



EASPD

IMPROVING SERVICES
IMPROVING LIVES

TRAINING FOR MANAGERS & DIRECTORS



This activity is funded by the European Union via the Structural Reform Support Programme and implemented in cooperation with the European Commission

Modules



**MODULE I - FROM INSTITUTIONAL
EXCLUSION TO EQUAL
CITIZENSHIP. A LONG JOURNEY.**



**MODULE II - THE WAY FORWARD.
A PERSON-CENTRED APPROACH
TO DEINSTITUTIONALISATION**



**MODULE III - THE TRANSITION
PROCESS FROM INSTITUTIONAL
TO COMMUNITY-BASED SETTINGS**

Overall Learning Outcomes:

LO1 Understand the key elements of the deinstitutionalisation process

LO2 Comprehend the community-based living principles

LO3 Adopt a human rights-based approaches to care and support based on a shift of power from services to individuals

LO4 Understand the transition process from institutions to community-based care

LO5 Identify and respond to the needs and challenges of the new settings

LO6 Develop an effective inclusion strategy to lead the change, share the process with relevant stakeholders and manage resistance

Module I

From institutional exclusion to equal citizenship. A long journey.

By the end of this module you will:

Learn	what deinstitutionalisation (DI) is, which are the key elements surrounding DI and what is the state of play in Greece
Know	the key principles of the UN Convention on the Rights of the Child, Persons with Disabilities and the UN Principles of Older Persons
Understand	the different models (medical to social) towards disability, the principles and values of implementing a human-rights approach
Comprehend	the paradigm shifts and subsequently change your attitudes toward individuals and children with support needs

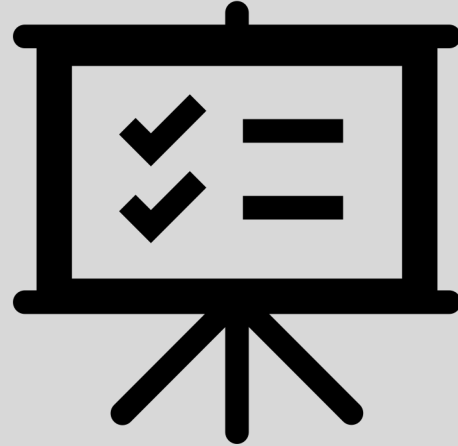
Activity - Same and different



Give us some reasons why you are all here today.
Write a list.



You have 5 minutes for this task.



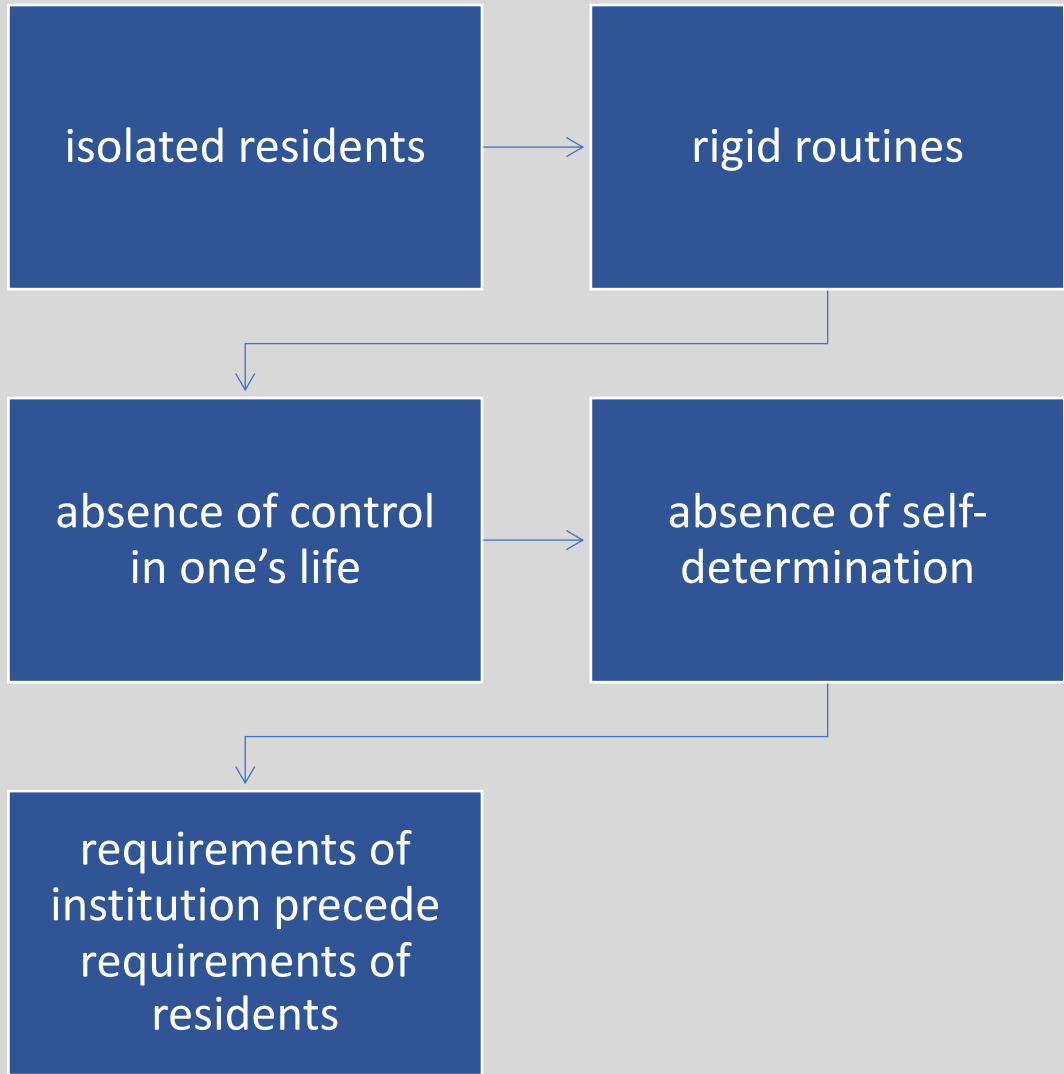
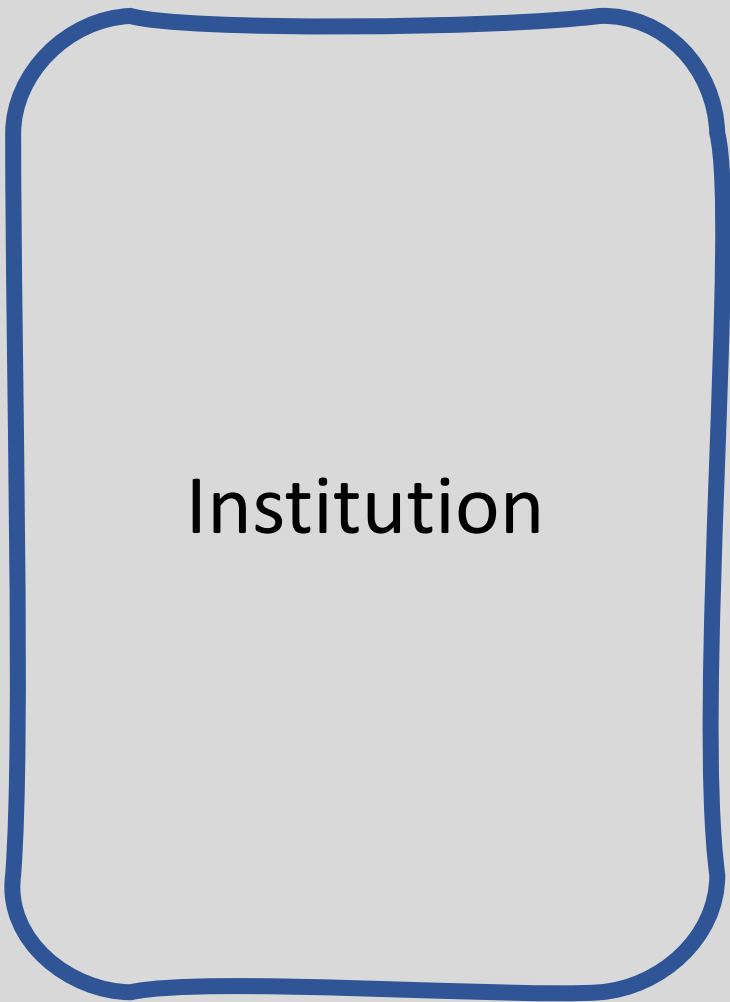
LEARNING OUTCOME 1

