carries out a review on objectives and services results described in the Annual Plan.*

19. Does it support the standard if the supplier works towards its mission and vision?

Score: 4 - Mandatory.

Explanation: EQUASS Criteria 1: *The Social Service Provider defines and implements its Vision, its Mission and corporate Values in the delivered services by establishing ambitious organisation and service goals.*

Indicator 1: *The Social Service Provider has implemented the organisation's Mission, Vision and Values (Documentation of Mission, Vision and Values is required).*

Indicator 2: *Staff demonstrate their contribution to the implementation of organisation's Mission, Vision and Values.*

20. Does the standard support: the promotion of innovation?

Score: 3 - Promoted.

Explanation: EQUASS Criteria 3: *The Social Service Provider demonstrates its commitment to long term quality goals, continuous learning, innovation and new technology.*

Indicator 5: *Social Service Provider has defined long term quality goals and demonstrates measures for continuous learning, innovation and new technology.*

21. Does the standard address international best practice in the VET and care sector?

Score: 2 - Mentioned.

Explanation: EQUASS Principle 1: *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.*

Mentioned in principle 1 but not referred to in a criterion.

22. Does the standard address efficiency?

Score: 2 - Mentioned.

Explanation: Principle 9. *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.* Note: Efficiency not explicitly mentioned, but related issues are. Results of evaluating the performance are required in the Excellence certification level.

23. Is the level of quality affordable?

Score: 3 -

Depends on the organisation's size and context.

Comment: For many it is not, even if it is comparable or cheaper than other options. One issue is that no funding is available for this extra cost – but this is an issue for all systems

24. Is the quality standard financially sustainable for the service provider to continue to implement it?

3 years validity. It depends on how advanced the organisation is in order to maintain the systems and documentation, and the costs of other systems in that country.

25. Does the quality standard bring external benefits to the supplier (ex. points for participation in tenders)?

Explanation: Only in Norway in Vocational Rehabilitation - choice between ISO & EQUASS

26. Is there a self-assessment tool?

Score: 2

Explanation: Only consultants get direct access to a self-evaluation tool

C. NEW DIRECTIONS RANKING

Carried out by The Rehab Group.

1. Does the standard address whether the service provider measures how it improves quality of life?

Score: 2 - Somewhat

Explanation: New directions promotes the concepts of quality of life but does not ask for a specific measure.

2. Does it meet the standard if the service provider respects and promotes the rights of users?

Score: 4 - Mandatory

Explanation: New Directions ensures that service providers include people who use the services / students in the planning and review of services. Through many of the thematic areas service providers are required to demonstrate the means by which people who use the services / learners are consulted. Service provide must be able to produce evidence of this.

3. Does the standard take into account international rights documents?

Score: 3 - Promoted.

The underlying principles of the UNCRPD are reflected in the thematic areas of New Directions, including the right to assessment of need and the right to an individualised safe services and supports to meet these needs. New Directions identifies the rights of people who use the service / learners to access independent advocacy services and make complaints. Ireland ratified the UNCRPD in 2018.

4. Does the standard address whether the provider protects the client/student from abuse and risk of avoidable harm?

Score: 4 - Mandatory

Explanation: New Directions requires that all staff are trained to protects services and students from risk of abuse and be aware of their responsibilities should they have any concerns. This standard to national policy on the Safeguarding of vulnerable adults and services funded by the national health system are required to follow this.

5. Does the standard address ethical behaviour of staff/staff?

Score: 4 - Mandatory.

Explanation: Standard 4 of New Directions relate to having a responsive workforce. It requires service providers to ensure that they have appropriate numbers suitably qualified staff to provide supports based on the assessed needs of the clients / students.

6. Does the standard address staff/staff competencies?

Score: 4 - Mandatory

Explanation: The standard does not specify the exact qualifications required, but does direct service providers to ensure staff employed have the competencies required to meet the needs of people who use the services. Requires safe recruitment practices.

7. Does the standard address staff/staff supervision and support?

Score: 4 - Mandatory

Explanation: The standard that staff are supported and supervised to carry out their duties.

8. Does the standard address whether the provider is oriented to the needs of the people who use the services/pupils?

Score: 4 - Mandatory

Under effective services and supports standard service providers are required demonstrate that each people who use the service receives services and supports that are responsive to their needs and included in the design of their services.

