Quality Study Annex 1 Lithuania case study

At a glance:
  ➢ *Uneven system of quality assurance - some social service sectors strictly regulated and licensed.*
  ➢ *Service management shared between national and local level - municipalities implement and control the quality of social services.*
  ➢ *On-going process of de-institutionalization, changing logic and structure of the care sector.*
  ➢ *Shift towards more extensive regulation of social services.*
  ➢ *Municipalities potentially becoming key players in provision and oversight of social services.*
  ➢ *Support for EQUASS from government and providers.*
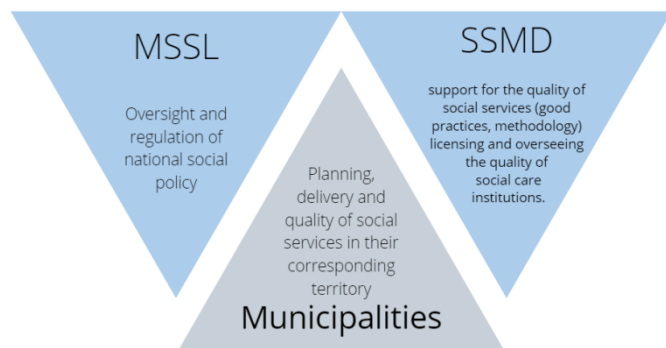
Regulation of social services

The Law on Social Services that entered into force in 2006 foresees a clear division of functions and responsibilities between the Ministry of Social Security and Labour (MSSL) and municipalities. It also encourages competition between social services providers, foresees direct financing of social services, and settles basic quality requirements.

According to the Law on Social Services[i] there are two types of social services in Lithuania:

• Of *general interest*, targeting those whose independence and ability to participate in society can be improved or compensated with the support of qualified professionals without the need for constant professional support. The general social services include information, counselling, mediation and representation, social and cultural services, organization of transportation and catering, provision of necessary clothes and footwear as well as other services;
• *Special social services* are targeting those whose capacity to live independently and participate in society cannot be compensated with services of general interest. The special social services include:

  o *Social attendance*, aimed at providing a person integrated but ad hoc assistance such as home care, accommodation services, support for maintenance of social skills;
  o *Social care* aimed at providing integrated assistance requiring continuous specialist support. Social care is divided into day, short-term, and long-term care.

Provision of social services in Lithuania is taking place in a "quasi-market" where municipalities are buying services that they deem necessary from different providers. While the Ministry of Social Security and Labour (MSSL) regulates and shapes national social policy, its Social Services Monitoring Department (SSMD) is responsible for supporting quality through the expansion of best practices and elaboration of methodological materials. It also issues licenses to social care service providers

Figure 1 Institutions, responsible for provision of social

MSSL — Oversight and regulation of national social policy

SSMD — support for the quality of social services (good practices, methodology) licensing and overseeing the quality of social care institutions.

Municipalities — Planning, delivery and quality of social services in their corresponding territory

and oversees compliance with Social Services norms. Meanwhile, municipalities are the key player in organizing provision of services - they choose the type and scope of services provided, can establish or close social institutions. Moreover, they are responsible for quality assurance,

however they have limited tools (lack of clear regulations, methodological material) for properly fulfilling this function.

Quality trends

There are **no obligatory certification requirements for providers of services of general interest. Moreover, the definition of such services and quality requirements that apply to them are rather vague**. Similarly, the **only special social service whose providers require a license (since 2015) is social care**. According to interviewed providers the requirements set out in the licensing instrument are technical and too focused on quantitative indicators such as the number of beds, room space, etc rather than quality dimensions of service provision. More than 700[ii] providers who currently hold the license are subject to regular checks by the Social Services Monitoring Department regarding their fulfilment of requirements established in the Regulation of Social Care Norms, a document that reflects a much broader understanding of quality. As observed by some interviewees, at the time of drafting this report in the end of 2019, there is still a lack of shared understanding of how these "soft" quality aspects should be defined and enforced, and the interpretations vary, leading to the uneven quality of services and disagreements between regulators and providers.

Many organizations deliver "mixed" services, i.e., social services and other services that in Lithuania are not considered as such. In that case, they might need additional licenses or be subject to audits from the Ministry of Health (in case of medical rehabilitation and or institutional care for elderly); the Ministry of Education Science and Sport (in case of VET educational programs), or receive specific permits related to the hygiene.

Vocational Rehabilita-Tion/ VET	**The Ministry of Social Security and Labour (MSSL) and the Lithuanian Labour Exchange (LLE) are responsible for the organization of vocational rehabilitation services**. The LLE contracts providers of relevant services through public procurement procedures. Organizations providing vocational rehabilitation have to fulfil the requirements foreseen in the "Description of the Requirements for Bodies Providing Vocational Rehabilitation Services[iii]" approved in 2005. While the document establishes basic requirements for service providers regarding the qualification of staff, infrastructure, and services, they are technical and narrow. Moreover, they do not imply the necessity of any specific license (except some other permits and certificates related to hygiene and services of vocational education in case the provider foresees it). The LLE oversees the quality of the service, however as observed by some interviewees, often the main thing they corroborate is the inclusion of people in the programs, but not their quality. In 2012 the Vocational Rehabilitation Methodological Centre[iv] proposed and laid out the direction for a reform, suggesting creating an obligatory certification procedure for vocational rehabilitation services. However, until now, there are no binding regulations from the Ministry of Social Security and Labour. **The Ministry of Education, Science and Sport (MoESS) is responsible for the implementation of VET programs. The** national approach for improving VET quality assurance is set out in the VET quality assurance system concept (2008). This concept takes into account the experience of Lithuania and other European countries as well as the common quality assurance framework for VET in Europe (CQAF) and the European Quality Assurance in Vocational Education and Training (EQAVET). The alignment of the Lithuanian VET system with the EQAVET promotes PDCA (plan–do–check–adjust) while encouraging and supporting regular self-assessment of VET providers. Each VET program has to be approved by the Qualifications and Vocational Education and Training

Development Centre.[1] The relevant divisions of the MoESS supervise the teaching process and activities, and audit activities. Finally, the State audit office performs random checks of VET institutions[v].