UNDERSTAND THE KEY ELEMENTS OF THE DEINSTITUTIONALISATION
PROCESS

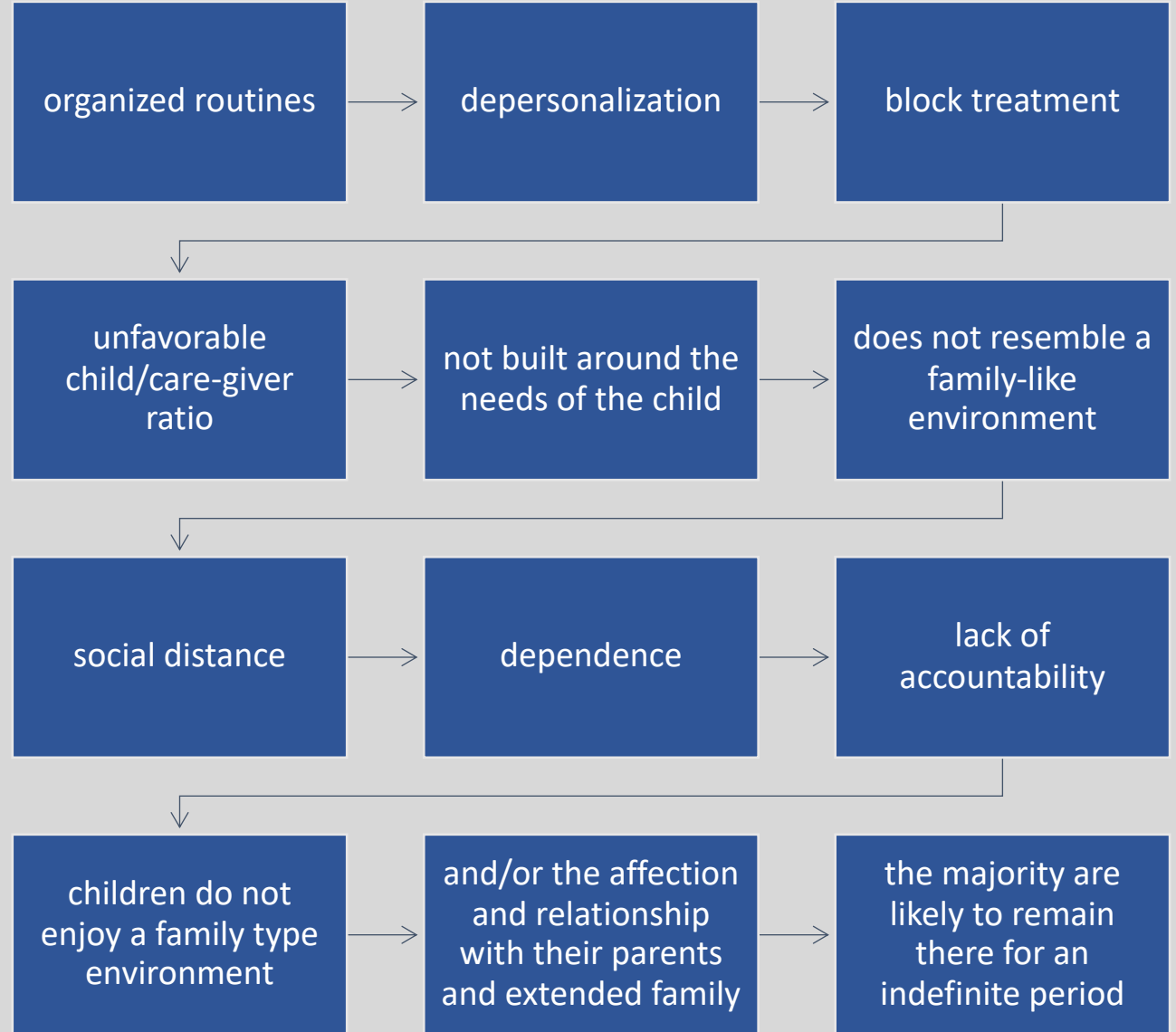
1. Deinstitutionalisation



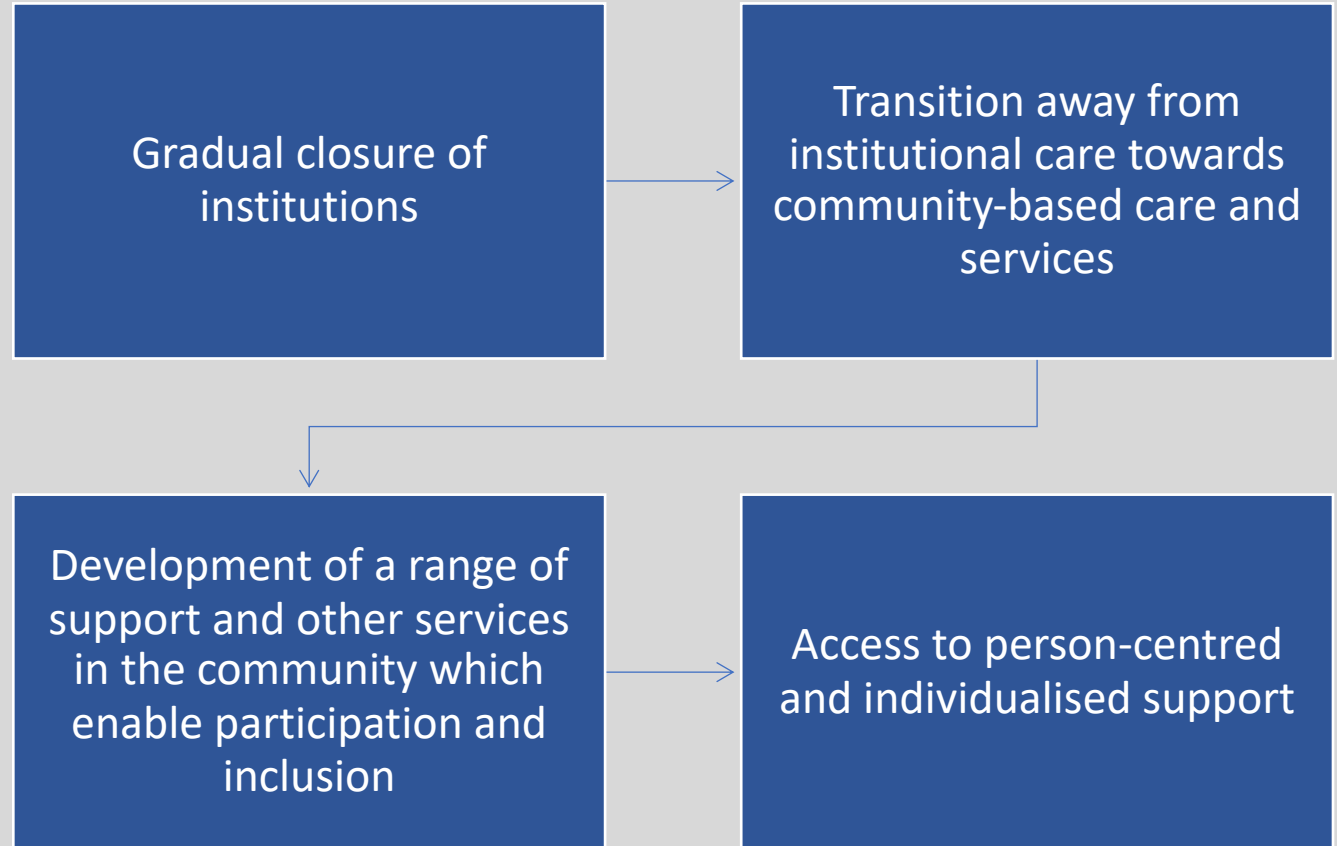
1.1 Definitions



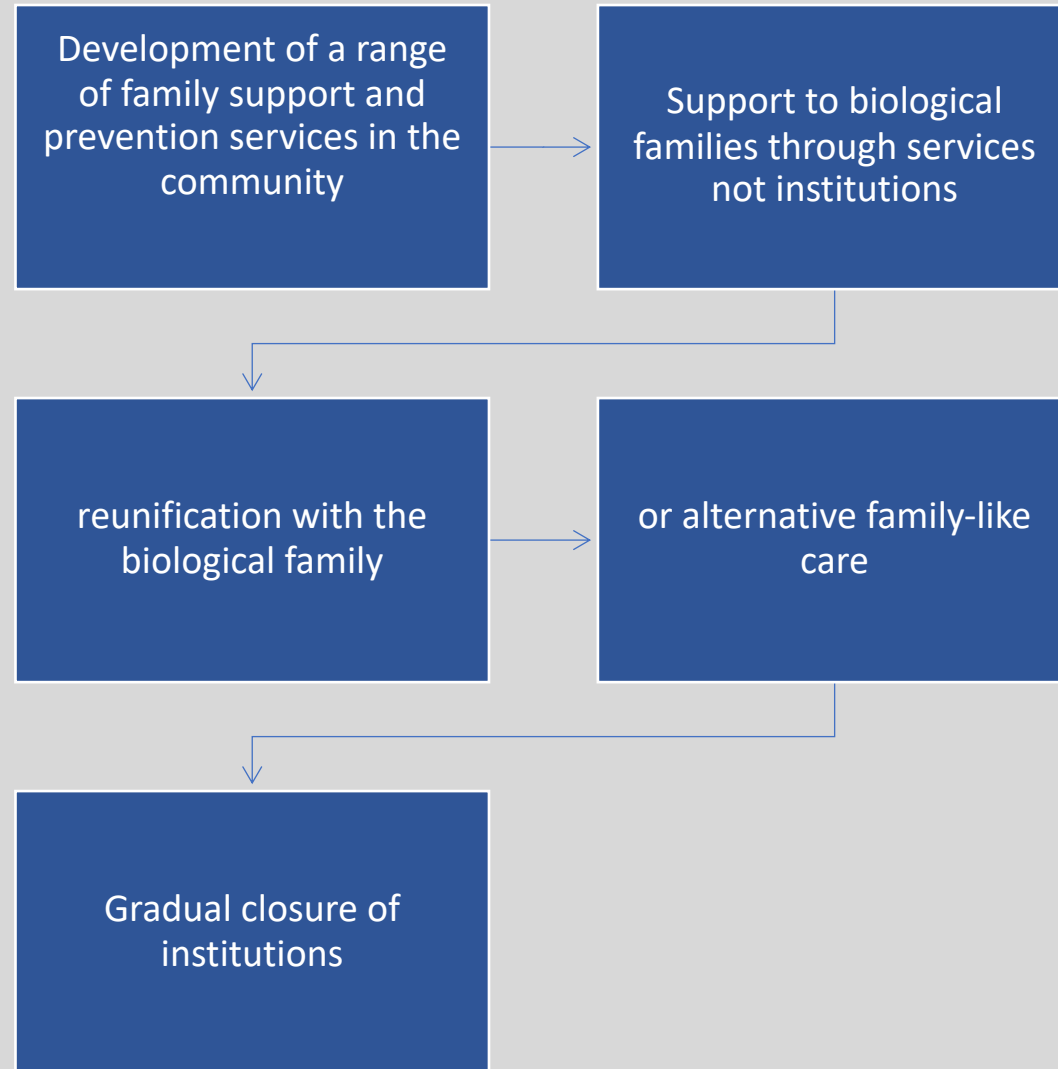
Institution for children



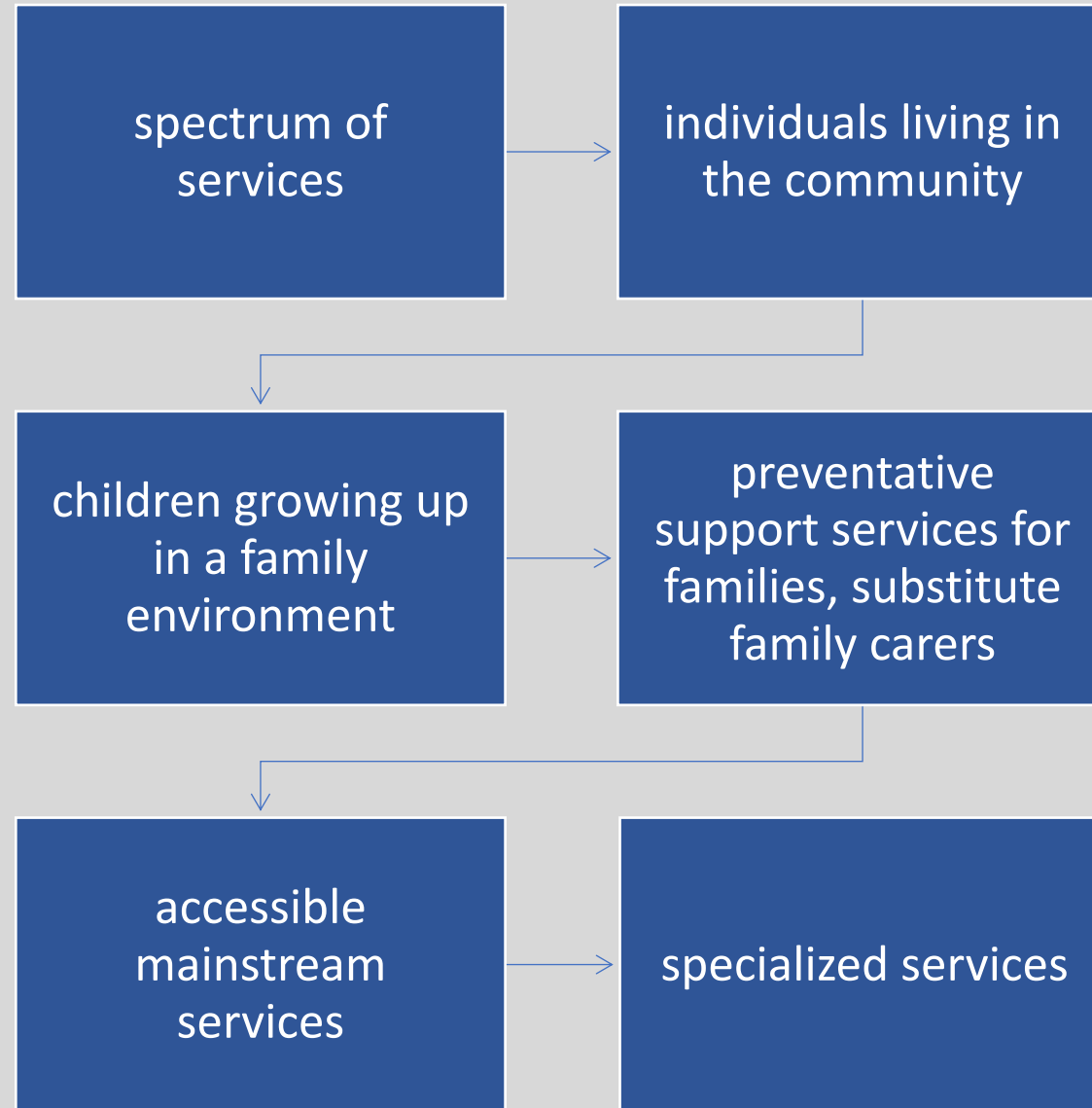
deinstitutionalisation



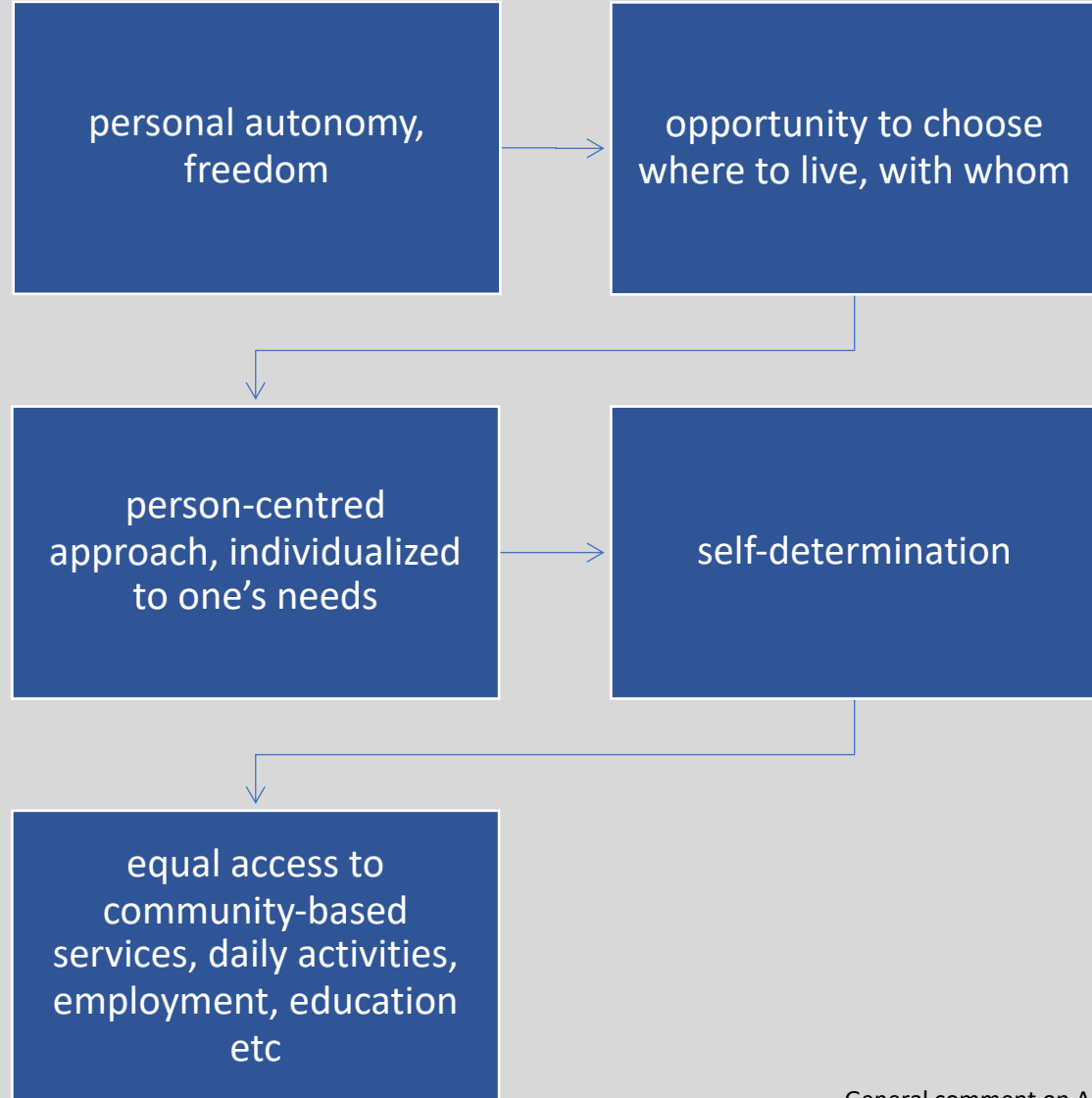
deinstitutionalisation for children



Community-based care



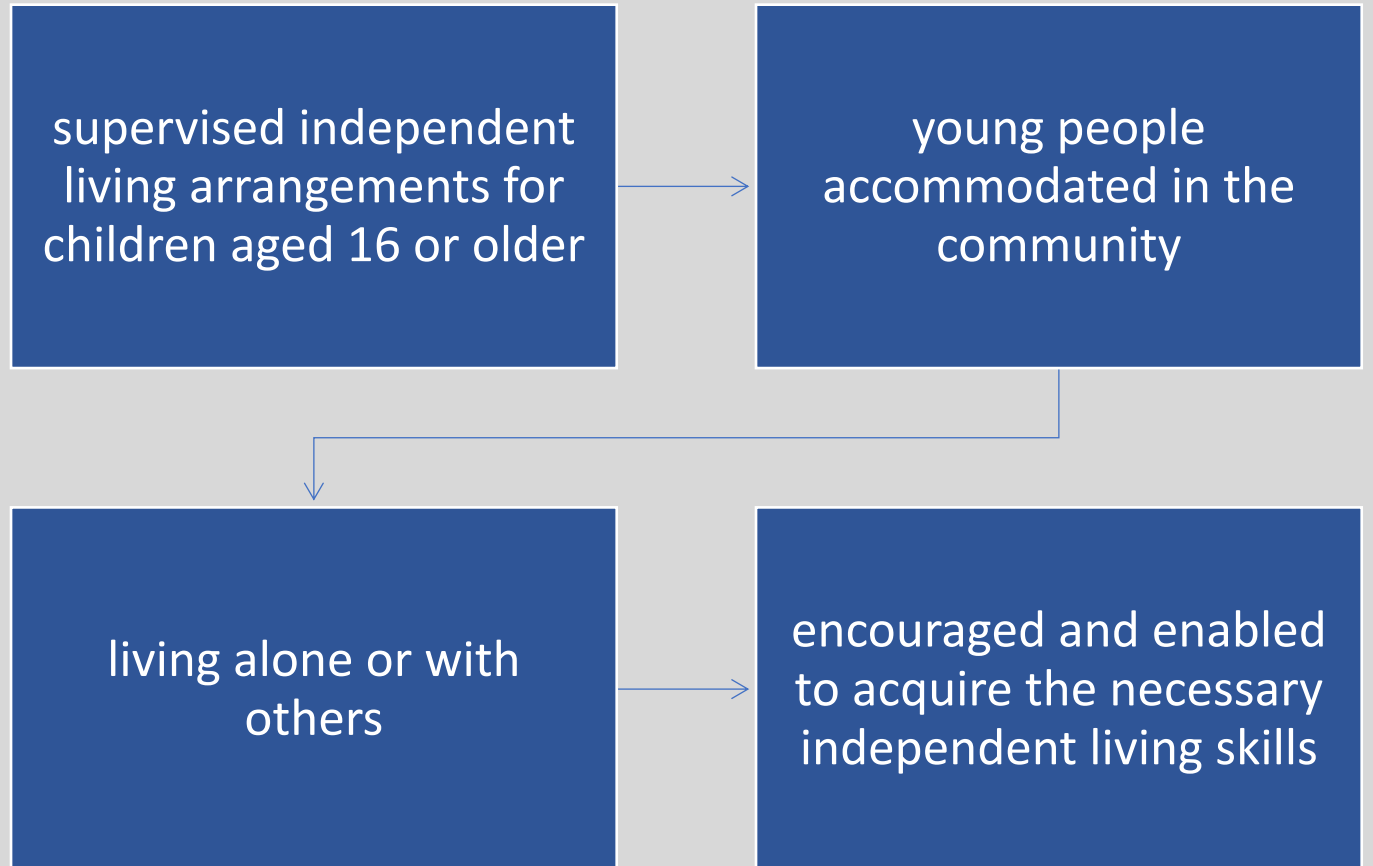
Independent Living for PwD and elderly



General comment on Article 19 UN CRPD



Independent Living for children



Cantwell, Nigel (2010) Refining definitions of formal alternative child-care settings: A discussion paper.

1.2 deinstitutionalisation in Europe



60% of EU countries have DI strategies or have at least adopted measures in a broader disability strategy.

Czech Republic → Implemented a DI program for more than 30 of social care homes and developed a range of community-based services with funding from ESF and ERDF

Bulgaria → National DI strategy for children.
2010-2017: children in institutional care from 7,500 to under 1,000.
In 2017, 2,500 foster families caring for more than 2,300 children.



Study visit

Alternative care
for children under
six years old in
Slovakia

1.3 Benefits of developing community-based services



1.4 Domination of institutional care in Greece

Group Discussion



Let's think about the evidence base for institutional care and the settings we are managing/working in.



Let's think about the values, beliefs, and misconceptions that have set up the settings we are managing/working in.

Let's discuss the following questions:



Which are the major obstacles to deinstitutionalization?

Are there inappropriate models of DI which can and will do harm?

2. International and National Legal Frameworks

2.1 UN Convention on the Rights of the Child



IMPORTANT POINT!

Children's rights are Human rights.



UN Convention on the Rights of the Child: (4 main themes)

1. Survival rights
2. Protection rights
3. Development rights
4. Participation rights

<https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>

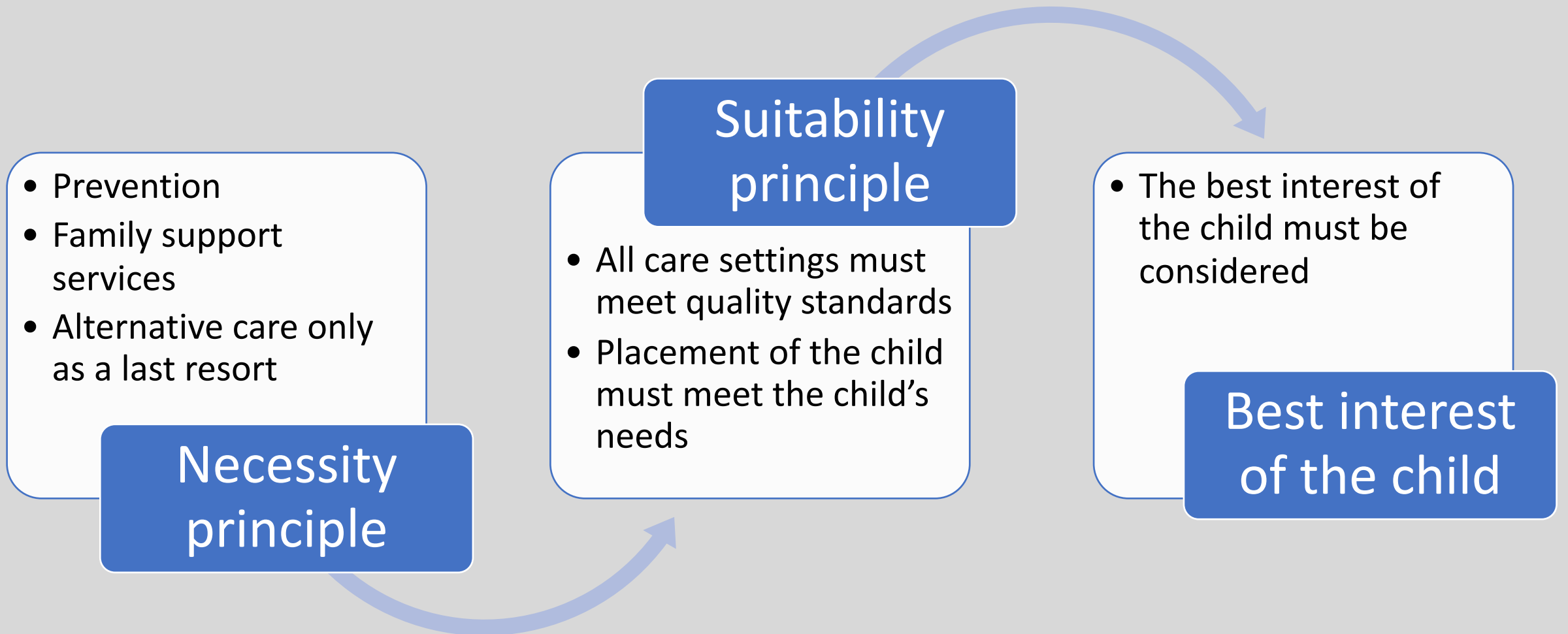
As carers we have an obligation to:

- Know and respect children's rights
- Protect children from possible violations
- Fulfill children's rights

Children with Disabilities:

- full enjoyment of human rights on an equal basis with other children
 - primary consideration the best interests of the child
 - the right to express their views freely
- Art. 7 UN CRPD

UN Guidelines for the Alternative Care of Children



UN Convention on the Rights of Persons with Disabilities



IMPORTANT POINT!

The Convention sets out the legal obligations on States to promote and protect the rights of PwD. It does not create new rights.



Call for:

- Re-sharing existing services
- Developing new ones
- Implementing a holistic and human-rights approach

New model of disability:

- Reacting to changing needs
- Person-centered
- Inclusive
- Participative
- Individualized

Key principles of the Convention

- Respect of inherent dignity
- Self-determination and individual autonomy
- Non-discrimination
- Equality of opportunity
- Full and effective participation and inclusion in the society
- Accessibility

Live Independently and
be included in the
community.

Art. 19 UN CRPD

<https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>

UN Principles of Older Persons



IMPORTANT POINT!

The UN CRPD addresses the needs of persons with disabilities and its principles concern also the needs of elderly with disabilities.



UN Principles: (5 main categories)

1. Independence
2. Participation
3. Care
4. Self-fulfilment
5. Dignity

<https://www.ohchr.org/en/professionalinterest/pages/olderpersons.aspx>



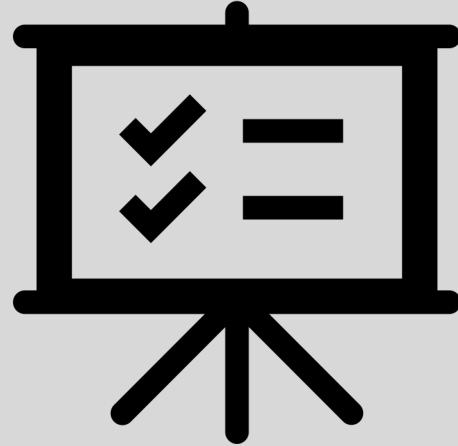
2.2 Greek legal context vs Greek reality- Group Discussion



Let's think about the people in Greece.



- Housing forms with support for the disabled
- Economic parameters
- Specific features
- Problems of legal framework, authorizations, etc.



LEARNING OUTCOME 2

COMPREHEND THE COMMUNITY-BASED LIVING PRINCIPLES

3. Institutional vs Community-Based Living

3.1 Institutional vs Community-Based Living

Institutional living

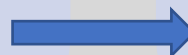
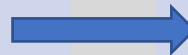
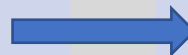
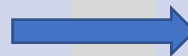
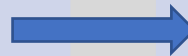
One size fits all

Isolation / social distance

Depersonalization

Rigid routines

Deprivation of autonomy



Community-based living

Spectrum of services

Accessible mainstream services / Specialized services

Inclusion in the community

Person-centred support

Choice and control over one's life

Autonomy / Self-determination

Community-based living for Children

Preventative support services and aid for families
(Benefits, Early Childhood Education Care, Respite Care)

Re-unification of children with their biological families

Kinship care, Foster care (professional, emergency, respite) and Adoption programs

Family-like services for only a few

After care services to youngsters leaving care settings at 18

Group Discussion

3.2 Effects of life in institutions vs Quality of Life in community-based living



Let's each one of us reflect on our childhood and identify how different it is from the childhood of a child raised in an institution.



