

Plenary 3: Ensuring Quality in Community-Based Care



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ESN Seminar

Social Services Leading Care in the Community

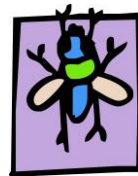
9-10 October 2023 Barcelona, Spain

Plenary 3: Ensuring quality in community-based care

Garantizar la calidad de la atención comunitaria

José Manuel Ramírez Navarro

President of the national association of social services directors, Spain



The Social Services Development (DEC) Index is the only study that seeks to measure and evaluate the development of the structures and budgets of the Social Services, which address the needs of over 8 million people in Spain. The DEC Index has been in place since 2012.

1. What are the key enablers and barriers to quality in home and community-based social care in Spain?

In 2022 THERE WAS AN IMPROVEMENT IN SOCIAL SERVICES. The main improvement is seen in the Organization of the System.

2. What needs to be done in Spain to advance on quality in social services, so they are able to ensure quality care in the community?

THERE ARE STILL SIGNIFICANT DIFFERENCES BETWEEN REGIONS

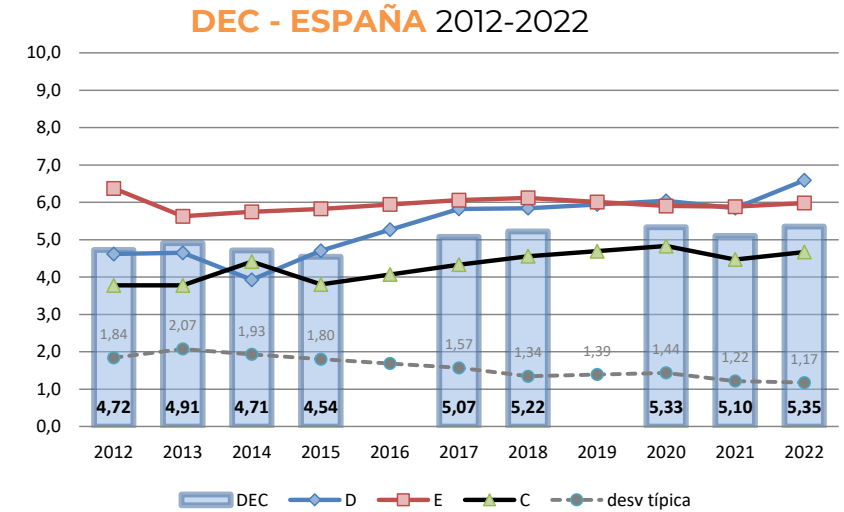
It's not just about decentralizing, but STRUCTURING and organizing the system at the local level, which provides better coverage levels. Proximity.

3. What challenges do you see – and what is needed to address them?

Strategic guidelines for the future of social services

Agreement on Common Criteria for the Accreditation and Quality of the Centers and Services of the System for Personal Autonomy and Care for Dependency (SAAD)

FROM HOME ASSISTANCE TO HOME CARE....



IDEAS Y PROPUESTAS PARA
UN NUEVO MODELO DE
AYUDA A DOMICILIO
"ELIJO MI HOGAR"

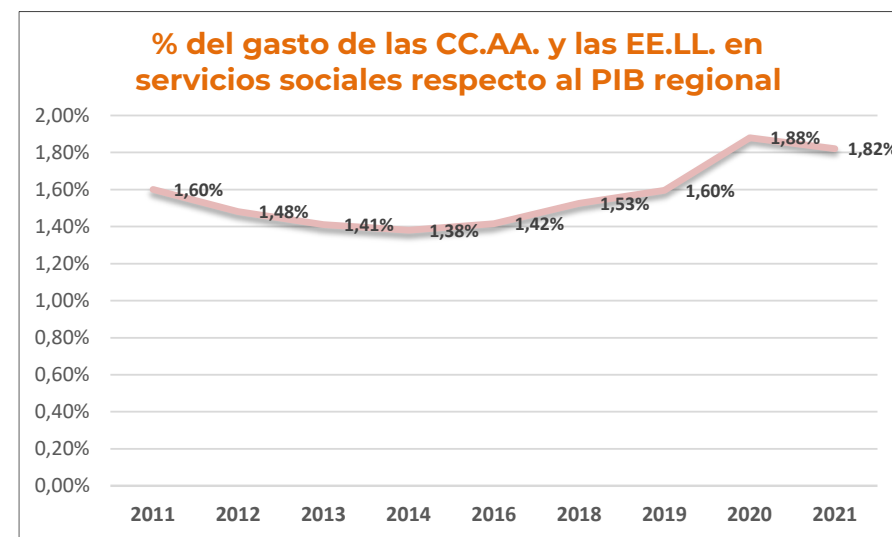
IDEAS Y PROPUESTAS PARA
UN NUEVO MODELO RESIDENCIAL
PARA PERSONAS EN SITUACIÓN
DE DEPENDENCIA
residencia su casa



