Quality Study Annex 2 Ireland case study

At a glance:

- Improved local regulatory framework encompassing different social services from residential care (for children, adults, people with disabilities) to vocational and community rehabilitation, made external certifications less attractive.
- Trust in local regulatory quality by providers.
- EQUASS is not seen as having opportunities in the Irish market due to sufficient national regulations, limited resources of social service providers and some negative experiences with the EQUASS certification process.

System of social

Ireland has a relatively integrated health and care system: all public health and social care services (Figure 1) come under the remit of the Health Services Executive (HSE) either through the direct provision of services or through the funding of social care¹. Meanwhile. since 2000. the responsibility for vocational rehabilitation and training (together with vocational training and employment for people with disabilities) falls in the

Figure 1 Community and social care services

• Children and Family Services - Adoption and Fostering, Family Support, Child Protection Social Workers, Children First Guidelines, Pre-School Inspection Services, Domestic Violence, Separated Children

• Disability Services- Services for people with intellectual, physical or sensory disabilities, Assessment for Children, Day Service Review

• Mental Health Services;

• Audiology/Hearing services for babies, children, and adults with medical cards.

• Older People Services - Tips for Healthy Living, Benefits and Entitlements, Fair Deal, Services in your area, Residential Care.

hands of the Department of Enterprise, Trade, and Innovation. Responsibility for the delivery of these services after a few institutional reforms at the time of drafting this study in late 2019 rested with the Further Education and Training Authority (SOLAS)². Responsibility for rehabilitative training and Sheltered Workshops remains with the Department of Health and Children. The education-related services, such as vocational education and training (VET), are regulated by the Educational Training Boards and the Further Education and Training Authority (SOLAS)³.

There are several national organizations responsible for the quality of social services in Ireland, depending on the specific sector.

• The **Health Information and Quality Authority (HIQA)**⁴, an independent authority established to drive high-quality and safe health and social care services, is responsible for the regulation of residential care (children, adults, and people with disabilities).

• The **Health Service Executive** (HSE)⁵ is responsible for the day and personal support services for persons with disabilities.

• The Education and Training Board (ETB) oversees education-related services, including vocational education and training.

• Given that many social care providers are third sector organizations, some are also monitored by the **Charities Regulator**⁶ that sets the Governance Standards for the non-profit sector.

For those organizations that deliver "mixed" services, they need to fulfill the requirements of the respective institutions. For example, the organizations interviewed for this overview held certifications from the Health Information and Quality Authority, the Education and Training Board



(ETB) besides optional ISO 9001, and the international Commission on Accreditation of Rehabilitation Facilities (CARF) accreditations.

Quality trends

In the past decade, the Irish social care system experienced a few significant transformations. First, the local regulatory framework was established and strengthened. In 2008, the HIQA published standards for residential care. Since the same year, it also carries out independent, unannounced inspections of all public, private, and voluntary nursing homes⁷. In 2012, the Health Service Executive (HSE) adopted a strategy called "New Directions - Personal Support Services for Adults with Disabilities," which foresaw significant changes in the care sector. The document programmed "a radical shift from provider-led programs to individualized, user-led supports^{8"}. Since July 2012, a system of approved service providers has been put in place under the Home Care Package Scheme. In that year, HSE introduced a single procurement framework for such services and set out the quality standards for contracting services. The approved providers, appointed under a tendering process, must meet a new uniform level of national standards. The HSE monitors them through Service Level Agreements, and they are required to provide a range of information regarding their services. The Quality Assurance and Verification Division was established in 2015 to monitor and report on the quality and safety of health and social care services⁹. At the time of drafting this study in late 2019, The HSE iwas developing a framework for other care services¹⁰ as well.

VET and	In VET, the Education and Training Board (ETB) stipulated that
vocational	"Quality & Qualifications Ireland" (QQI) is their accepted standard and
rehabilitation	accreditation criteria. QQI, established in 2012, is responsible for
	promoting, maintaining, further developing, and implementing the
	National Framework of Qualification and allows VET and vocational
	rehabilitation organizations to offer recognized educational
	certifications. Existing legislation requires VET providers to "have regard
	to QQI guidelines" in developing their procedures for quality assurance. In
	general, the providers in Ireland are responsible for quality assuring their
	programs concerning the guidelines and criteria issued by QQI. These
	criteria are directed to the EQAVET (European initiative for quality
	assurance in VET) Framework. An obligatory two-step program validation
	ensures that a) the provider can offer the program; b) it meets the minimum
	standards in terms of learning outcomes and the National Framework of
	Qualifications ¹¹ .
	Responsibility for the delivery of rehabilitative training (training not
	linked to the labor force) rests with the HSE. Rehabilitative training and
	sheltered work is provided mainly in accredited training centers that are run
	by the HSE or by service providers contracted by the HSE, and designated
	sheltered workshops ¹² . The community or voluntary organizations provide



	many of the rehabilitation services with funding provided of HSE, that,
	consequently, oversees their work ¹³ .