For a moment let's be in the shoes of an adult in our age living in an institution and identify how his life is different from the life we are leading.



How will the child living in an institution be affected? How will that affect his/her adulthood?
How will an adult with a disability be affected by living in an institution?

3.3 The paradigm shift from a medical to a human-rights/ social model

Object

- From object of charity and social protection
- From seeing disability as a problem which needs medical attention, a problem to cure
- From dealing with objective needs
- From viewing PwD as passive recipients of services
- From an emphasis on providing medical care



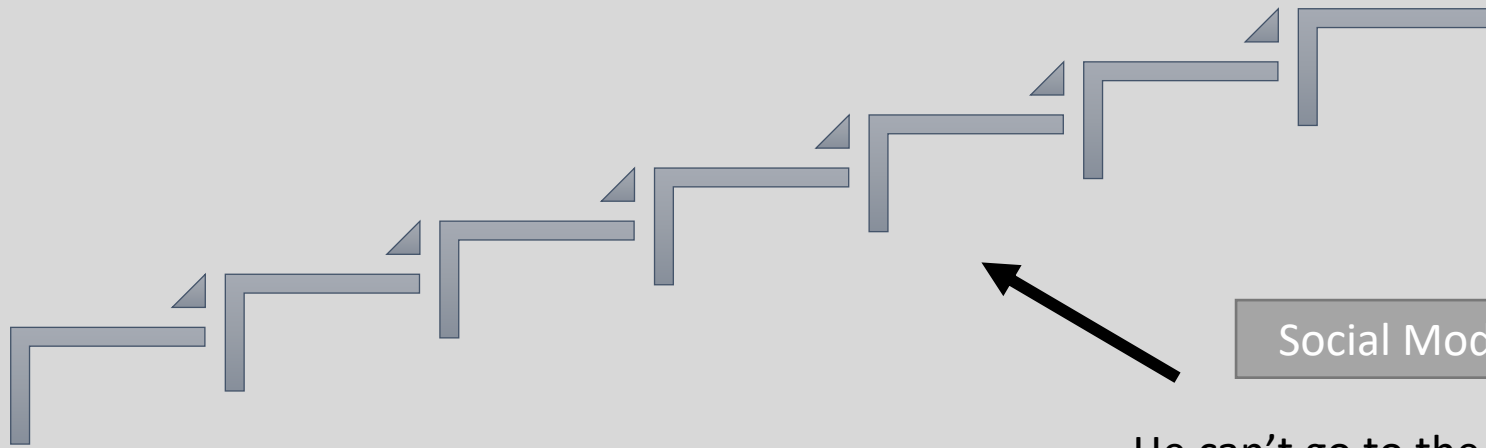
Subject

- To Subject with rights
- To eliminating the barriers created by society or altering the physical environment
- To focusing on enjoyment of rights
- To involving PwD in the decision-making process
- To an emphasis on empowering individuals to make choices, be autonomous and participate equally

<https://www.un.org/>

Medical Model

He can't go to the interview because he is disabled.



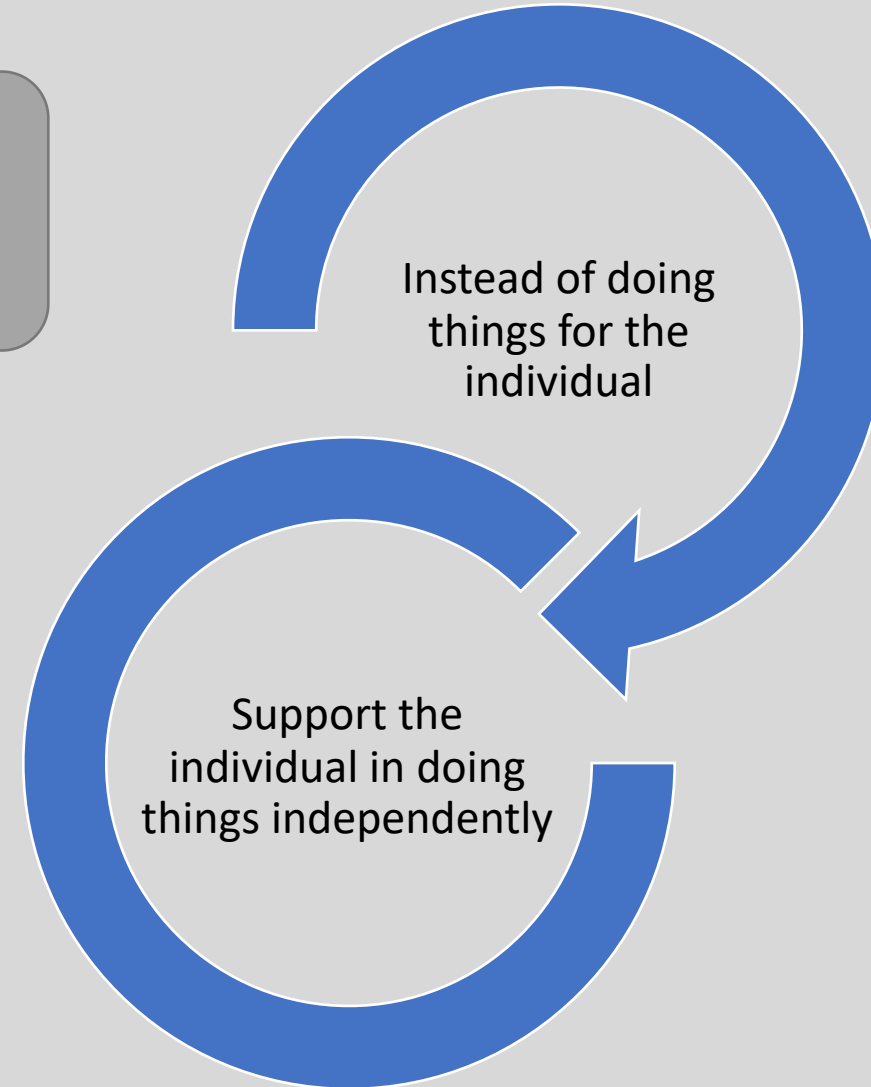
Social Model

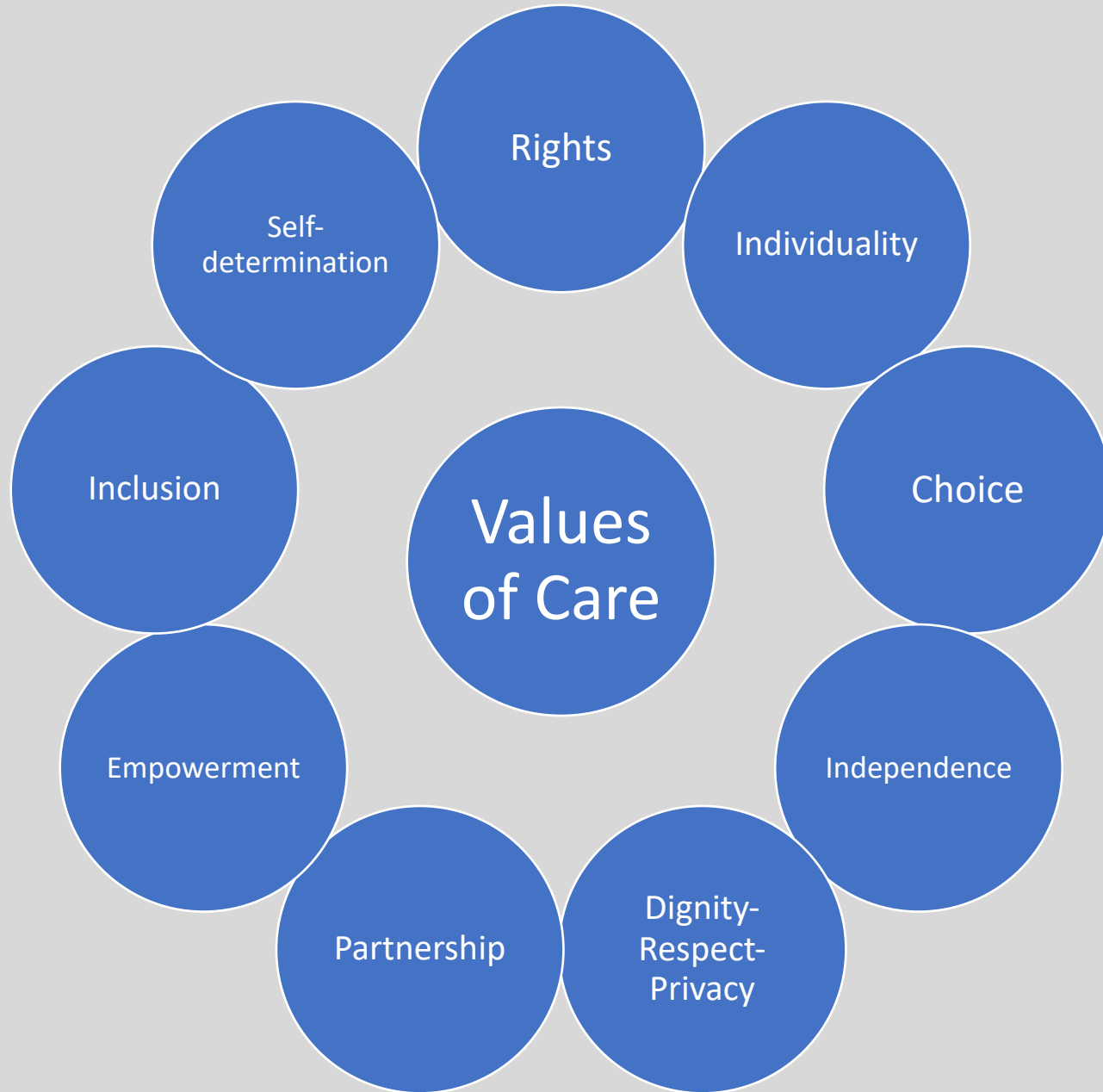
He can't go to the interview because there are stairs.



3.4 Application of the human rights perspective in everyday practice

Shift in mindset







[Social Model Animation](#)

3.5 Promising practices on Community-based living

A model of promising practices on community-based living refers to a setting based in the community which:

- resembles typical life in the community,
- is offering individualized support and inclusion in the society,
- incorporates the principles of participation, inclusion, non-discrimination, equality, choice, control over life,
- respects the right to receive support adequate to individual needs.

3 examples of promising practices on community based living

- Children (Family support services and foster care – Amalthea, Czech Republic)
- Adults with disabilities (Supported living flats - Petagma Association, Greece)
- Elderly (Help at home program - Local Government, Greece)

References

- Cantwell, Nigel (2010) *Refining definitions of formal alternative child-care settings: A discussion paper*.
- Cantwell, N.; Davidson, J.; Elsley, S.; Milligan, I.; Quinn, N. (2012). *Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'*. UK: Centre for Excellence for Looked After Children in Scotland.
<https://www.alternativecareguidelines.org/Portals/46/Moving-forward/Moving-Forward-implementing-the-guidelines-for-web1.pdf>
- European Care Certificate <https://www.eccertificate.eu/>
- European Expert Group on the Transition from Institutional to Community-based Care (2012) *Common European Guidelines on the Transition from Institutional to Community-based Care*, <https://deinstitutionalisationdotcom.files.wordpress.com/2017/07/guidelines-final-english.pdf>
- United Nations (2006) *Convention on the Rights of Persons with Disabilities*, <https://www.un.org/development/desa/disabilities/convention-on-the-rights-of-persons-with-disabilities.html>
- United Nations General Assembly (1989) *Convention on the Rights of the Child* <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>
- United Nations General Assembly (1991) *Principles for Older Persons* <https://www.ohchr.org/en/professionalinterest/pages/olderpersons.aspx>



IMPROVING SERVICES
IMPROVING LIVES

TRAINING FOR MANAGERS & DIRECTORS

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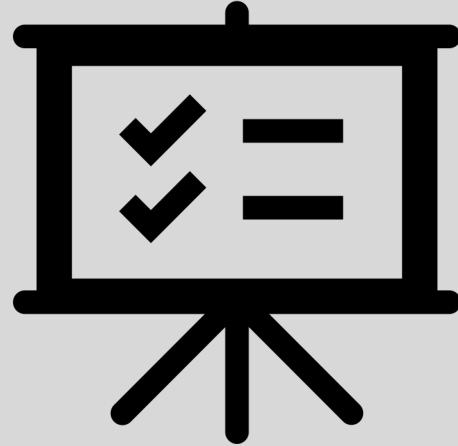
This activity is funded by the European Union via the Structural Reform Support Programme and implemented in cooperation with the European Commission

Module II

The way forward. Transition to community-based services

By the end of this module you will:

Understand	the key principles of person-centred planning
Adapt	to person-centred approaches and encourage supported decision-making
Recall	the Basic European Social Care Learning Outcomes
Know	how to establish a clear plan and time frame for the transition

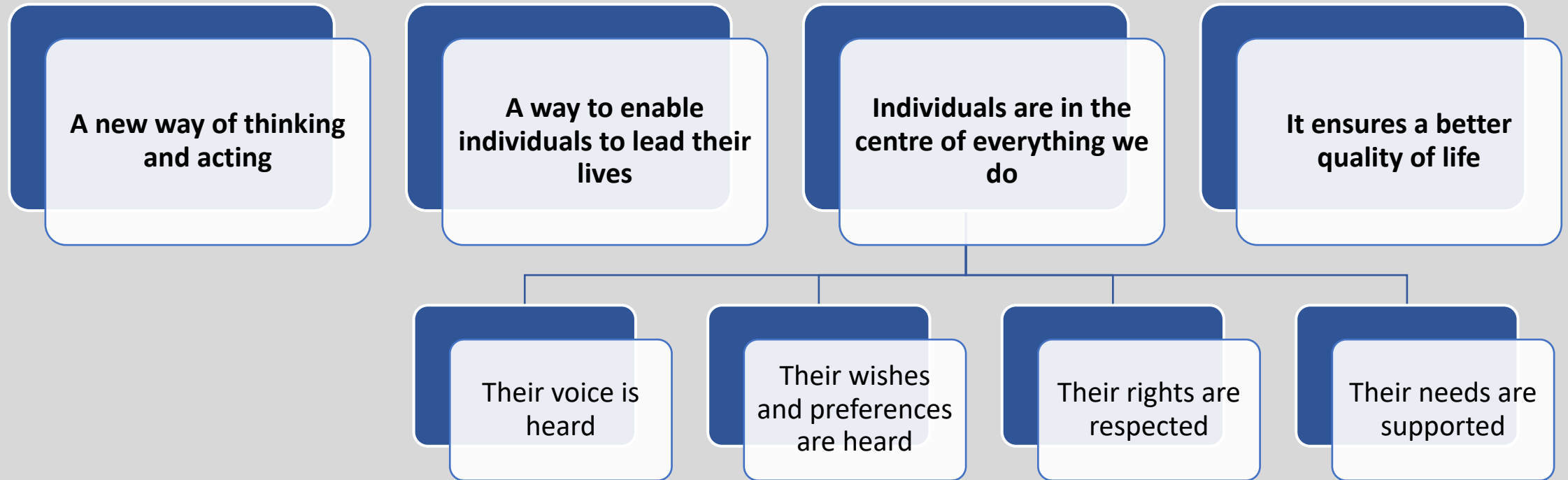


LEARNING OUTCOME 3

ADOPT A HUMAN RIGHTS-BASED APPROACH TO CARE AND SUPPORT BASED ON
A SHIFT OF POWER FROM SERVICES TO INDIVIDUALS

4. Human Rights-Based Approaches

4.1 Person-centred planning



Person-centred



THINKING



PLANNING



ACTING

Person-centred planning is:

A set of approaches
designed:

to assist individuals to plan
their life and supports

to discover how they want to
live their lives and what is
most important to them

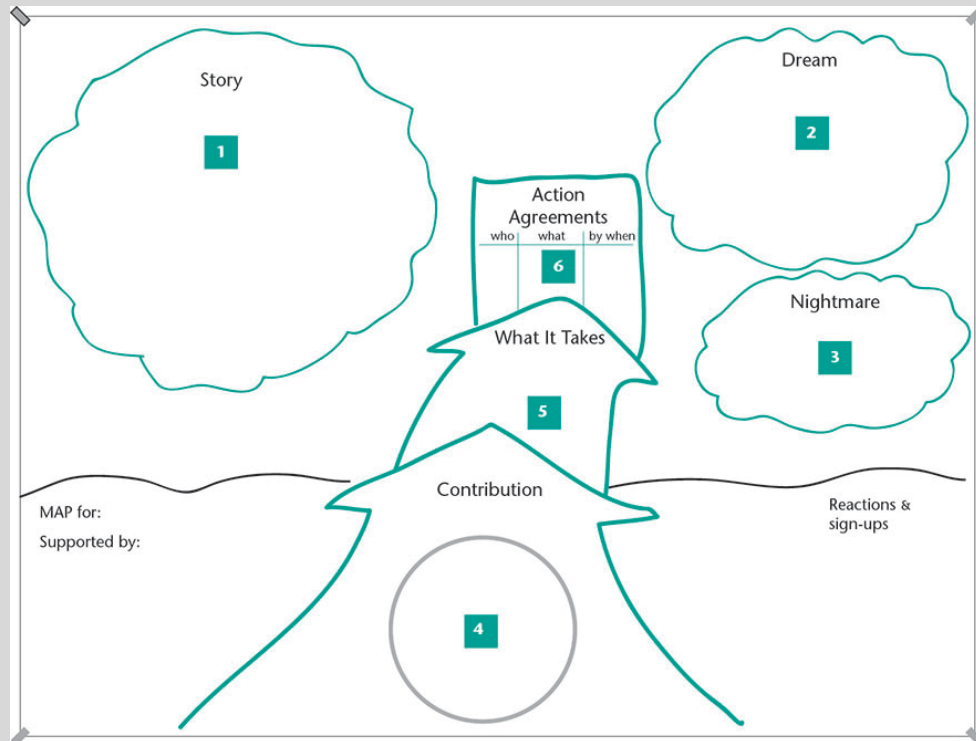
to identify the supports
required

to support them on making
their dreams come true.