RESULTS



THE EXPENDITURE ALLOCATED TO SOCIAL SERVICES BY ADMINISTRATIONS SLOWS DOWN



Plenary 3: Ensuring quality in community-based care An overview of the Social Services in Spain

PAPER RIGHTS

- Sector organization improves, but the limited increase restricts the availability of services and benefits to the citizens

9.27% is the percentage of the budget allocated to social services

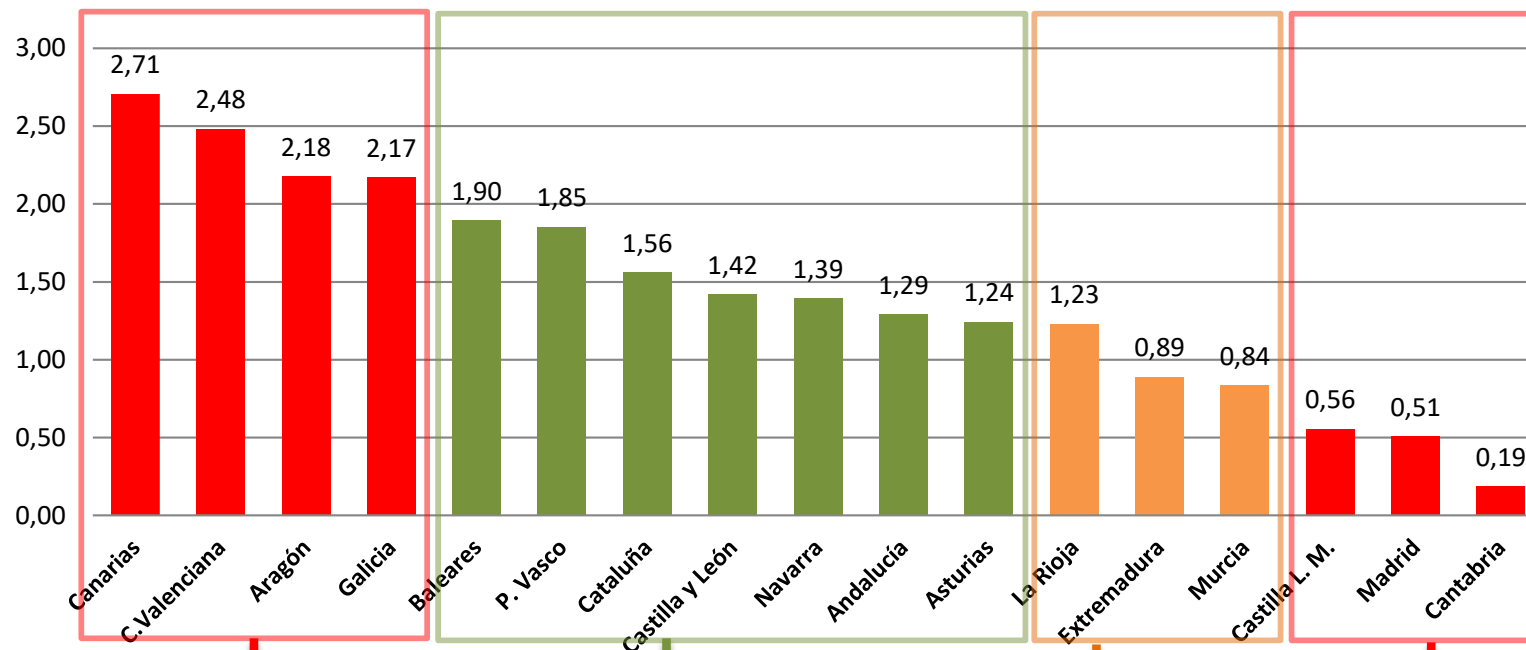
- The limited development of services for the elderly and the dismantling of resources for social inclusion are the main examples of what we call 'paper rights'