9. Does the standard support the promotion of continuous improvement?

Score: 4 – Mandatory

The self-assessment process is an integral part of New Directions and it is designed to drive continuous improvement and modernise service delivery.

10. Does the standard address whether the service provider collaborates with people who use the services in the planning, delivery and review of services?

Score: 4 – Mandatory

Explanation: The standard requires that service providers demonstrate that people who use the services are meaningfully involved in the planning, design, delivery, monitoring and evaluation of services and supports.

11. Does the standard support whether the service provider supports the decision-making and choices of users/learners?

Score: 4 - Mandatory

Explanation: The standards required that the service provider ensure each person has access to information that supports them to make informed plans and choices in a format that is accessible to their communication needs.

12. Does the standard address whether the service provider has processes in place to ensure that service delivery is effective?

Score: 4 Mandatory

Explanation: The standard requires that evaluation processes and service design are put in place to ensure that service is effective. Providers are required to do regular reviews to identify area for improvement which include feedback from all relevant stakeholders and action is taken to bring about improvement.

13. Does the standard address partnership/collaboration with other stakeholders?

Score: 3 - Promoted

Explanation: New Directions requires that service providers work with people who use the services, their families, funders and local communities in order to ensure community responsive service delivery.

14. Does it support the standard if the provider applies a rights-based approach?

Score: 4 - Mandatory Explanation: The standard requires that providers adopt a rights-based approach, the right of each person to make their own decisions is promoted and the right to access advocacy services is promoted.

15. Does the standard address the involvement of the client's environment? E.g. social network, family, etc.

Score: 4 - Mandatory

Explanation: The standard requires that people using the service be supported to developed their social skills in line with their choices and develop valued social roles in their community.

16. Does the standard support legal implementation/compliance with safety standards/requirements?

Score: 4 - Mandatory

Explanation: The standard requires that each person who uses the service is protected from abuse and their safety and welfare is promoted. Where adverse incidents occur support must be managed and reviewed and outcomes used to inform practice. The standard

directs that service providers must operate in line with relevant legislation, regulation, national policy and standards to protect each person and promote their welfare.

17. Does the standard address whether the service provider has an internal quality management system?

Score: 3 Promoted

Explanation: New Directions requires that the service provider monitor the effectiveness of services and supports. The service provider must there is process for systematic monitoring in place to include evaluation and continuous improvement.

18. Does it support the standard if the service provider follows its strategic plan?

Score: 3 Promoted

Explanation: The standard requires that service delivery is agreed clearly with the funder and statement of purpose is publically available that accurate outlines the services provided. The service provider must have effective management systems and structures in place.

19. Does it support the standard if the service provider works towards its mission and vision?

Score: 3 Promoted

Explanation: Not explicit in the standard.

20. Does the standard support: the promotion of innovation?

Score: 4 – Mandatory

Explanation: The standard itself has been designed the create innovation to transform traditional models of service delivery. The standard promotes the concept of continuous improvement and engagement of people who use the service in the process. Creativity and flexibility are promoted to support people who use the service to achieve their goals.

21. Does the standard address international best practice in the VET and care sector?

Score: 3 - Promoted.

Explanation: It is not explicit in the standard. However, the standard was originally developed based on international best practice.

22. Does the standard address efficiency?

Score: 4 Mandatory

Explanation: Yes the standard requires that resources are effectively deployed to meet the need people who use the services. There must be clear lines of accountability.

23. Is the level of quality affordable?

At present there is no cost for using the new Directions Standard or the EASI Tool, it is a mandatory requirement in Ireland for day services. While no accreditation is available it provide a useful framework for development of person centred, rights based services.

24. Is the quality standard financially sustainable for the service provider to continue to implement it?

Financial sustainability, while there is no cost associated with using the standard the cost of delivering a service that would meet the standard has the potential to be significant and to truly implement the standard this likely to be in excess of current funding arrangements (staffing, activities, infrastructure etc.)

25. Does the quality standard bring external benefits to the supplier (ex. points for participation in tenders)?

Implementation of New Directions standards brings benefits when an organisation is seeking funding. Implementing New Directions also provides assurances to the funder and other stakeholders in terms of type and quality of service being provided.