4.1.1 Person-centred toolkit

MAPS *Making Action Plans*

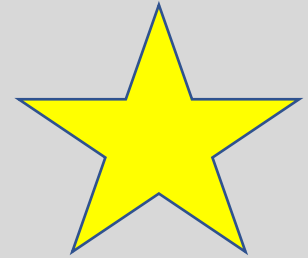
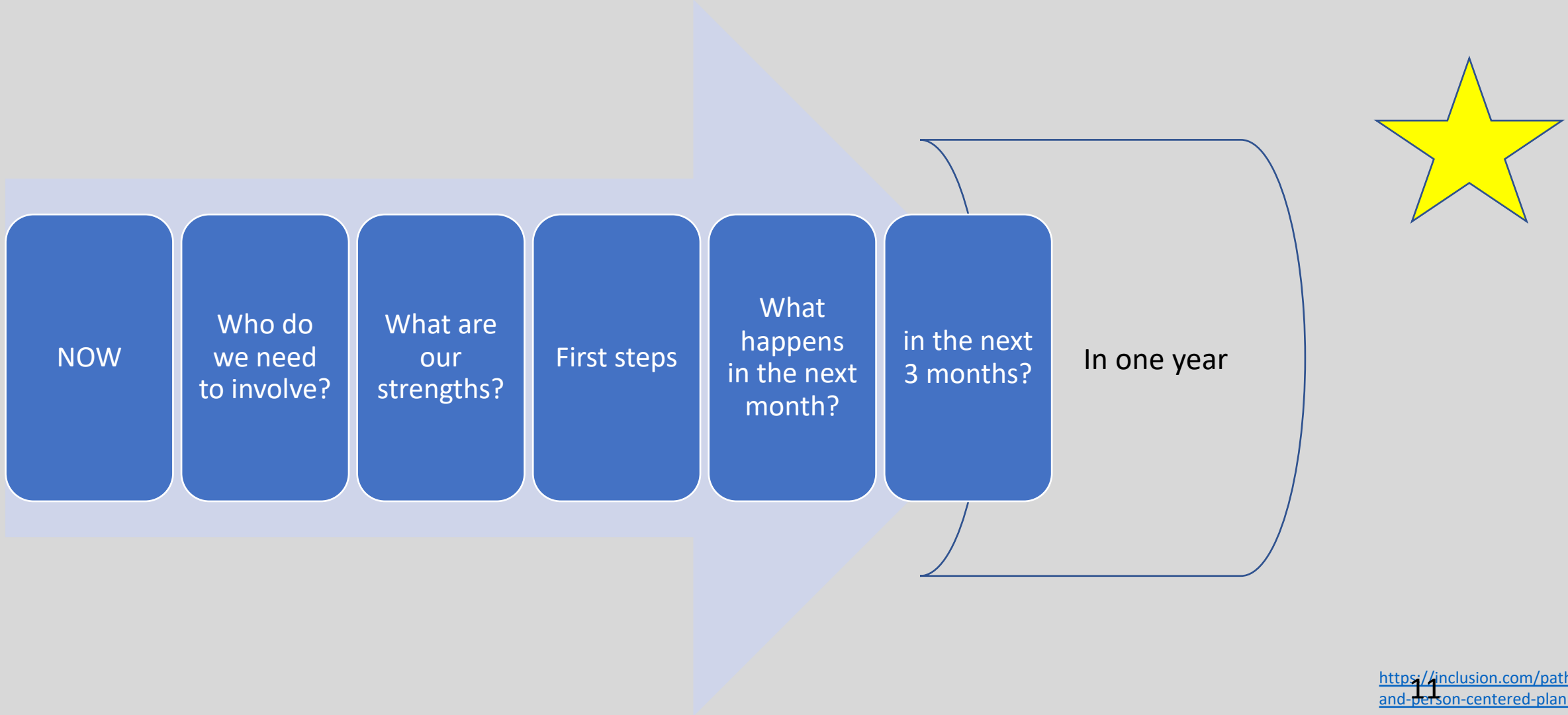


1. What's my history?
2. What are my dreams?
3. What are my nightmares?
4. Who is this person? (Strengths)
5. What does the person need?
6. Action Plan (who/ what/ by when?)

https://inclusion.com/path-maps-and-person-centered-planning/maps_planning/

PATH

Planning Alternative Tomorrows with Hope



Good Day 	Bad Day 

What will It take to have more good days and less bad days?



Important to:

*what makes us happy/
fulfilled*

Important for:

*what is important
for our health and safety*

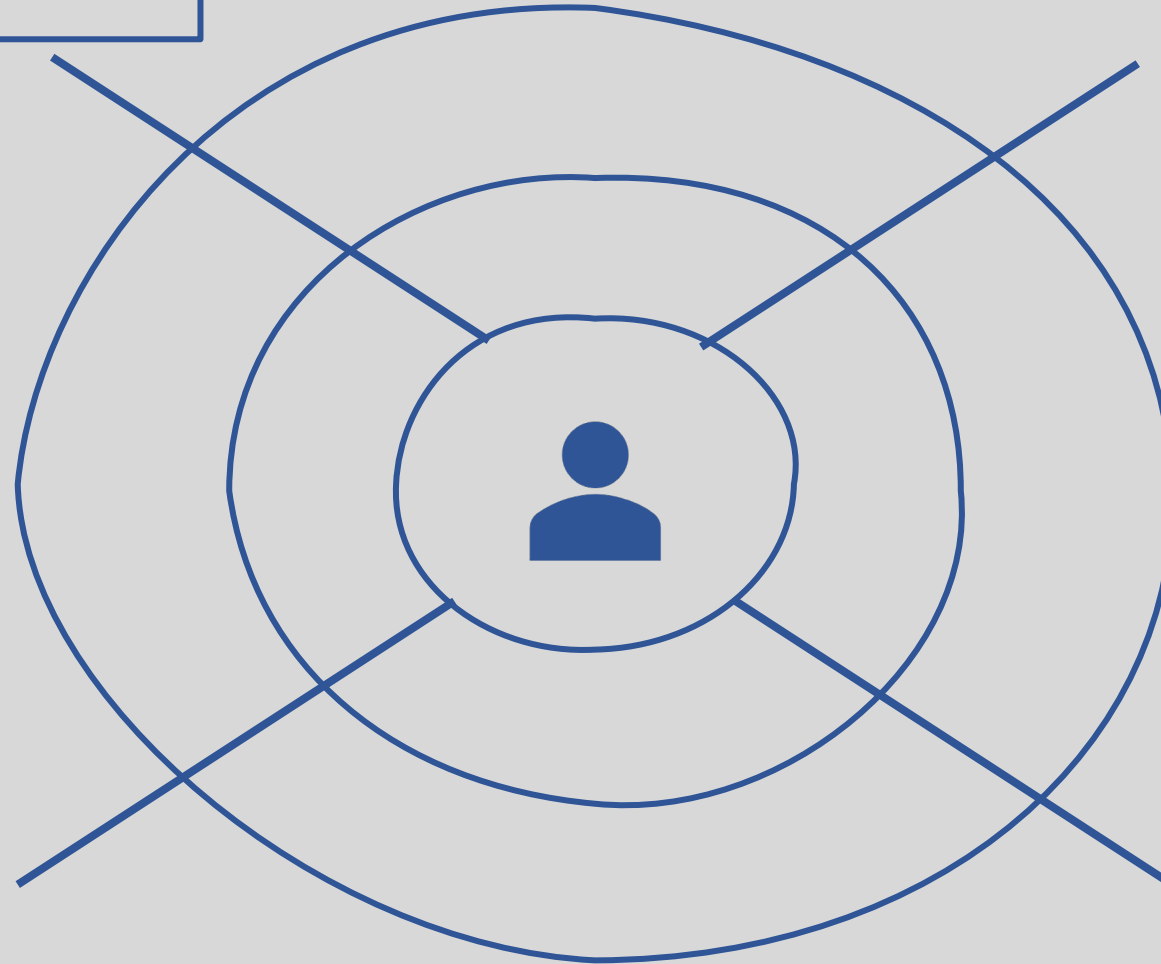


The relationship
circle

Family

Work/ Day services/
School

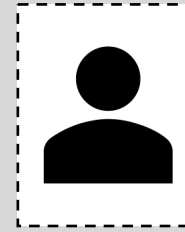
Home and other paid
supporters



Friends and other
nonpaid relationships

My One-Page Profile

Your Name Here
Age and Occupation



What people appreciate about me

Empty text box for writing what people appreciate about me.

What is important to me

Empty text box for writing what is important to me.

How to support me

Empty text box for writing how to support me.



4.2.5 Person-centred for children

The same PCP tools may be used for children

Children are in the centre of planning

- They are supported to express their views, feelings and wishes
- They know that they are heard
- They develop good relations with the social care workers
- The social care workers get to know the children they work with better

Helps children and their families to reach meaningful outcomes

4.3 Family-centred approach



An approach which acknowledge the centrality of the family and focuses on the strengths and capabilities of the family.



Trivette, Dunst, 2005

Families & their members are respected and treated with dignity at all times

Professionals are sensitive and responsive to family's cultural, ethnic and socio-economic diversity

Families are involved, make choices and decisions at all levels in the intervention process

Professionals share information that the families need to make fully informed choices in a sensitive, complete and undistorted way

The family's needs, preferences and priorities are the focus of intervention practice

Support, services and resources are offered in a sensitive, responsive and individualized manner

Informal, community and formal supports and resources are used for achieving the family's outcomes

Professionals build on strong points the child's skills and interests, as well as those of the parents and the family as the main paths to strengthen the family functions

A collaborative partnership is formed between professionals and families based on mutual trust and respect and shared problem-solving process

Professionals use help-giving support and strengthen the functioning of the family

Eurlyaid, 2019, p.71-72

4.4 Supported decision-making

A way to support individuals in making decisions

Shift from guardians to supporters



May also be introduced to persons under legal guardianship

Strengthens self-determination, control over one's life, autonomy

Encourages independence

Making decisions for the individual vs supporting the individual in making decisions

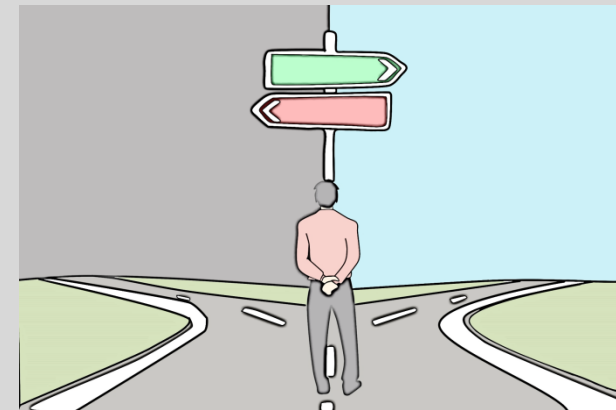
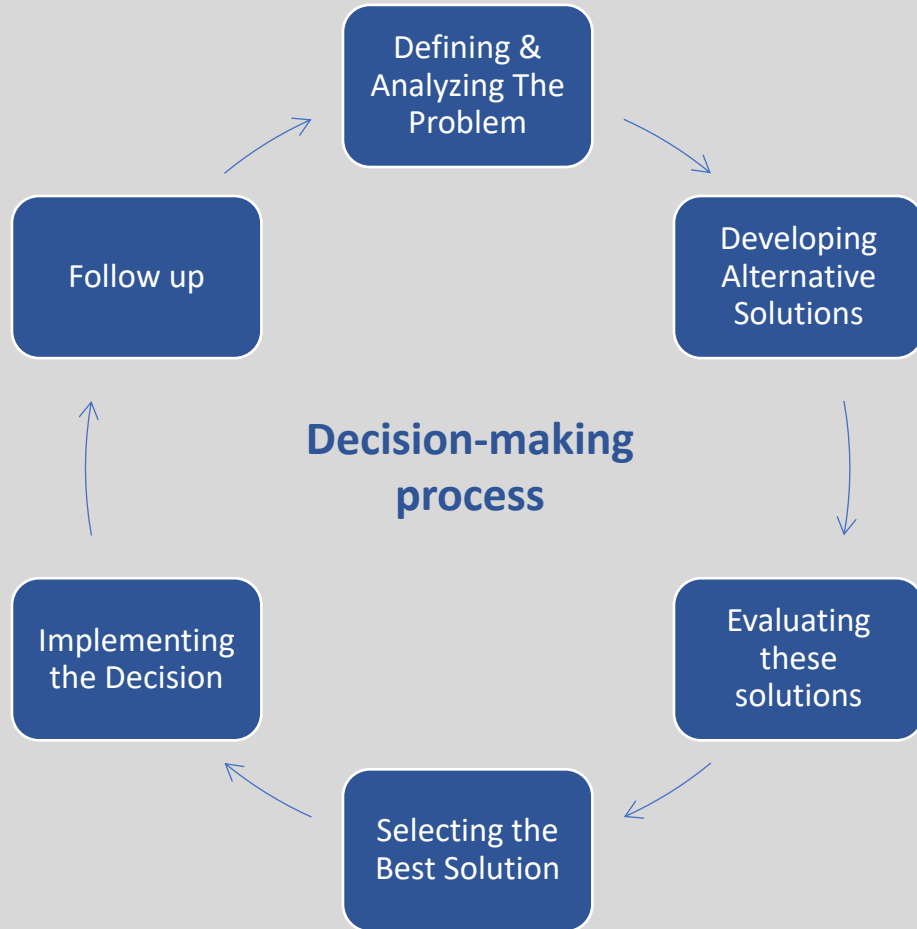


Image by [waldryano](#) from [Pixabay](#)



A supporter should:

- Be well informed of the different options available for every issue
- Provide the individual with all the needed information
- Provide the individual with choices, if needed
- Describe to the individuals the pros and cons of every choice/ decision
- Support the individual in making a decision
- Support in the Implementation of this decision

SDM tools

Decision-making profile

How I like to get information?	How to present choices to me?	Ways you can help me understand	When is the best time for me to make decisions?	When is a bad time for me to make a decision?
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- Examples:
 - I like to get information visually
 - Present choices to me with drawings or pictures
- Individuals are better supported
- Information are given to them in an easy to understand format
- Individuals make better decisions
- Social care workers know how and when to support the individuals in making decisions

<http://helensandersonassociates.co.uk/>




Supported Decision-Making Agreement

For these reasons:

- I agree the following person will be my Supporter: _____

- I want to allow my Supporter to help me with decisions about e.g.:

How to manage my money 

In particular, I want:

-This agreement supports an individual with a disability to identify the people who will supporting him in making decisions.

-In this document the individual may choose the “supporter”, the person who will support him in making decisions and the “facilitator”, the person who will ensure that the agreement is roking anf the individual is getting the support he needs.

-The individual can describe the things where he needs support in making decisions.

This document is an example of a Supported Decision-making agreement of the I-DECIDE Methodology. I-DECIDE is an Erasmus+ EU-funded project (2017-2020).

4.4.2 Apply SDM in everyday practice



Split into groups of 5 people



Think of how you can apply supported decision-making in your everyday practice



Present your examples to the rest of the groups

4.5 The right of individuals to take risks

“ **IMPORTANT POINT!**
Decisions may involve risks! ”

? Do we lead lives
which do not
involve any risks?



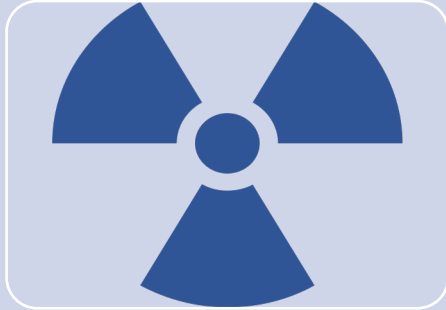
Which are the risk
levels of decisions?

Evaluating decisions



Low risk

- Choose my style (Hair, Clothes,...)
- Choose the time to go to sleep
- Choose a consummated relationship with my partner
- Decide to have a pet
- Decide what to do with my personal budget



Medium risk

- Decide where to live
- Decide where to work or study
- Staying out at night with friends
- Use of social media
- Financial management (salary, pay the bills)
- Get a driver's license

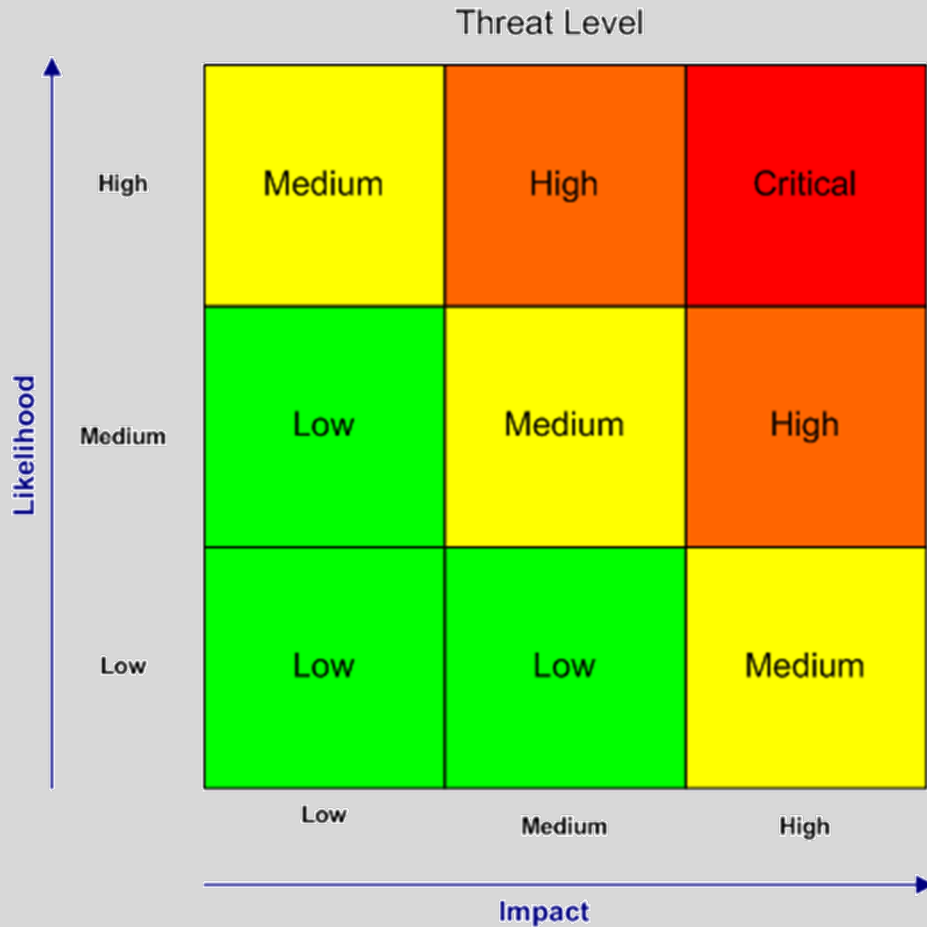


High risk

- Promiscuity
- Leaving care at 18 with no support
- Taking or refusing to take medication
- Refusing the support I need to live independently

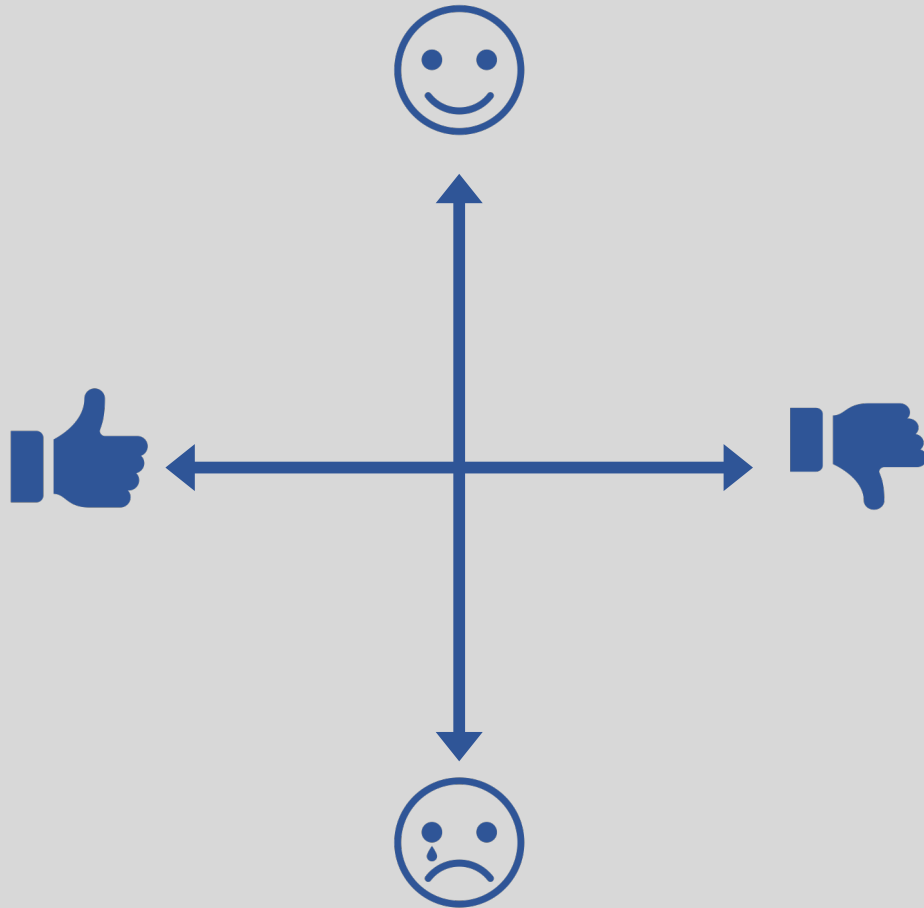
There are different risk levels of decisions

Evaluating the risk



1. **Identify** the hazard
 - a. Who is presenting a risk to safety?
 - b. Whose safety is at risk?
 - c. What is the nature of the risk?
2. **Assess** the risk
 - a. What is the degree of risk?
3. **Evaluate** how the risk could be eliminated, reduced, mitigated or accepted
4. **Decide and manage** the situation
5. **Review and measure** the situation or the impact

Evaluating choices



If the choice produces happiness to the person and it doesn't have any risks, it is the thing to do.