Administrations allocated 462.7€ per inhabitant per year to social services in 2021

1.92% is the percentage of GDP that Spain allocates to public social services

PAPER RIGHTS & COVERAGE WITH NO GUARANTEE

Ratio derechos / cobertura



Reconocen derechos muy por encima de la cobertura efectiva.
"DERECHOS DE PAPEL"

"EQUILIBRIO" entre derechos reconocidos y cobertura efectiva

La cobertura no está completamente garantizada por falta de reconocimiento de derechos: "COBERTURA EN RIESGO"

Se actúa sin reconocimiento de derechos: Modelo ASISTENCIAL vs. SERVICIOS SOCIALES basados en DERECHOS

Paper rights

Communities where the approval of new laws does not correspond to effective assurance through an offering of benefits and services

Coverage with no guarantee

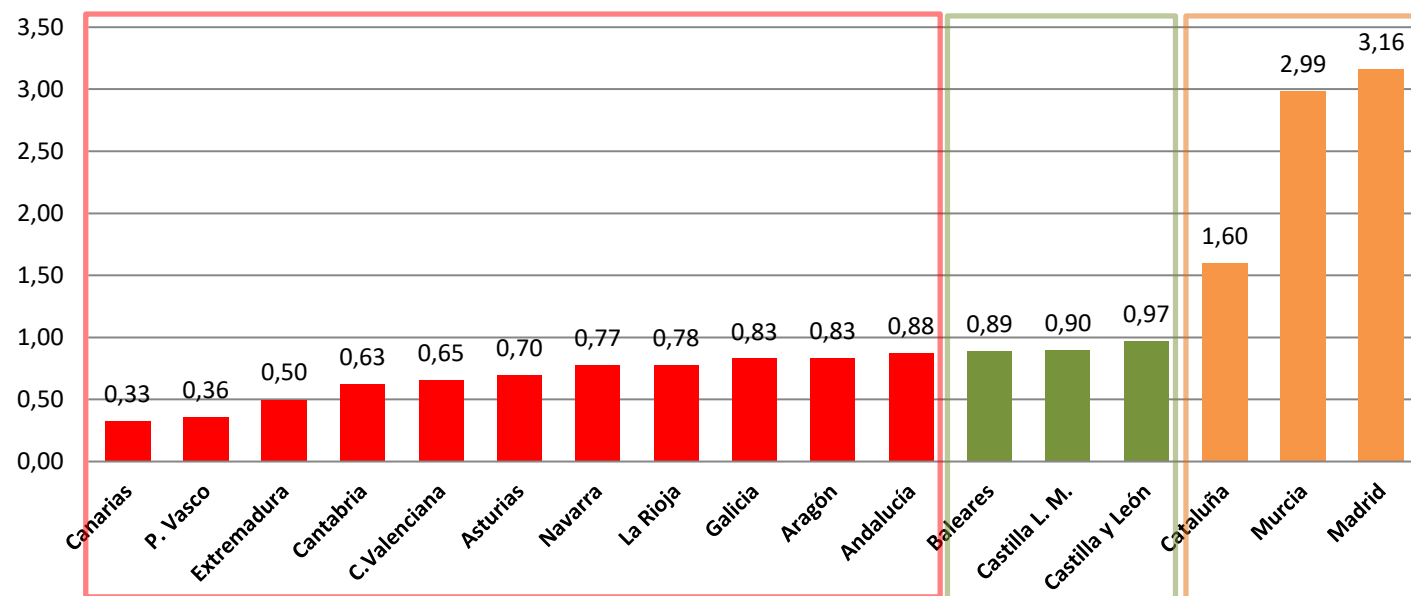
Communities where the provision of benefits and services is not guaranteed by a regulatory framework –Law and Catalog- or a planned public policy



Not just decentralizing but **STRUCTURING** and organizing the system without turning away from the local level, which, when well-structured (and funded), provides better coverage levels

SPENDING MORE IS NOT NECESSARILY DOING BETTER
Local structuring and decentralizing appear to be critical for the efficiency of the System

Ratio cobertura/gasto



INEFICIENCIAS.
Presentan escasa cobertura con relación al gasto.