Second, the reforms that were taking place in the field of social services made an emphasis on the concept of person-centeredness and a clear definition and measurability of quality standards. Together with these regulatory changes, social service providers also report that clients are more often demanding better quality services.

The abovementioned changes have led to an overall well-evaluated social care system. Three interviewees consulted claimed that the current regulatory framework ensures quality, and two providers interviewed observed that there is no need for external accreditations. As noted by one interviewee, extra certifications can help to get more points in tenders; however, the requirements often mention that the organization has to be on its path to implementing a quality system, rather than specifying a specific certification.

Place of EQUASS in the overall system

Out of two respondents, only one knew the EQUASS certification system and had implemented it in early 2000. However, **the organization has decided not to continue with EQUASS 2008.** The key reason for that was the improvement of the local regulatory framework, together with limited resources to pay for it. Importantly, a negative experience with the EQUASS 2000 audit also impacted their decision. As the organization observed, the assessors not always had an understanding of the Irish environment or the context and not always possessed expertise in vocational, health, and social care settings.

Assessors come from other European Countries, and some did not have an understanding of the Irish environment or the context, <...> not always possessed the necessary skills or expertise in a wide variety of Vocational or Health and Social Care settings. Feedback and recommendations are provided in the context of the assessors' individual experience, and not in the context of the Irish environment.

The organization interviewed also holds the ISO 9001 certificate, observing that differently from

Organizations are reactive by nature, responding to the immediate/urgent needs <...> by implementing new procedures and processes when, in fact, this is increasing the burden of bureaucracy. However, reviewing current practices and making small changes can be more impactful. In this changing environment, if the EPR were to research and look EQUASS, this quality mark (similarly to EFQM and Q Mark) is generally wellknown and recognized in the Irish market.

Another organization interviewed was not aware of EQUASS; however, it held the optional international CARF certification.

While agreeing that the regulatory framework in Ireland is good, the organization still wanted to have assurance in the quality of the services provided, claiming that the CARF certification provided "evidence that we are providing services that are quality and outcomes-focused." Though the sample of interviews is too small to make definite conclusions, it seems that the Irish market is well served with local regulations.



³ Burke N.; Condon, N.; Hogan A. 2019. *Vocational education and training in Europe – Ireland*. Cedefop ReferNet VET in Europe reports 2018, p. 37. http://libserver.cedefop.europa.eu/vetelib/2019/Vocational_Education_Training_Europ e Ireland 2018 Cedefop ReferNet.pdf

https://www.hse.ie/eng/services/publications/disability/newdirections.html

⁹ <u>https://www.hse.ie/eng/about/qavd/</u>

¹⁰ <u>https://www.hse.ie/eng/about/who/qid/framework-for-quality-improvement/framework-for-improving-quality-2016.pdf</u>

¹¹ Burke N.; Condon, N.; Hogan A. 2019. *Vocational education and training in Europe – Ireland*. Cedefop ReferNet VET in Europe reports 2018, p. 48-49. http://libserver.cedefop.europa.eu/vetelib/2019/Vocational_Education_Training_Europ e Ireland 2018 Cedefop ReferNet.pdf

¹² Rehabilitation and training services for people with disabilities,

citizensinformation.ie/en/health/health_services/health_services_for_people_with_disabilities/rehabilitation_and _training_services_for_people_with_disabilities.html

¹³ https://www.hse.ie/eng/about/foi-publication-scheme/services/social-care/



¹ Daly, M. 2018. ESPN Thematic Report on Challenges in long-term care Ireland. European Commission.

² <u>http://www.euroblind.org/convention/article-27/ireland#9</u>

⁴ https://www.higa.ie/areas-we-work/standards-and-guality

⁵ https://www.hse.ie/eng/services/list/4/disability/newdirections/

⁶ https://www.charitiesregulator.ie/en

⁷ Daly, M. 2018. P. 9.

⁸ HSE. 2012.New Directions. Review of HSE Day and Implementation Plan 2012-2016, Working Group Report. p. 20.