In the end of 2019, the government is also **discussing an accreditation process for social support services**. This change would entail a stricter regulation of many services with clear guidance regarding their implementation and the mechanisms of oversight of quality. On the other hand, the foreseen procedure entails passing more responsibilities to municipalities, and some interviewees were worried about the potential negative impact on the already uneven quality of social services among different municipalities.

We do not agree with the idea to give more responsibilities to municipalities. It should be natural to have uniform requirements in the whole country. We already have huge differences between municipalities and after such changes they will only grow.

One of the goals of the De-I is to deliver better but cheaper services. Moreover, the De-I is related to the understanding that social services are bi-directional, we need to include clients and their communities.

Besides both recent and upcoming changes in regulation, social services, especially social care, are challenged by **the de-institutionalization process that is transforming the care from institutional to community-and family-based**. According to some interviewees, the process taking place in Lithuania is very radical and has few equivalents in other countries. Such a significant change puts pressure on the government to regulate different services that are being offered outside of traditional social (care and support) service scheme. Some interviewees suggest that those community-based services that do not have clear quality regulations yet could profit the most from EQUASS certification as it would force them to consider a wide range of dimensions of quality and in turn design better services.

Besides regulatory changes, the providers are affected by changing **demands from clients**: they observe that people want more services than are currently available, different associations demand inclusion into the planning of social services. On the other hand, the work of social service organizations is complicated by the limited understanding of what different services entail: many people see social services as purely "services": domestic aid, home, or institutional care. Given that the goal of social services is to support integration into the community, regain independence – and people tend to undervalue this type of support, and consider it as insufficient.

The overall quality of the existing framework receives mixed assessments with the regulators being more satisfied with it than the providers. While the former maintains that the quality of social services could be better and more uniform among different municipalities, they see existing regulation as sufficient. On the other hand, providers were more skeptical, observing that the system is still more focused on a simplistic definition of quality, does not include

We cannot make five star hotels from our care institutions. They reflect the general situation in the country. The current system, what people receive from the social care system, is adequate.

diverse services that should be included, and does not support and reward quality in general. Moreover, some interviewees mentioned the lack of clear guidance, national policy regarding quality and an over-reliance on municipalities leads to unequal quality of services across the country.

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[1] Kvalifikacijų ir profesinio mokymo plėtros centras, https://www.kpmpc.lt/kpmpc/

Place of EQUASS in the overall system

Existing regulations and financial limitations do not encourage voluntary certification processes: public procurement procedures allow requiring specific certifications or giving extra points for them. However, such requests are rare. The decision to acquire any optional accreditation depends entirely on the desire of a given organization to demonstrate its professionalism and the leadership of its administration. Nonetheless, different interviewees pointed out that **demanding certifications at this point would put an undue burden on organizations and might diminish the already narrow offer of social services**. Financial constraints are the fundamental problem for organizations willing to go beyond formal requirements of quality: the Lithuanian social sector is moderately to severely underfunded, with many organizations fighting for survival, instead of focusing on complementary quality standards.

The Ministry of Social Security and Labour supports the EQUASS certification: the EQUASS has been mentioned as potentially beneficial in different ministerial-level communication, the EU funds are being used in order to help organizations to obtain this certification and majority of regulators interviewed had a positive view of the system. It appears that there are few serious competitors to EQUASS in the social care sector in Lithuania: the interviewees rarely mentioned the ISO certification and the majority of them have never heard of an organization certified by the European Foundation for Quality Management (EQFM). The ISO standard seems to be more prevalent in healthcare and educational services and has been criticised by various interviewees as less suitable for the social sector. The interviewees observed that it is too focused on processes and management and less suitable to capturing the perspective of the client. On the other hand, not everyone is in favour of governmental support to EQUASS, observing that it goes against the idea of competition and a free market and EQUASS relation with local quality standards is unclear.

<Lithuanian support for EQUASS> in legal terms – it stops competition. I do not see the point. The state already invests in oversight and licensing procedures. The current system is sufficient, especially given that the relation between EQUASS and Lithuanian supervision is unclear.

I believe that ISO is a great certificate for management. However, we might have great managers, but do not reach a good quality of services. If we believe that the objective of social services is a personal change, that is something that cannot be achieved with good management alone < >

Various interviewees observed that EQUASS has potential in different social service sectors from vocational rehabilitation to care (in the words of one interviewee "in all the services where we want to include the clients, employees, and the broader community). **However, local licenses or accreditations might become competitors to EQUASS** if a more advanced and coherent regulation system is established. Given that national/local regulation is free of charge and requires only the time input from organizations, it would be much more popular than any external assessment tool. Similar views were expressed both by providers and regulators, who emphasized the process of learning, which can take place also without acquisition of specific certifications.

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[i] https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.277880
[ii] Data from http://www.sppd.lt/lt/veiklos-sritys/licencijavimas/licencijos/
[iii] https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.257098/asr
[iv] A vocational rehabilitation provider that has been elected by the Ministry of Social Security and Labour to provide methodological support for the quality of VR services.

[v] Kvalifikacijų ir profesinio mokymo plėtros centras. (2019). Vocational education and training in Europe: Lithuania. Cedefop ReferNet VET in Europe reports 2018. http://libserver.cedefop.europa.eu/vetelib/2019/Vocational_Education_Training_Europe _Lithuania_2018_Cedefop_ReferNet.pdf