If the choice gives happiness to the person, but includes some risks, then it may be good to try out, but you may think how to minimize the risks.



If the choice causes harm/fear to the person and it includes risks, it is good to forget it and not to consider it at all.



If the choice causes harm/fear to the person, but it doesn't include any risks, you can talk about the choice with the person and explore why they are afraid to do it.

Balancing rights while working with children

Every child may freely express his/ her views, in all matters affecting him/ her, and those views should be given due weight, according to the child's age and maturity.
Art.19 UN Convention on the Rights of the Child

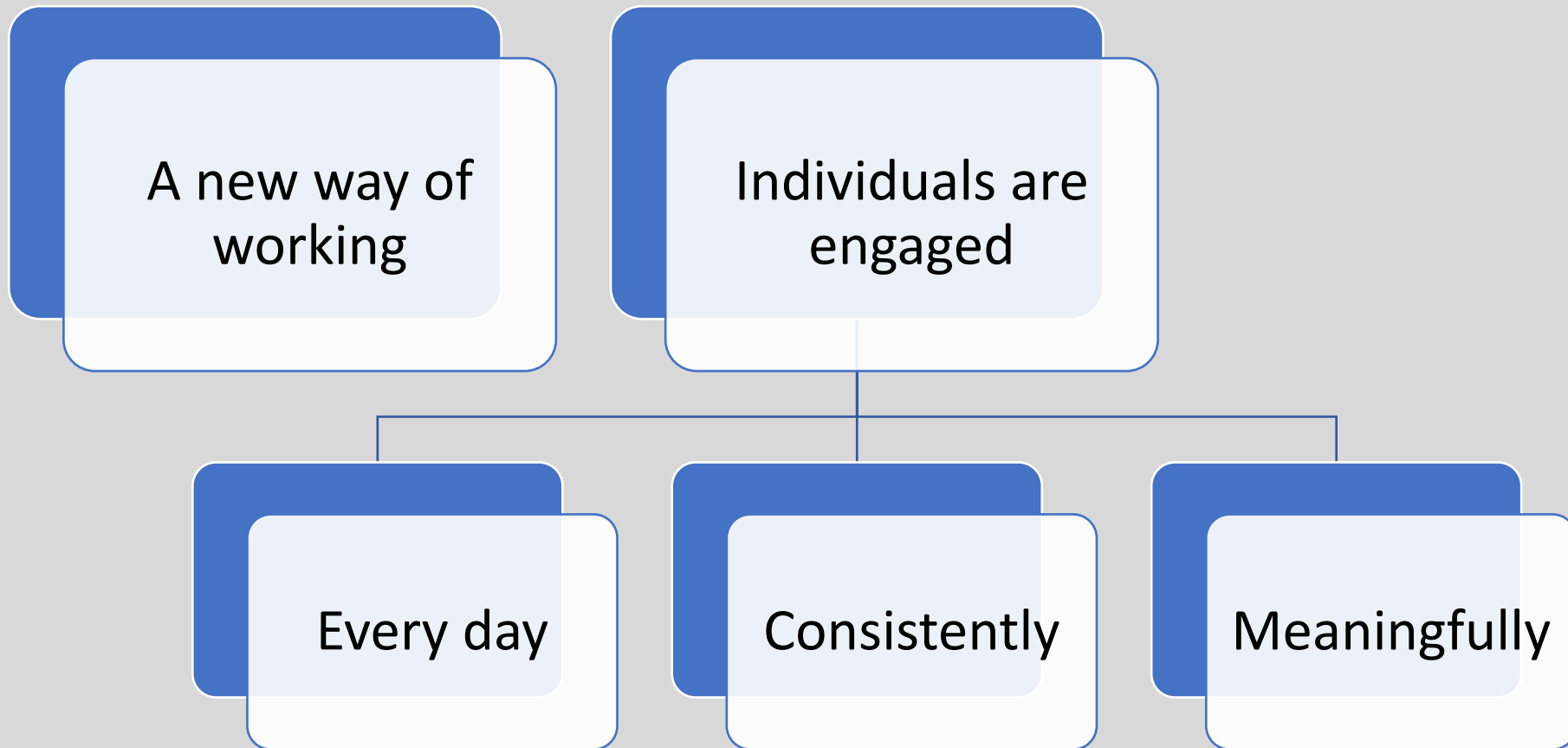


Sometimes we need to prioritize certain rights without neglecting others completely.

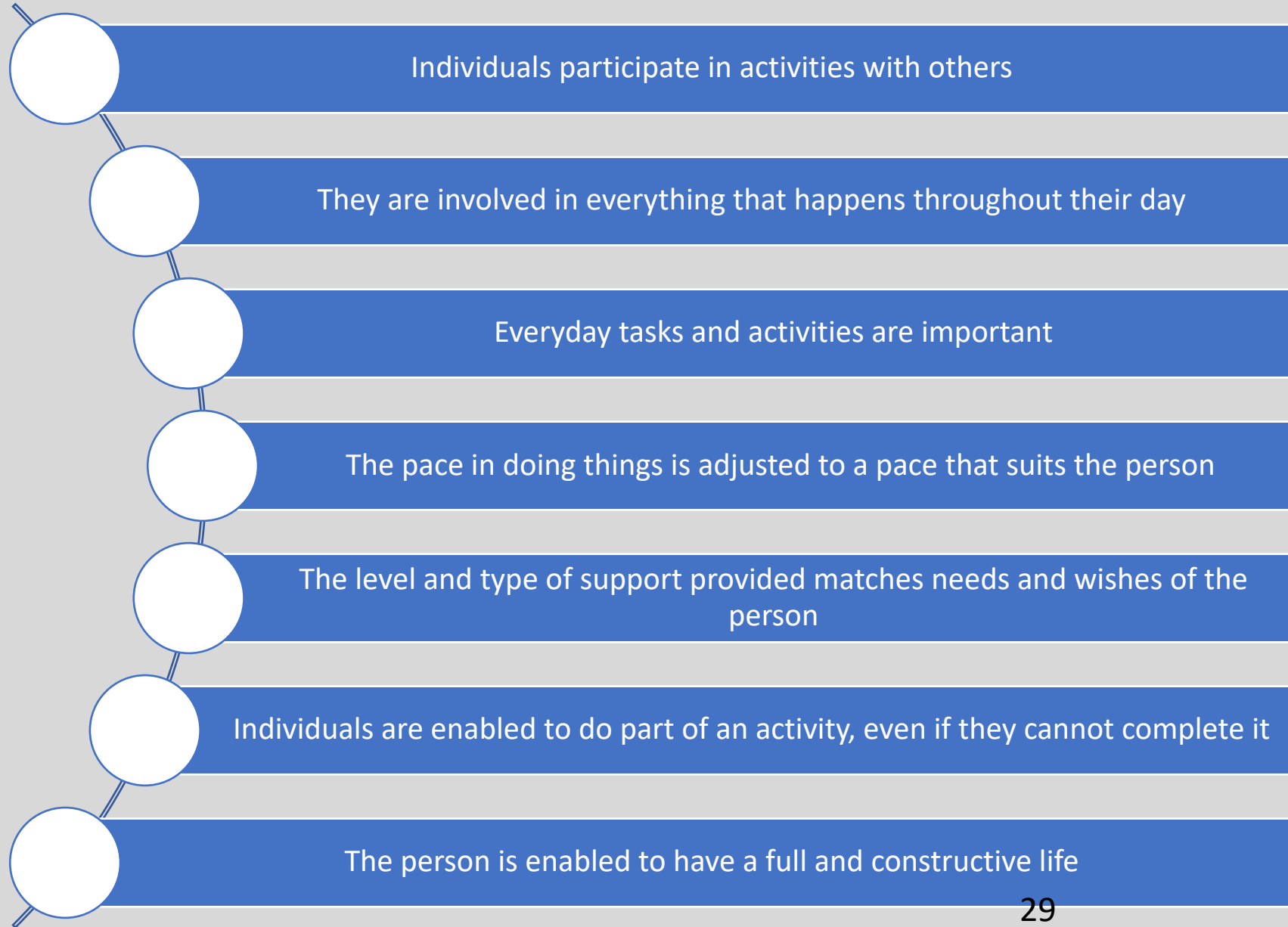


Such as absolute rights, which cannot be limited or in-fringed under any circumstances.

4.6 Active Support



Basics of Active Support



Strategies



TASK ANALYSIS



BACKWARD CHAINING



GRADED ASSISTANCE

4.8 Guidelines on how to support individuals in community-based care systems

The person has moved from the institution to a family or a community based service. A **person centred plan** should be developed focusing on the context of his/her new home:

- Planning builds upon the individual's strengths and capacity to engage in community activities
- Honouring the individual's preferences: individuals in charge of their lives & main decision makers about the outcomes they want to achieve
- Continuity: elements of "Transition to community plan" could be transferred to the new setting
- Evaluation and monitoring based on the quality of life in the new environment

5. Basic European Social Care Learning Outcomes

Basic European Social Care Learning outcomes

The values of social care

Promote life quality for the individuals you support

Working with risk

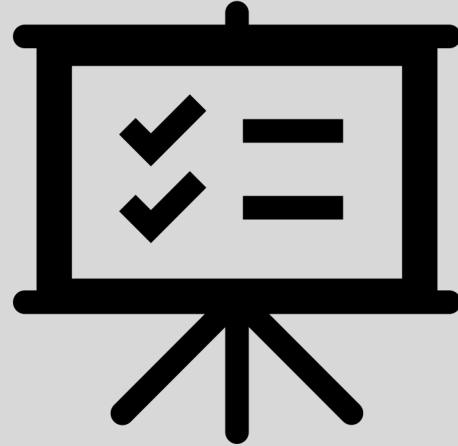
Understand your role as a care worker

Safety at work

Communicating positively

Recognise and respond to abuse and neglect

Develop as a worker.



LEARNING OUTCOME 4

UNDERSTAND THE TRANSITION PROCESS FROM INSTITUTIONS TO COMMUNITY-BASED CARE

6. deinstitutionalisation in Greece

The way forward

DI strategy for Greece

- **Target groups:** children, disabled adults and the elderly.
- Build framework of social care support systems to **create the conditions for all individuals to participate to society:**
 - allowing them to enjoy their fundamental rights
 - empowering them
 - promoting their active contribution as full citizens with equal rights

The way forward

Objectives of DI Strategy

- **Revision of legislation** of social care and support systems
- **Equip Greek state** with the instruments to pursue reforms
- Build a solid support system that can **prevent institutionalisation**
- Support individuals currently living in institutional settings to **move out and relocate** in community-based living settings

The way forward

Methodology:

- 1. Analysis of the situation**
 - Legal systems
 - Social care and support systems
- 2. Mapping of relevant stakeholders**
 - Local organisations
 - Policy makers and stakeholders
- 3. Identification of main issues:**
 - Civil society reports
 - Consultations, workshops and meetings
- 4. Drafting of DI Strategy**
- 5. Drafting of DI Action Plan**

The way forward

Index of DI Strategy

- **Chapter 1:** the case for DI / international legal frameworks
- **Chapter 2:** values and principles, terms, procedures and vision
- **Chapter 3:** strategic objectives for children (including children with disabilities)
- **Chapter 4:** strategic objectives for persons with disabilities
- **Chapter 5:** strategic objectives for elderly persons

6.1 Action Plan

It has a 5 years time frame (2021 – 2026) and describes how the DI Strategy will be implemented including:

- strategic objectives
- Tasks (what we need to do to achieve the objective)
- Indicators (measures showing how we will identify our success)
- Time Frame (when we need to complete the tasks, including mid-term evaluation dates and a final date for the completion of each task)
- Overall Responsible Authority and other involved stakeholders
- Financial resources allocated

6.1 Action Plan

Priorities for children and children with disabilities:

- Support services to strengthen and empower families and all children
- Alternative care measures to provide all children without parental care with family-like environment
- Closure of all institutional care settings: reintegration of all children in their families or transition of children from institutional to family and community-based care settings
- Educational schemes for all children
- Support programmes for all children leaving care and for their after-care support

6.1 Action Plan

Priorities for adults with disabilities:

- Gradual closure of all institutions and resettlement of residents in community-based accommodation
- Develop a range of community-based services
- Prevent institutionalisation
- Develop legal framework unlocking participation in the community

Priorities for the elderly:

- Develop framework programme to address the needs of elderly and related services
- Develop workforce training programmes to better address the changing needs of the elderly

6.2 Transition planning

1

Development of an action plan for the gradual closure of each institution

2

Preparation of individuals for the transition to community-based care

6.2.1 Development of an action plan for each institution

Development of community transition plans

- Strong, committed leadership
- Active engagement of all parties involved from the beginning (users, Staff, families)
- A person centred approach focusing on individual needs and preferences
- Set up of specific working groups
- Training delivery to staff
- Needs assessment protocol for users and staff
- Specific actions in a defined time frame with allocation of human and financial resources

Activity



Split into groups of 5



Think of the individuals you support



Discuss why should we prepare the individuals for the transition?

6.2.2 Preparation of individuals for the transition to community-based care

Why should we prepare individuals?

The institutions is all they know

Life in the real world is very different than the one they know to lead

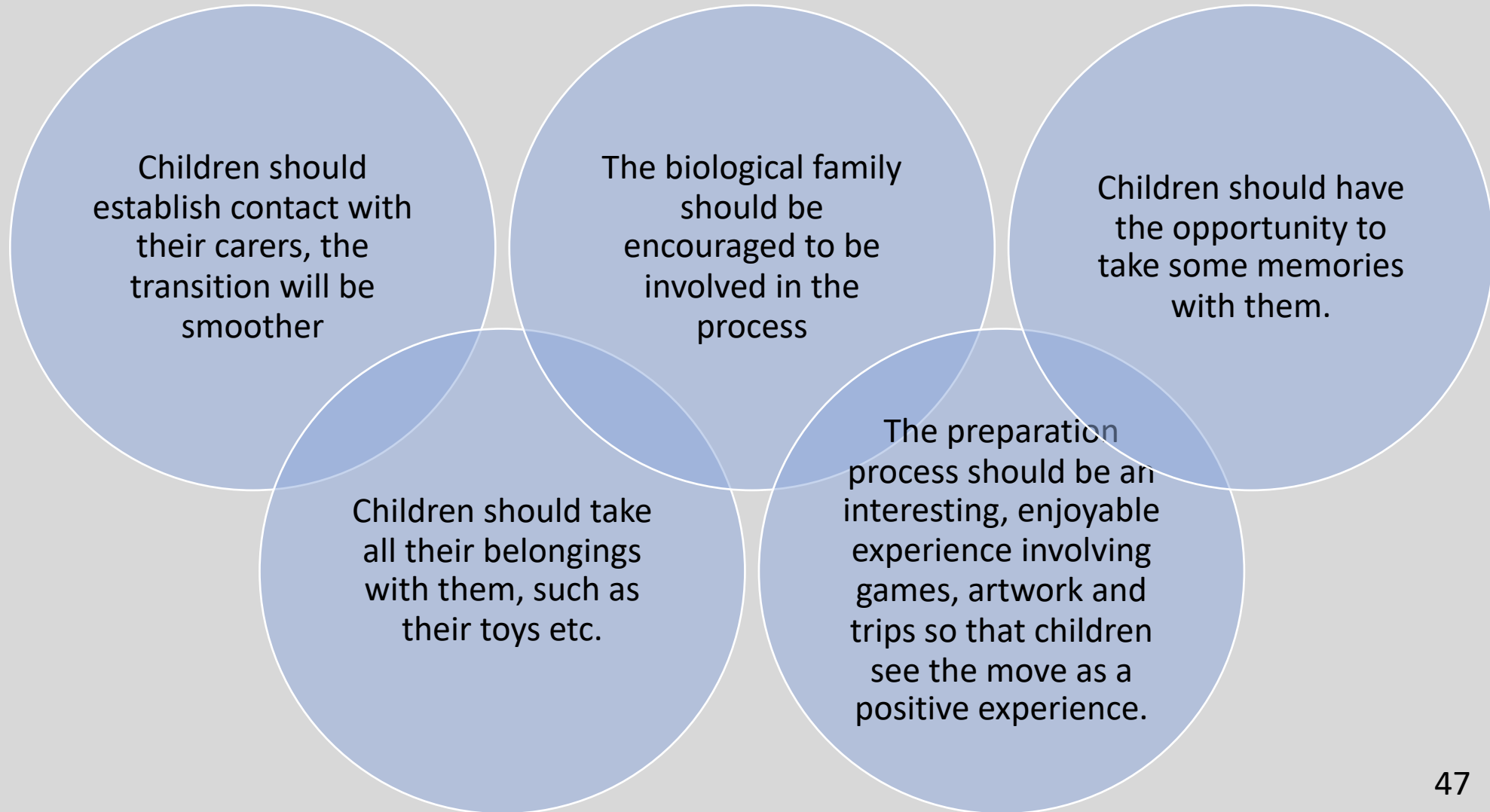
Help build a relationship with their new family or carers and say goodbye to friends and carers in previous placement

Enable a person's wishes and feelings to be included in the planning of the move

Build confidence and self-esteem

Provide them with as much continuity as possible

Common features of the preparation process



Children should visit their new home and the surrounding area before the move.