26. Is there a self-assessment tool?

Implementation of New Directions is currently based on a self-assessment process. A tool called the EASI Tool has been developed and is used by service providers to measure their performance against the standards.

D. ISO 9001 RANKING

Carried out by AJA Europe.

1. Does the standard address whether the service provider measures how it improves quality of life?

Score: 1 - Not at all.

Explanation: In ISO 9001, quality of life is neither mentioned nor applied in reference to the improvement of the quality of life of users and their environment.

2. Does it meet the standard if the service provider respects and promotes the rights of users?

Score: 1 - Not at all.

Explanation: It is required to address all of the applicable requirements for the product/service and the interested parties' requirements/needs/expectations but does not mention user rights.

3. Does the standard take into account international rights documents?

Score: 1 - Not at all.

Explanation: Same as above. International rights documents are not mentioned at all.

4. Does the standard address whether the provider protects the client/student from abuse and risk of avoidable harm?

Score: 1 - Not at all.

Explanation: It is required to address risks and opportunities but abuses and harms are not mentioned at all.

5. Does the standard address ethical behaviour of staff/staff?

Score: 1 - Not at all.

Explanation: not mentioned at all.

6. Does the standard address staff/staff competencies?

Score: 4 - Mandatory

Explanation: there are specific requirements for identifying the needed competences.

7. Does the standard address staff/staff supervision and support?

Score: 4 - Mandatory.

Explanation: there are specific requirements for evaluating the effectiveness of the training and resources allocation.

8. Does the standard address whether the provider is oriented to the needs of the service users/pupils?

Score: 4 - Mandatory

Explanation: there are specific requirements for identifying and reviewing customer needs.

9. Does the standard support the promotion of continuous improvement?

Score: 4 – Mandatory

Explanation: the standard is based on PDCA cycle. All of the processes are subjected to improvement.

10. Does the standard address whether the service provider collaborates with service users in the planning, delivery and review of services?

Score: 3 - Promoted

Explanation: it is addressed in a different way. There are no requirements for involving the service user in the planning and delivery but it is mandatory to evaluate the customer satisfaction.

11. Does the standard support whether the service provider supports the decision-making and choices of users/learners?

Score: 1 – Not at all.

Explanation: not mentioned at all.

12. Does the standard address whether the service provider has processes in place to ensure that service delivery is effective?

Score: 4 - Mandatory

Explanation: it is mandatory to evaluate whether the output is fulfilling the applicable requirements and it is mandatory to evaluate the customer satisfaction.

13. Does the standard address partnership/collaboration with other stakeholders?

Score: 3 - Promoted

Explanation: it does require to address interested parties' requirements/needs/expectations.

14. Does it support the standard if the provider applies a rights-based approach?

Score: 1 - Not at all.

Explanation: ISO 9001 is not operationally aimed at promoting and protecting human rights.

15. Does the standard address the involvement of the client's environment? E.g. social network, family, etc.

Score: 1 - Not at all.

Explanation: not mentioned.

16. Does the standard support legal implementation/compliance with safety standards/requirements?

Score: 4 – Mandatory.

Explanation: it is required to address all of the applicable requirements including low binding requirements.

17. Does the standard address whether the service provider has an internal quality management system?

Score: 4 - Mandatory.

Explanation: ISO 9001 is the Quality Management System “for excellence”.

18. Does it support the standard if the supplier follows its strategic plan?

Score: 4 - Mandatory

Explanation: it does require to set measurable objective, to plan how to achieve the targets and to monitor the results.

19. Does it support the standard if the supplier works towards its mission and vision?

Score: 4 - Mandatory

Explanation: by definition (ref. ISO 9000:2015) a management system is based on the organization policy.

20. Does the standard support: the promotion of innovation?

Score: 1 – Not at all

Explanation:..Improvement is required, but it never refer to improvement in terms of innovation.

21. Does the standard address international best practice in the VET and care sector?

Score: 1 – Not at all

Explanation: not mentioned at all the opportunity to refer to international best practices.

22. Does the standard address efficiency?

Score: 4 - Mandatory.

Explanation: effectiveness and efficiency are part of the ISO 9001 *leitmotiv*.