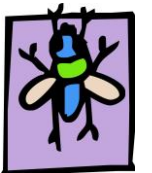
Sistemas más COSTE-EFICIENTES. Equilibrio entre gasto y cobertura.

Bajo gasto en relación a la cobertura por factores distintos a la coste-eficiencia. (volumen de población, servicios de bajo coste, etc...)

One of the keys that can explain efficiency in spending is the degree of decentralization of services in local administrations. Territories with a lower ratio (excessive spending for the coverage they provide) have coincided with those that have low local involvement in the management and delivery of social services. Territories with a strong local role in management offer better coverage for the economic effort

Strategic guidelines for the future of social services

- ☞ **A clear identity.** The fourth Pillar of Social Welfare. What we do. We are not subsidiary to anyone.
- **Academic development.** Academic space. Research and scientific evidence.
- **Media presence.** In traditional media and on social networks.
- **Political relevance.** A state matter. Electoral programs. Identity documents and party structure.
- **Social consideration.** Changing roles in leadership: Parachutists can't fly the airplane alone. The specific role of System officials. Just like Healthcare and Education, otherwise, it's not serious.
- **Redefining professionalism.** Who is at the center? Corporatism as a problem. The risk of bureaucracy.





III. OTRAS DISPOSICIONES

MINISTERIO DE DERECHOS SOCIALES Y AGENDA 2030

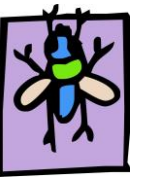
13580 *Resolución de 28 de julio de 2022, de la Secretaría de Estado de Derechos Sociales, por la que se publica el Acuerdo del Consejo Territorial de Servicios Sociales y del Sistema para la Autonomía y Atención a la Dependencia, sobre criterios comunes de acreditación y calidad de los centros y servicios del Sistema para la Autonomía y Atención a la Dependencia.*

10 IDEAS

- 1
The new residential model starts at home
- 2
A proximity service
- 3
Homely atmosphere
- 4
Family living
- 5
Personalized care
- 6
Respect for the dignity of the individual
- 7
Collaboration with the Public Health System
- 8
Well-trained, skilled and motivated workforce
- 9
Quality, quality, quality
- 10
A future without residential centers?

Agreement on Common Criteria for the Accreditation and Quality of the Centers and Services of the System for Personal Autonomy and Care for Dependency (SAAD)

FROM HOME ASSISTANCE TO HOME CARE...

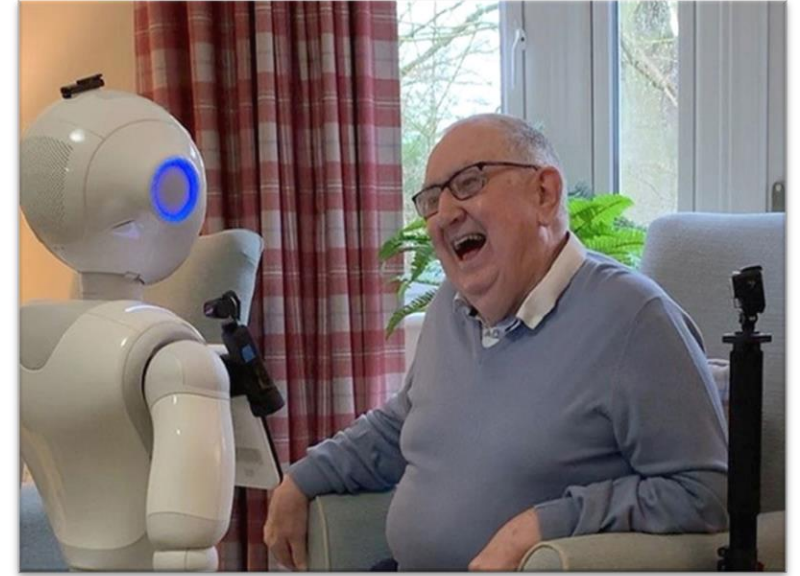


a) Rethink the current model of home care and support.

b) Incorporate the technological dimension at home.