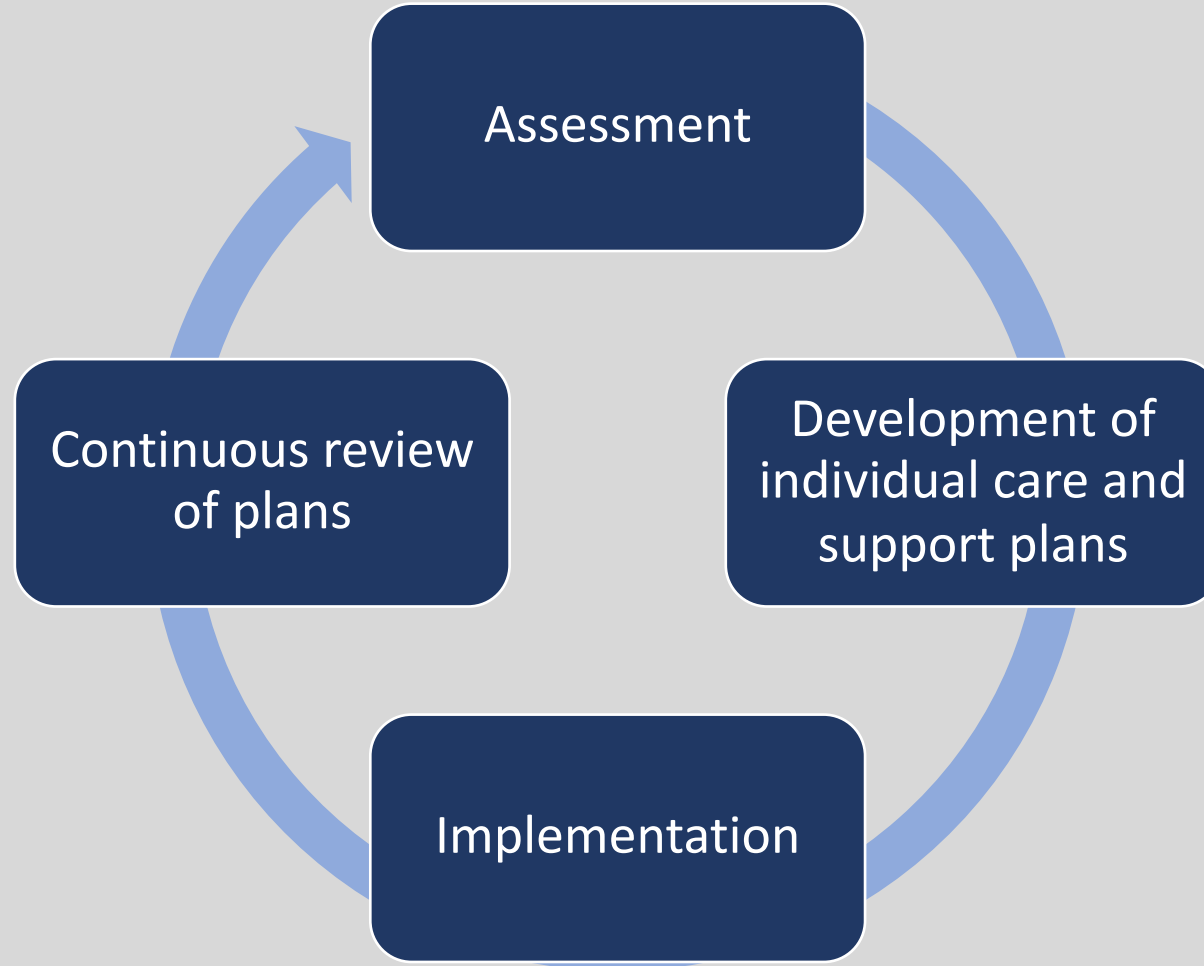
1:1 support to all children to help them understand their new situation and give them the opportunity to express worries ask questions.

Social care workers may give a positive message to the child regarding the new placement.

If people are moving into an independent living home, they should be involved in setting up the new home so that they feel ownership and involvement with it.

A life story book should be created with the children with words, pictures, photos and documents.

Basic elements of the preparation:



Needs Assessment Protocol

Identify the needs
and preferences of
individuals

Linked with the
development of
services

Involvement of users

Meaningful
participation by the
families or advocates
of the users

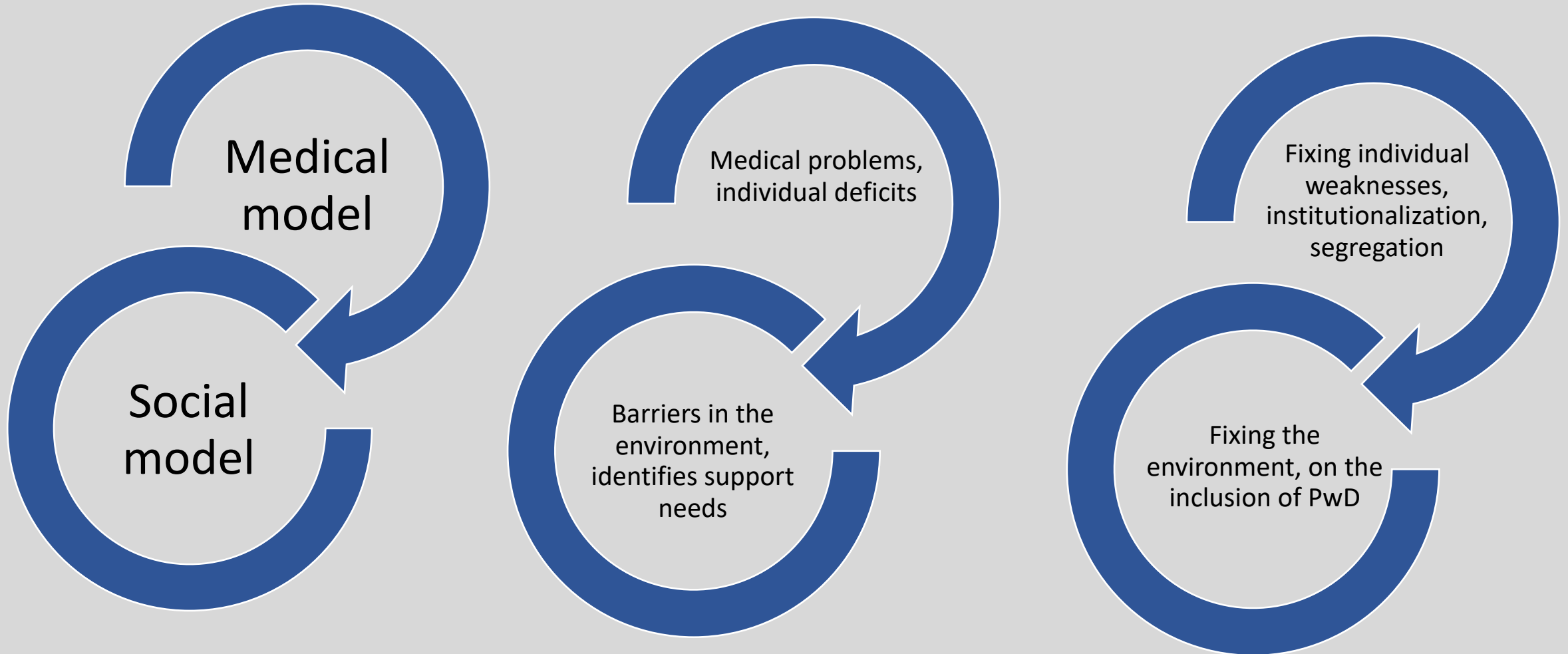
Holistic approach

Consideration of an
individual's strengths
and resources

Model

Assessment

Solutions



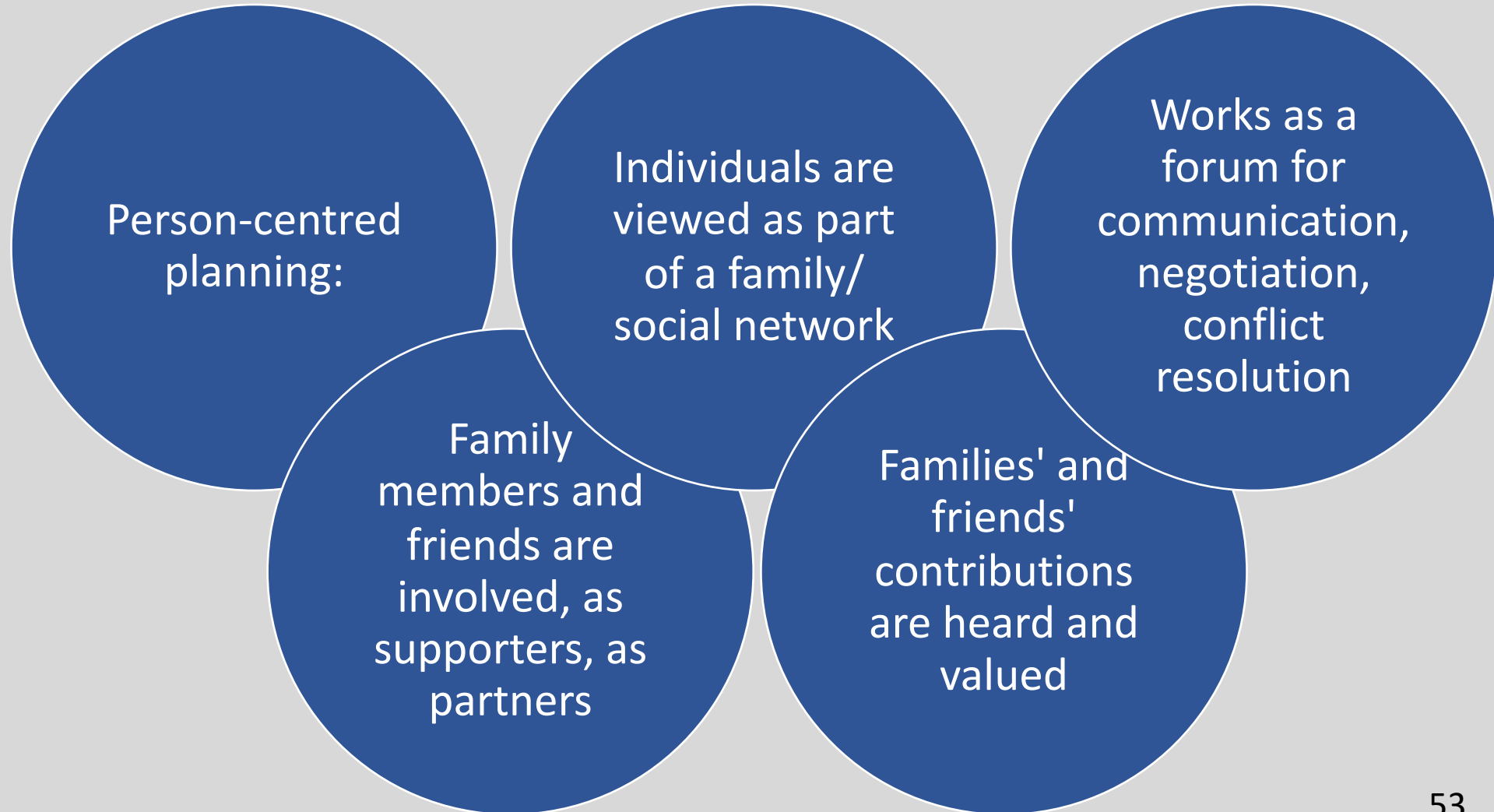
Individualized plan for the transition to the community

Needs
assessment
protocol

Involvement
of individuals

Involvement
of their
families

Involvement of family and social networks



6.2.3 Guidelines on how to support and prepare individuals in institutions on the transition to community-based care system

Elaborate an **individualised transition to community Plan** for each child/adult:

- flexible plans
- meetings

Proper preparation to **minimise trauma** and increase success

Establish **support team** to:

- Search materials / tools to help the understanding of the information
- Support evaluation of options
- Verify that the person has understood the pros / cons
- Facilitate expression
- Record the agreements

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[https://lumos.contentfiles.net/media/documents/document/2019/01/Assesment Guide - Eng.pdf](https://lumos.contentfiles.net/media/documents/document/2019/01/Assesment_Guide_-_Eng.pdf)
- Person-centred tools: <http://helensandersonassociates.co.uk/> and https://inclusion.com/path-maps-and-person-centered-planning/maps_planning/



EASPD

IMPROVING SERVICES
IMPROVING LIVES

TRAINING FOR MANAGERS & DIRECTORS



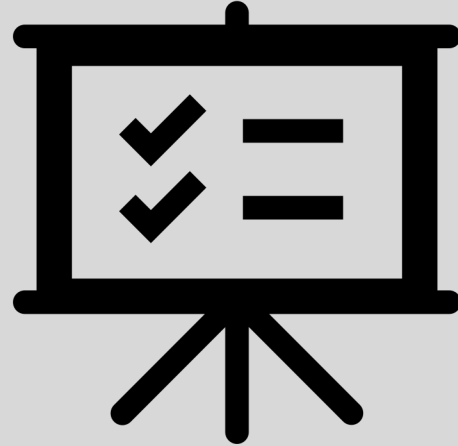
This activity is funded by the European Union via the Structural Reform Support Programme and implemented in cooperation with the European Commission

Module III

A leader of change.

By the end of this module you will:

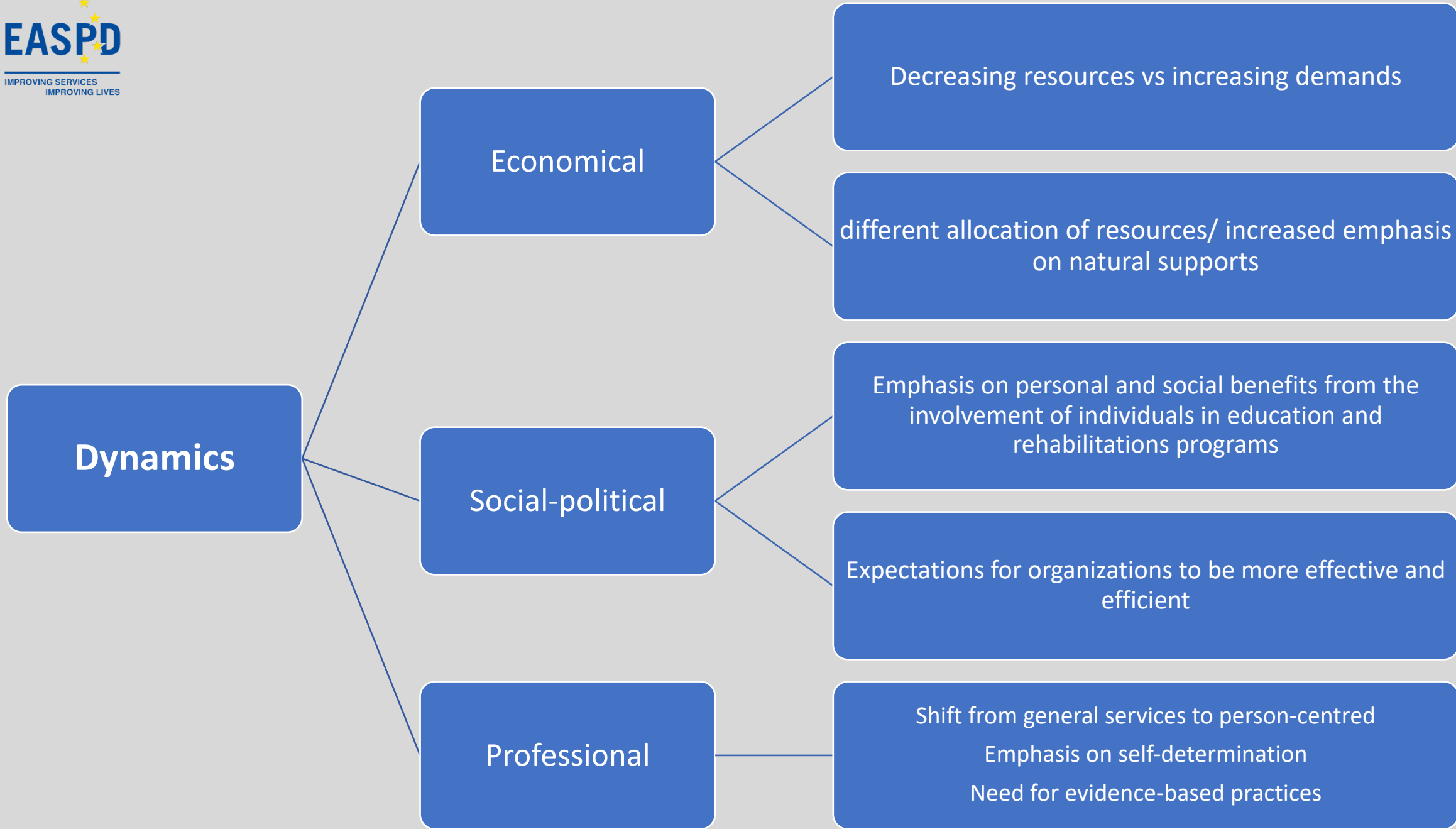
Know	how to monitor the quality of services
Advance	your knowledge in human resources management and change management strategies
Develop	an effective inclusion strategy to lead the change, share the reform process with the relevant stakeholders and manage resistance
Identify	the needs of the staff and support them with retraining, mentoring and on-the-job training
Learn	how to build community capacity initiatives to ensure the inclusion of individuals in the receiving communities



LEARNING OUTCOME 5

IDENTIFY AND RESPOND TO THE NEEDS AND CHALLENGES OF THE NEW SETTINGS

7. Monitoring the quality of services and establishing safeguards



We live in a transformational era focused

on change

creating value through innovation



Characteristic:

The person is
central

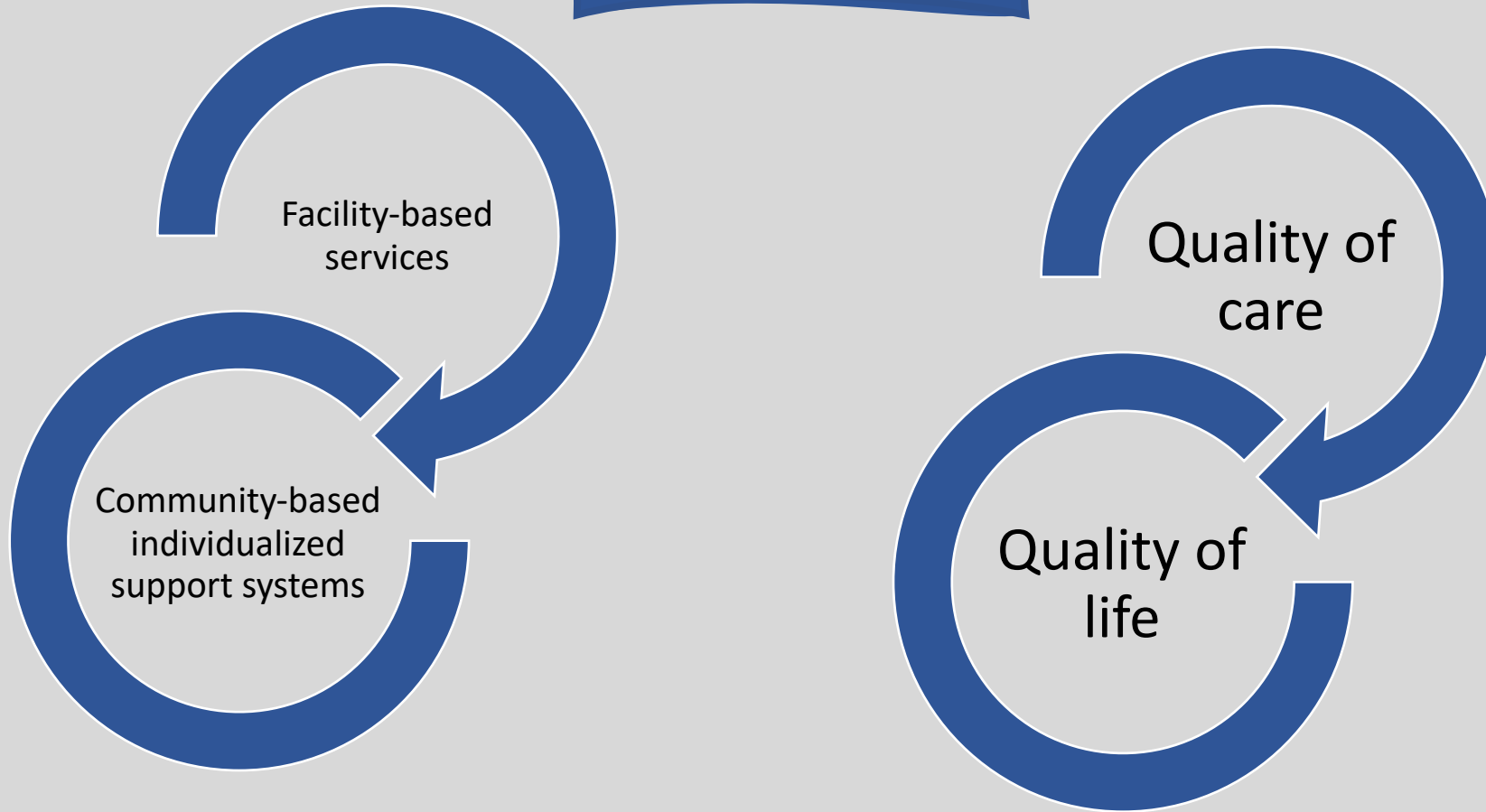
Organizations
are streamlined

Information
systems are
performance-
based

Quality
improvement is
a continuous
process

Participative
leadership

Shift



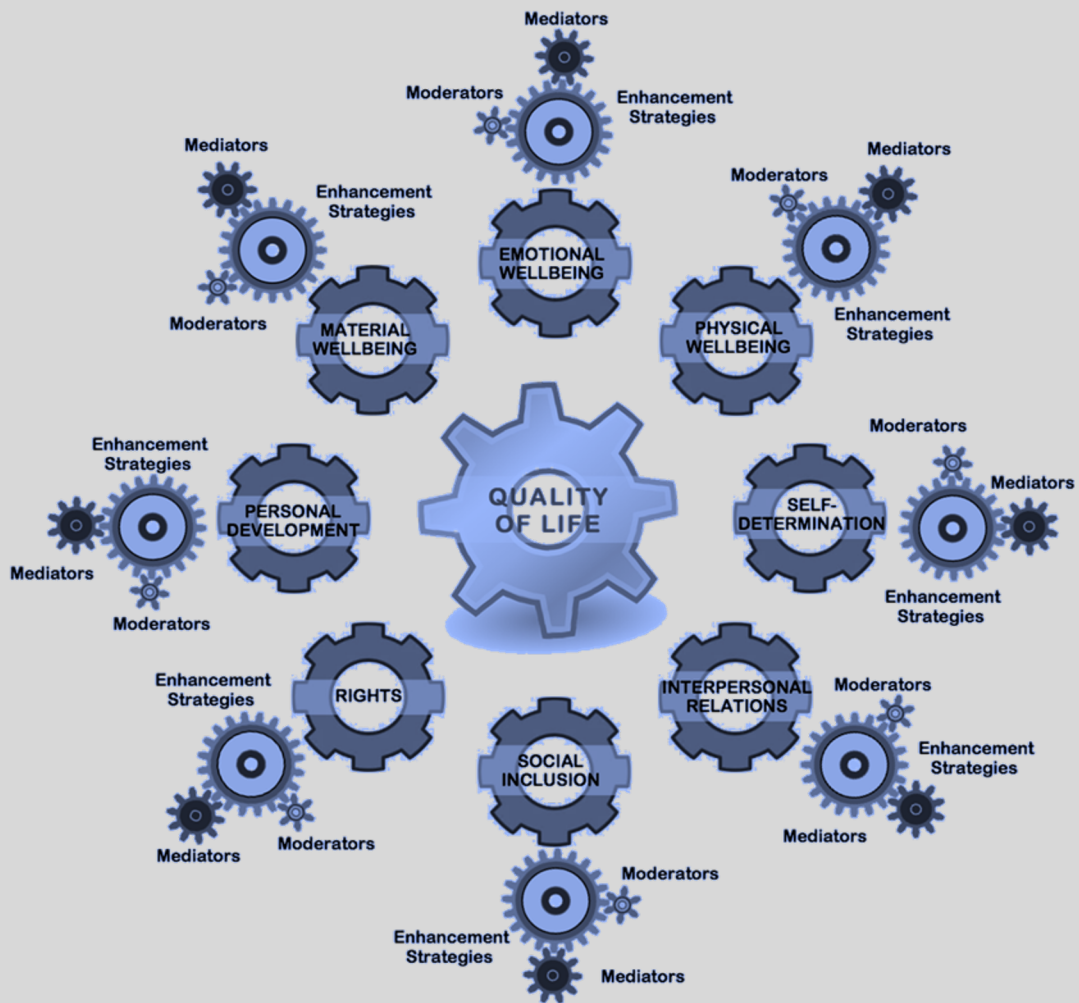
7.1 Quality of Life Model

framework for Person-centred planning

basic principle for service provision policies and practices

model for exploring the impact of individual and environmental factors on the quality of life

Independence	Personal Development	<i>Education, personal competence, performance</i>
	Self-Determination	<i>Autonomy/personal control, goals and personal values, choices</i>
Social Participation	Interpersonal Relations	<i>Interactions, relationships, supports</i>
	Social Inclusion	<i>Community integration and participation, community roles, social support</i>
	Rights	<i>Human (respect, dignity, equality) and legal (citizenship, access)</i>
Well-being	Emotional well-being	<i>Contentment, self-concept, lack of stress</i>
	Physical well-being	<i>Health and health care, activities of daily living, leisure</i>
	Material well-being	<i>Financial status, employment, housing</i>



Moderators

Personal Demographics
gender, race, social economic status, intellectual functioning

Organization Culture
level of personal involvement of the individuals, personal growth opportunities

Family-Unit factors
family income, size of family, family geographical location, family structure, religious preferences

Mediators

Personal status
Residential platform, employment status, health, level of self-determination and subjective well-being

Provider system
services, individualized support

Community Factors
Normative expectations, attitudes, media impact

Quality enhancement strategies

Individual level (Microsystem)	Empowerment	<i>Decision-making, risk taking, self-advocacy, self-management</i>
	Skill development	<i>Functional training, use of technology</i>
	Involvement	<i>Participation, inclusion, knowledge and ability sharing</i>
Organization level (Mesosystem)	Opportunity development	<i>Integrated employment, inclusive education, social networks, community-based options</i>
	Safe and secure environments	<i>Community integration and participation, community roles, social support</i>
	Supports alignment	<i>Align individualized supports to personal goals and assessed support needs</i>
Societal level (Macrosystem)	Accessibility	<i>Ensuring human rights and legal rights</i>
	Attitudes	<i>Knowledge and positive interactions</i>
	Environmental enrichment	<i>Nutrition, cleaner environments, reduced abuse & neglect, adequate housing & income</i>

7.1.1 Quality of Life Assessment tools

INICO-FEAPS
SCALE

SAN MARTIN
SCALE

GENCAT
SCALE

7.2 European Framework for Quality in Social Services

- By the Social Protection Committee
- To provide a common understanding on the quality of social services within the EU
- Reference for defining, assuring, evaluating, improving the quality of social services
- Presents quality principles for social service provision
- Quality principles on the relationships between service providers and users
- On the relationship between service providers, public authorities and other stakeholders and
- On human and physical capital

Quality principles

for social service provision

Availability

Accessibility

Affordability

Person-centred

Comprehensive

Continuous

Outcome-oriented

on the relationships between service providers and users

Respect for user's rights

Include participation and empowerment

On the relationship between service providers, public authorities, other stakeholders

Partnership

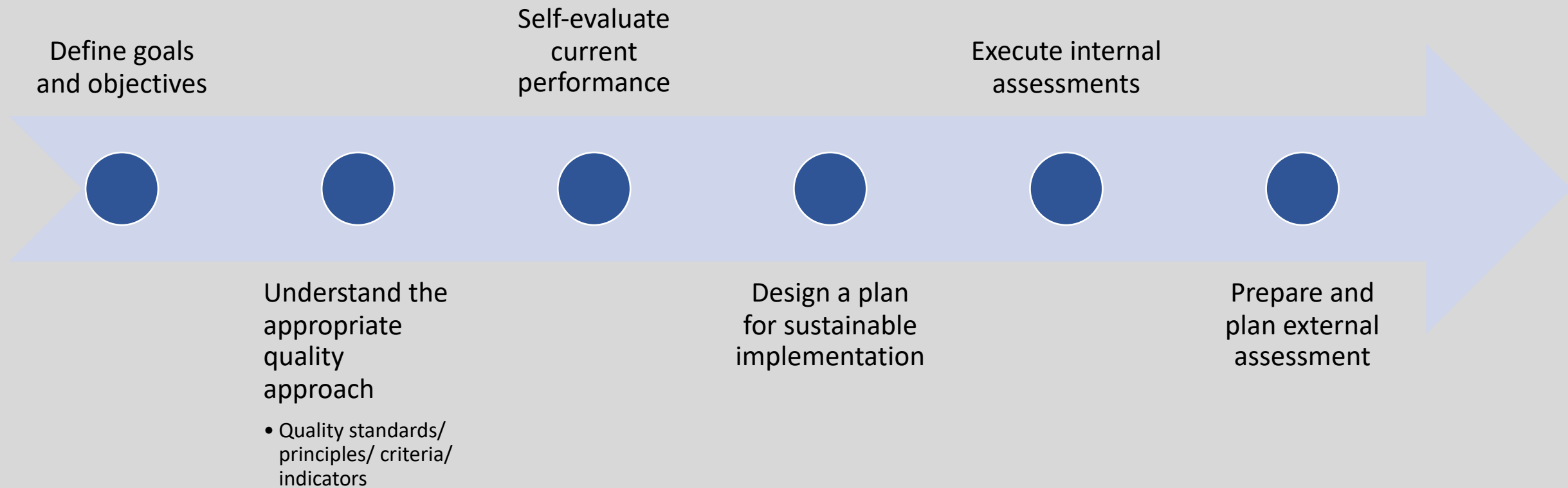
Good governance

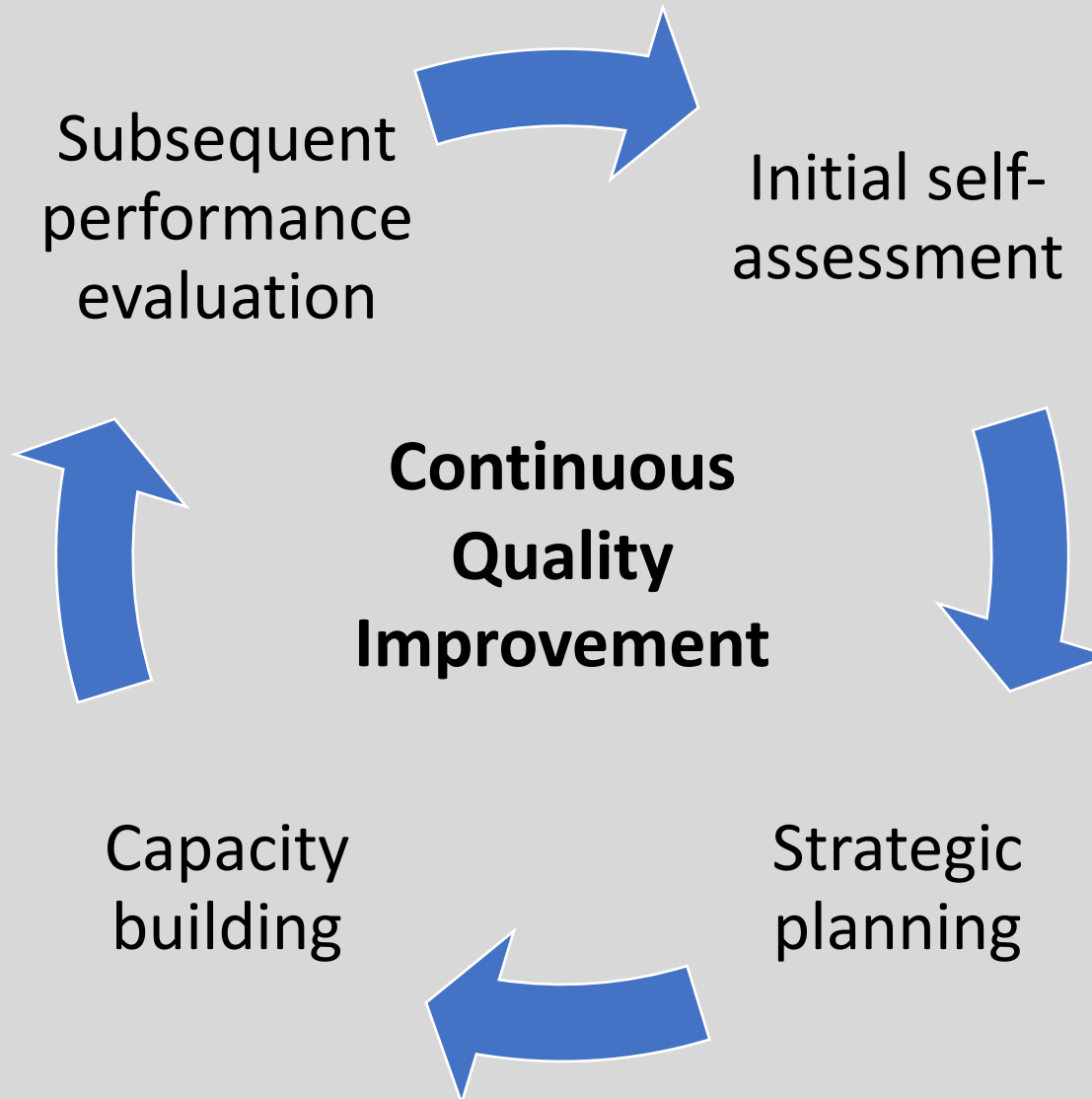
for human and physical capital:

Good working conditions

Adequate physical infrastructure

7.2.1 Implementation at the service provider level





7.3 Organisation Effectiveness and Efficiency Scale (OEES)



4 PERFORMANCE-BASED PERSPECTIVES



20 BEST PRACTICES INDICATORS



AN ASSESSMENT TOOL



A PLANNING FRAMEWORK

4 performance-based perspectives

Customer

- Personal goals
- Support needs
- Individualized supports
- Personal outcomes

Growth

- Program options
- High performance teams
- Direct support staff involvement
- Networks and partnerships

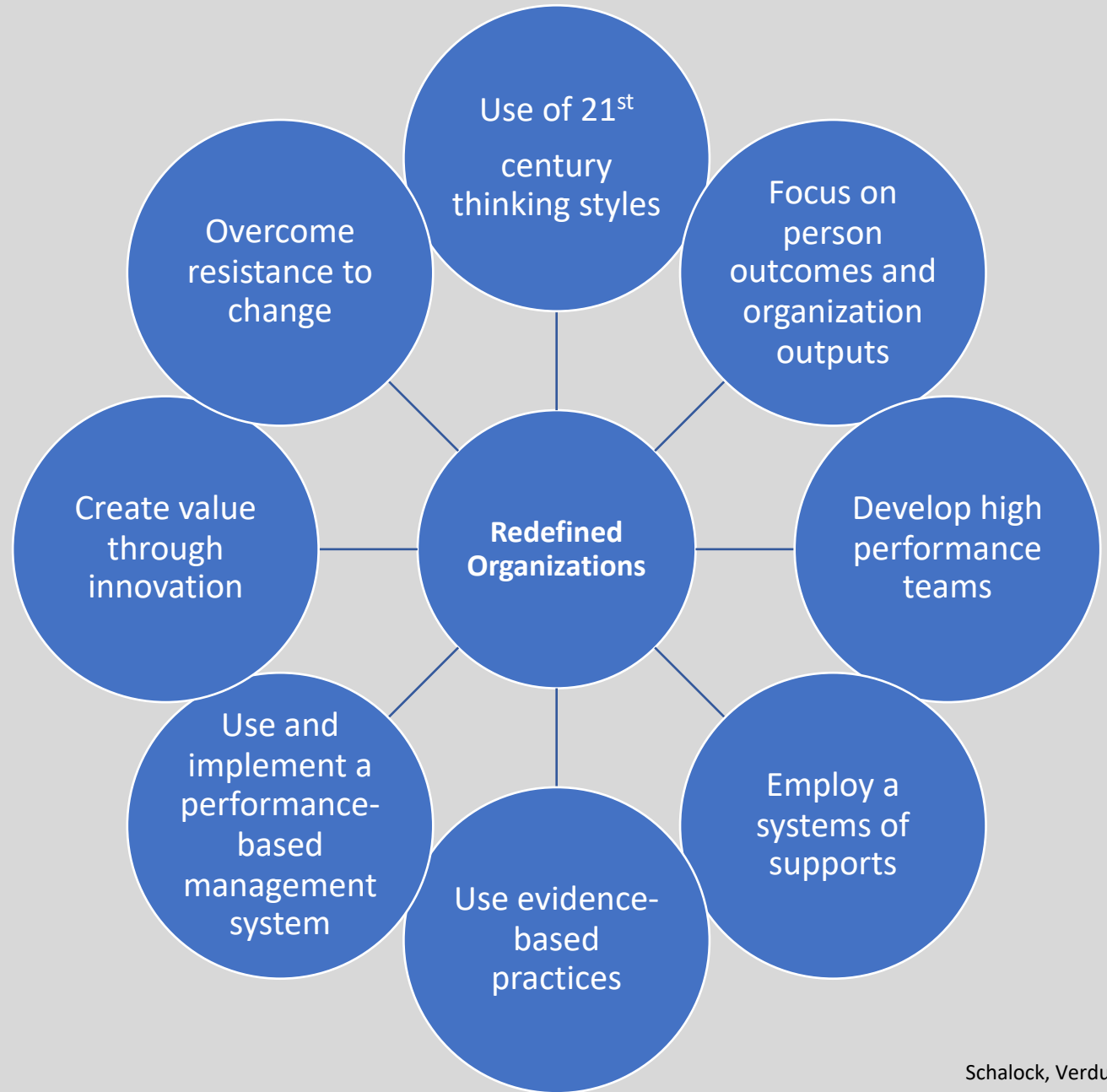
Financial

- Unit costs
- Cost accounting and allocation
- Social capital
- Fixed and variable costs
- Overhead rate
- Resource allocation models

Internal Processes

- Horizontal and vertical alignment of program components
- Mapping system
- Research and evaluation
- Data sets and data collection systems
- Quality improvement activities

7.3 Change management strategies



Schalock, Verdugo 2012

7.4 Safety at work Reflection activity



Are you familiar with the fire evacuation plan of your workplace?



Have your employees been trained in providing basic first aid care?



When was the last time that you did a fire/ earthquake drill?