23. Is the quality standard affordable?

YES. Few thousands of Euros, for a small organization, for consultancy and certification (where desired, certification is not mandatory).

24. Is the quality standard financially sustainable for the service provider to continue to implement it?

YES. Few thousands of Euros for a small organization to maintain the system and the certification.

25. Does the quality standard bring external benefits to the supplier (ex. points for participation in tenders)?

YES.

ISO 9001 gives extra points in tenders and different subsidies in various countries and sectors. In some cases it is mandatory.

26. Is there a self-assessment tool?

NO.

It does require internal audit, being different from an assessment, and does not provide a “tool”. There is a specific standard, ISO 19011:2018, to provide guideline for audit activity.

6. FINAL CONCLUSION

By looking at the research it is quite easy to identify the key trends that the studies are revealing and the major needs the interested parties are pointing out.

What is less intuitive and far more interesting, is that we can classify the studies' results in four different perspectives and we can actually draw a map very similar to a balanced score card:

<p>USER</p> <ul style="list-style-type: none"> - person centred services; - rights based approach; - service user active participation. 	<p>“SPONSOR”</p> <ul style="list-style-type: none"> - shift from institutional to home, family and community-based services; - external quality certification; - service continuity; - life-long learning and support.
<p>IMPROVEMENT</p> <ul style="list-style-type: none"> - benchmarking; - innovation; - improvement of competences. 	<p>PROCESSES</p> <ul style="list-style-type: none"> - change in focus from input based to output based quality measurement; - culture shift from quality monitoring to continuous improvement; - self-assessment as part of continuous improvement.

This kind of map is highlighting some key elements that are all linked together and that create a set of medium-term strategic goals for service providers and policy makers.

It is, in fact, setting a frame against which a standard in the social sector could be evaluated, built or modelled on.

The above listed elements are very close to the 26 points that have been used to evaluate the four quality standards that are the focus of the project; points that were developed from the quality standard SWOT analysis. This confirms the relevance of the analysis.

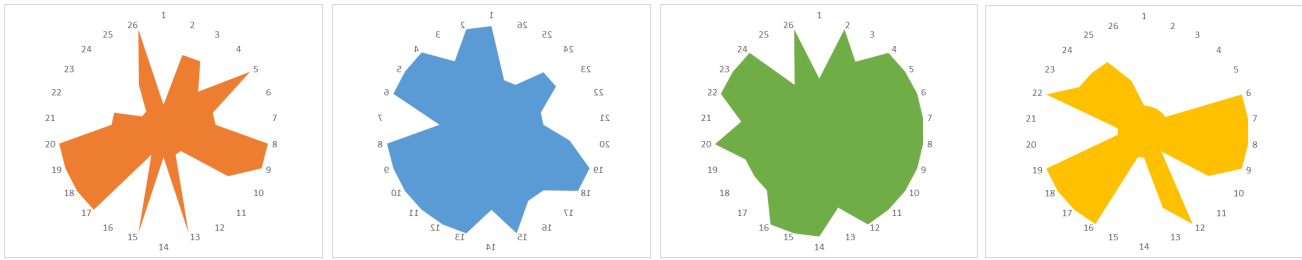
The next radar charts show the grade to which the analysed standards are fulfilling the 26 points discussed in section 5:

EFQM

EQUASS

NEW DIRECTIONS

ISO 9001



Having this new approach in mind, which could be called the “strategy map”, it is possible to compare the characteristics of the existing quality standards to determine which one is aligned with the new map.

The following radar charts are taking in to consideration just the points (discussed in section 5) that are matching with the key elements listed in the above map:



EFQM, EQUASS, New Directions and ISO 9001, all of them are well centred on process management and improvement. The major challenge is to specifically address the user needs and the community expectations however both EQUASS and New Directions scored very high in this regard. In order to ensure that this is still the case in the future, we need a standard that could itself rapidly and continuously evolve taking in to account best practices and changing external issues. This topic will be further explored in the project final recommendations.

These conclusions, of course, will be further compared with the results of the key actors consultations and, if confirmed, will pave the way for a new exciting project: improving the tools we have to tackle the challenges highlighted by the European Strategy for the Rights of Persons with Disabilities



Plataforma de entidades para
la promoción e inclusión
social de personas con
enfermedad mental



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