Flexible catalog of benefits/services:

- Home care service.** With greater intensity and compatibility.
- Advanced Telecare.** For increased safety and monitoring.
- Ambulatory or home-based services** from residential and day care centers: rehabilitation, temporary stays, meals or laundry, etc.
- Household services**, companionship, transportations, etc.



These services will be complemented by

-**Home technologies**, such as home automation, security systems, mobility aids...

It is important to coordinate other initiatives:

- Healthcare services at home**, to be provided by the Public Health System.
- Housing services**, for home adaptation works, accesibility.
- Volunteer and good neighbor actions.**

15 IDEAS Y 41 PROPUESTAS

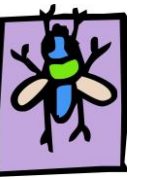
IDEAS Y PROPUESTAS PARA

UN NUEVO MODELO DE
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QUALITY as understood in Social Services



Three dimensions:

Quality of facilities

Appearance of buildings and equipment.

Ease of identification and access.

Comfort of waiting areas.

Privacy in offices.

Scientific-technical quality

Defining which process is the most appropriate and the intervention techniques.

Relational quality

Understand user feedback. Empathy.

NUMBERS



AND
FLOWERS



Sabed que mi oficio no es otro, sino ya ser a los que poco pueden.

También nosotros, profesamamos que ese es nuestro oficio y profesión.

Desde los Servicios Sociales

Que es honrosa cosa favorecer y ayudar a menesterosos y desvalidos, enmendar sinrazones, enderezar fuerlos, socorrer a débiles, delener el brazo de señores magistradores y fibrar aventuras solidarias, soñando insusas de justicia y bienestar.

Nos dicen utópicos por nuestro empeñamiento en sevantar derechos ciudadanos sobre la vetusta herencia benéfica y asistencia, y por haber visto oportuni- dades de progreso social, donde otros sofo veían pobreza y marginación.

y de igualdad.

Quizás, en nuestro entusiasmo, alguna vez hayamos confundido ventas con castillos. Pero sabremos delener el desafuero de quienes intenten convertir en ventas los centros y servicios que con fan grande ilusión hemos sevantado, para que las gentes de todo oficio y condi- ción podamos vivir más dignamente y gozar de la nuestra convivencia.

Si en este empeño las cosas se ponen difíciles, sabremos decir, con el genial caballero: **Bien** podrán los encantadores quitarnos la ventura, pero el esfuerzo y el ánimo ¡jamás!

"Professionals are trapped in routine. Let's not allow the ship of social services to crash into the rocks of bureaucracy"



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General Quality Principles that should serve as a reference for the provision of Social Services:

- **Available:** The offering must cover a sufficient range of services in order to provide users with an adequate response to their needs, as well as, if possible, freedom of choice among services within the community at the location that is more beneficial for the user and, when applicable, for their families.
- **Accesible:** Social Services must be easily accesible to all who request them. Information and impartial advice on the range of available services and their providers must be accesible to all users.
- **Affordable:** Social Services should be provided to all individuals in need (universal access), either free of charge or at an affordable price for the individual.
- **Person-centered:** They should be directed in a timely and flexible way to the changing needs of each individual in order to improve their quality of life and ensure equal opportunities.
- **Comprehensive:** Social Services should be designed and provided in an integrated way that reflects the multidimensional needs, abilities, and preferences of users and, when applicable, their families.
- **Continuous:** Social Services should be organized to ensure the continuity of care for as long as the need exists, particularly when responding to evolving and long-term needs.
- **Outcome-oriented:** They should primarily focus on the personal well-being of users, taking into account, when applicable, the benefits for their families, informal caregivers and the community.