Image by [succo](#) from [Pixabay](#)



Handle of hazardous materials



Fire safety



Infection control



Moving or handling techniques



Basic first aid



Maintaining security



Missing person protocol



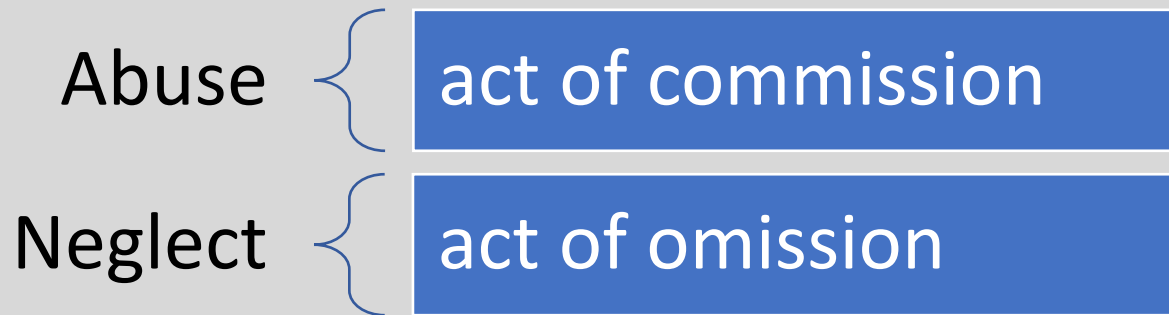
Personal safety and well-being

7.5 Abuse and neglect

“ Abuse is the violation of an individual’s human rights by another person ”



At the root of abuse is the question of the power imbalance between people



Power may be misused by people in paid and non-paid caring roles, such as friends, family members, volunteers, advocates



May happen once or be a reoccurring incident

Types
of
abuse

- Physical
- Sexual
- Emotional/
Psychological
- Financial
- Institutional
- Neglect
- Medication
- Discrimination

Your obligation as a care worker is being able to identify when an abuse is occurring.

Can you suggest the signs and symptoms for each type of abuse/neglect?

Abuse and neglect monitoring mechanisms

“ Familiarize yourself with the procedures outlined in the regulations. ”

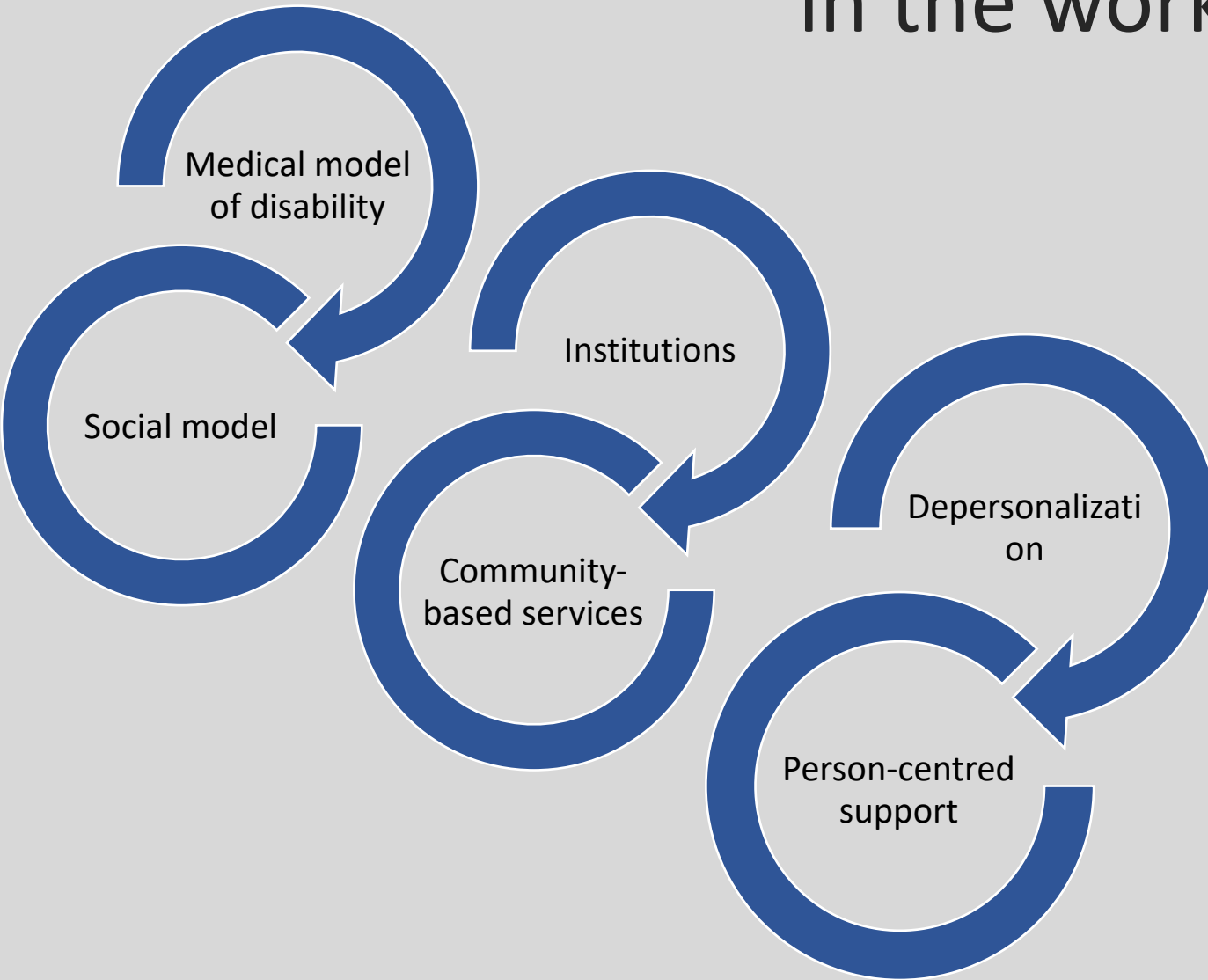
! By using human rights-based approaches you can prevent incidents of abuse from happening



Do you know what should you do if an incident of abuse/ neglect is reported to you?

8. Manager as a mentor

8.1 Assisting in achieving an attitudinal change in the workplace



- Why mentoring?
 - Promote human rights and fundamental freedoms
 - Change attitudes in the workplace based on the UN Conventions
 - Provide tools to social care workers to support individuals based on the social model of disability
 - Support workers in providing person-centred support through explanation, guidance, demonstration
 - Promote the Basic European Social Care Learning Outcomes

8.2 Key values and principles of a mentor

01

Lead by example

02

Be sensitive
empathetic and
respectful
towards your
mentees and
others

03

Be able to
recognize,
support and
develop the
potential in your
mentees

04

Be open, honest,
non-judgmental
and ethical

05

Be self-aware
and able to
question your
beliefs,
assumptions,
values and
understanding

06

Value diversity
without abusing
the power
inherent to the
mentoring role

8.3 Roles and responsibilities of the mentor



Mentor

an experienced person who uses a trusting and positive relationship to help those less experienced to develop their knowledge, understanding and value base in their day to day practice.



Split in groups of 3



What do you think are the roles and responsibilities of a mentor?



Write them in a post-it note

Roles and responsibilities:

01

Enable learning and development

02

Recognize and maximize their potential, help them develop

03

Motivate, encourage, build trust

04

Embed the values of human rights-based approaches and the BESCLO

05

Identify any problems/difficulties in their work and find solutions

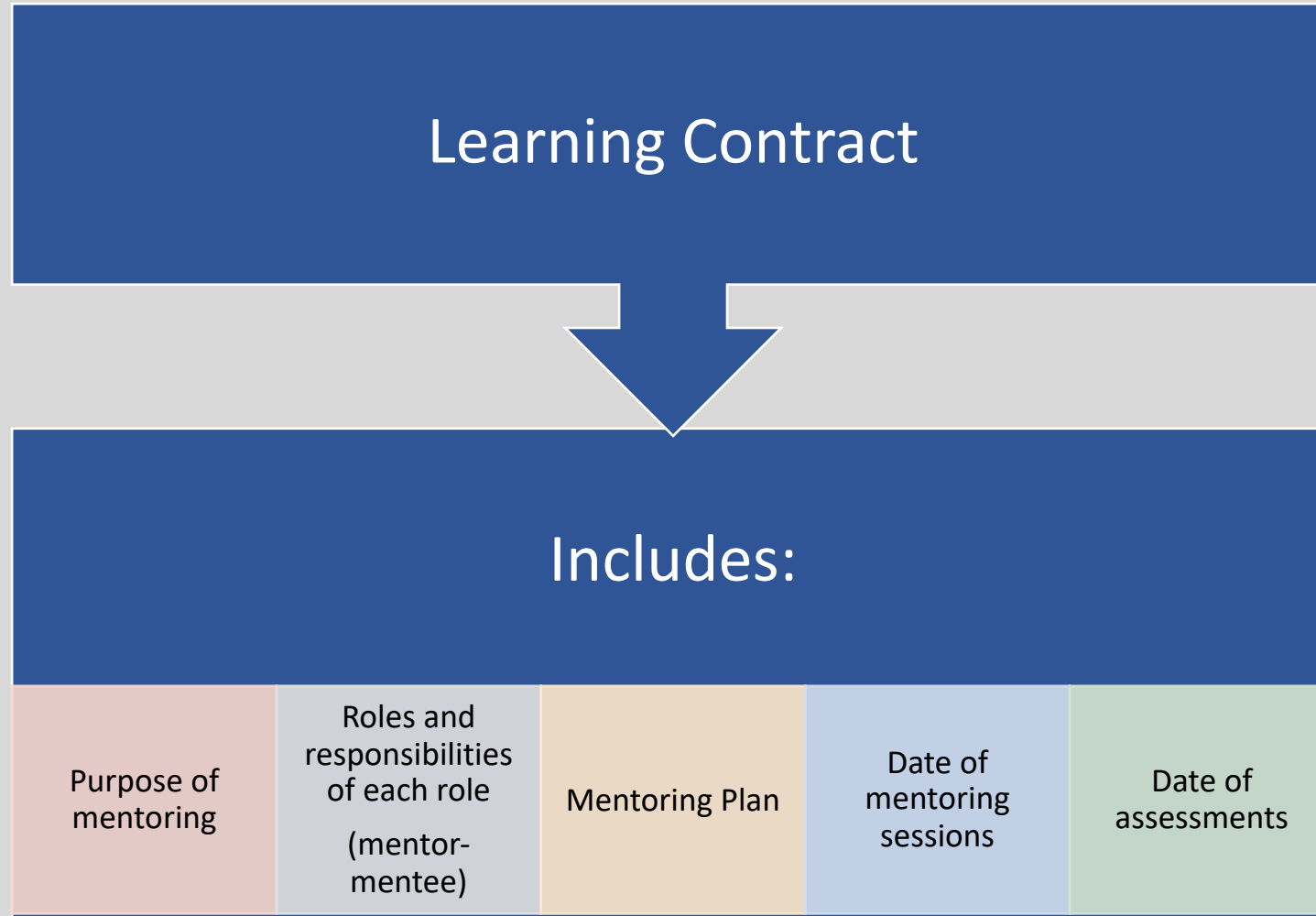
06

Assess the mentees progress

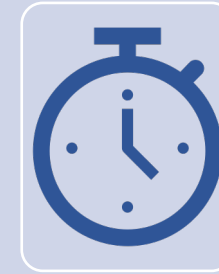
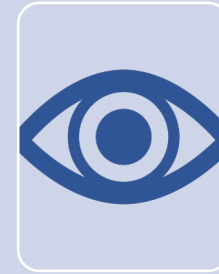
07

effect a wider change in the workplace towards human rights-based approaches

8.4 Setting up a Mentoring Plan



S.M.A.R.T Plans



Specific

Target a specific area for improvement

Measurable

So you can measure progress

Attainable

Ensure that an end can be achieved

Realistic

Ensure that it's a goal that can be achieved

Time-bounded

It has a specific timeframe

8.5 Mentoring support



DIFFERENT
LEARNING STYLES



COMMUNICATION
SKILLS

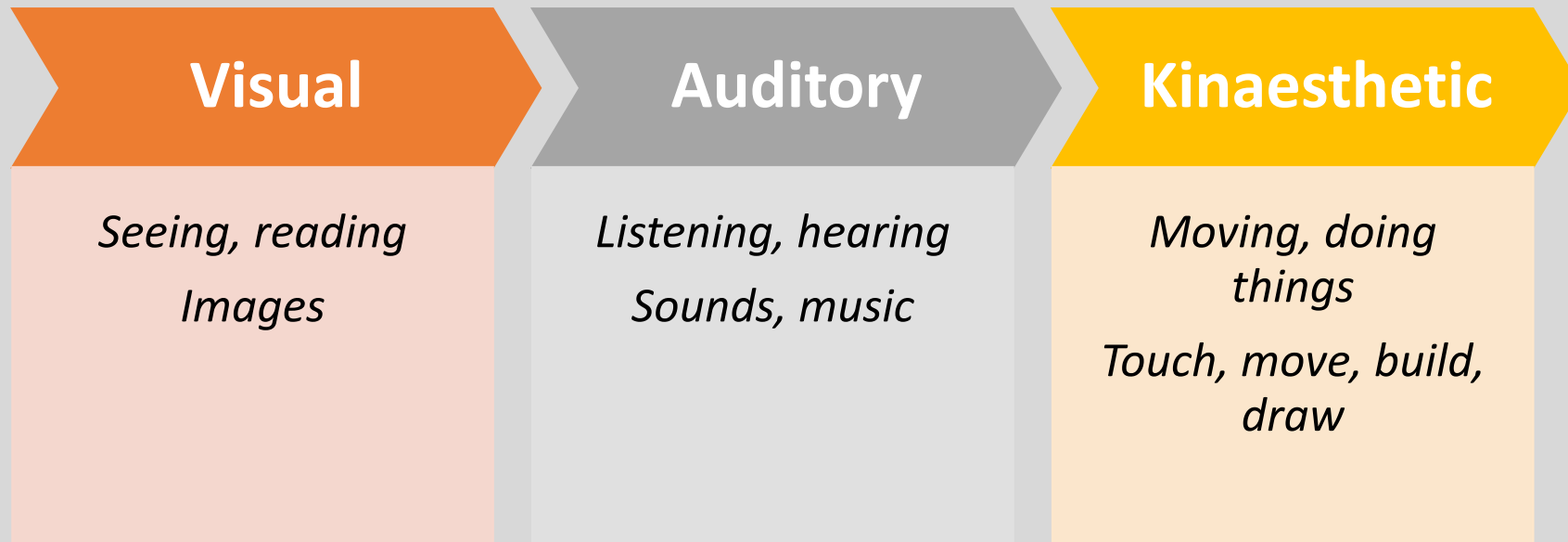


REFLECTIVE
QUESTIONING



CONSTRUCTIVE
FEEDBACK

DIFFERENT LEARNING STYLES



Active Listener



Look who is taking and pay attention



Practice silence and avoid unnecessary interruptions



Withhold your thoughts and judgment



Ask clarifying questions

Reflective Questioning



Open ended questions



Questions for deeper thought and assessment



Encourage the mentee to discuss and analyze



Encourage critical thinking and exploration

Constructive feedback

Information specific

Issues-focused

Based on observations

Praise-Criticism-Praise

Judgements:
Performance
Attitudes, approach
Efforts, outcome

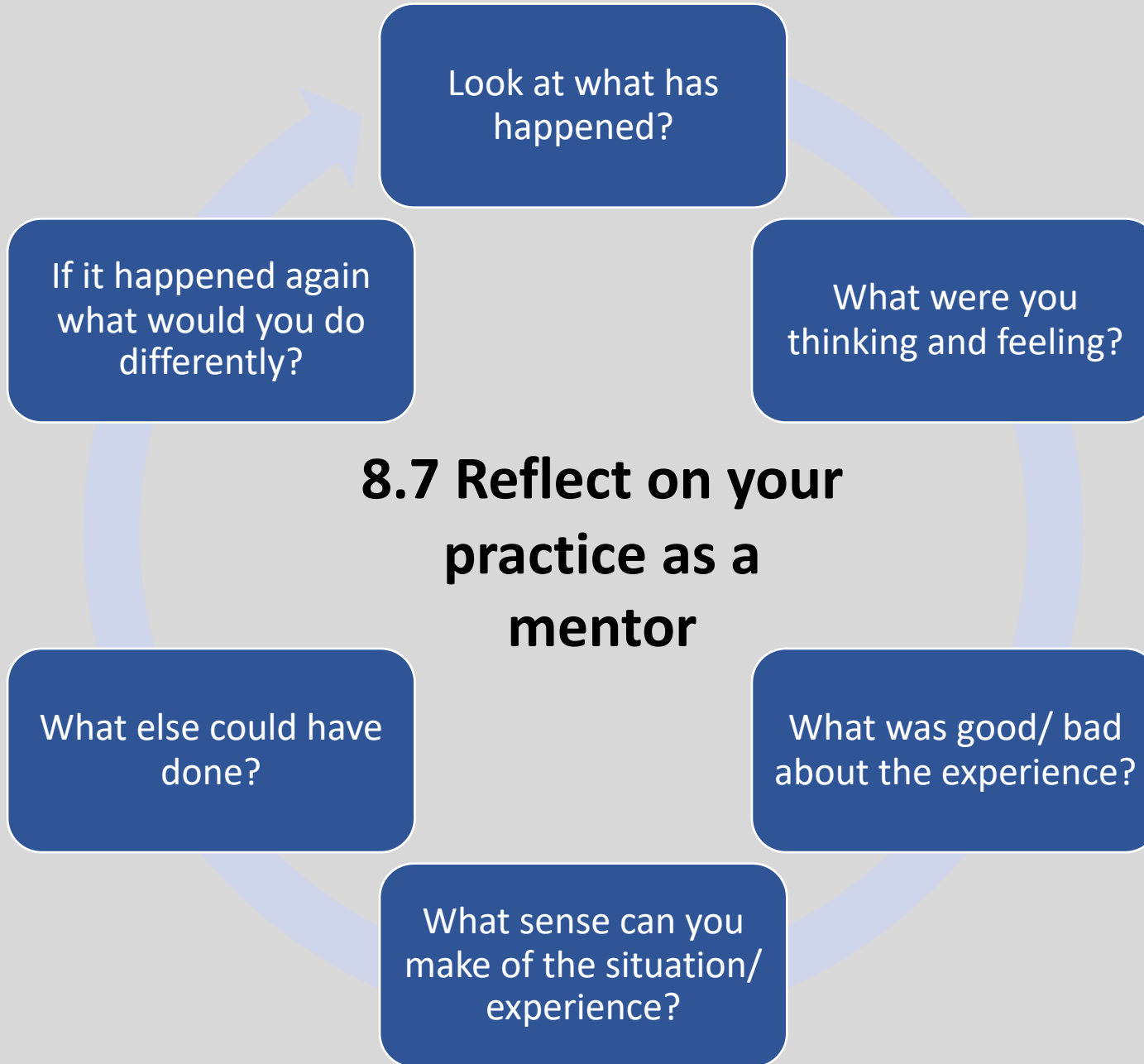
- B** • Balanced feedback covering development and strengths
- O** • Observation-based
- O** • Objective, referring to actions and outcomes
- S** • Specific by giving examples
- T** • Timely, as soon as possible after the activity

8.6 Mentee Assessment Tool (MAT)

Assess social care workers
before and after the
mentoring program

Assess mentee's understanding
of the values and attitudes
covered on the BESCLO

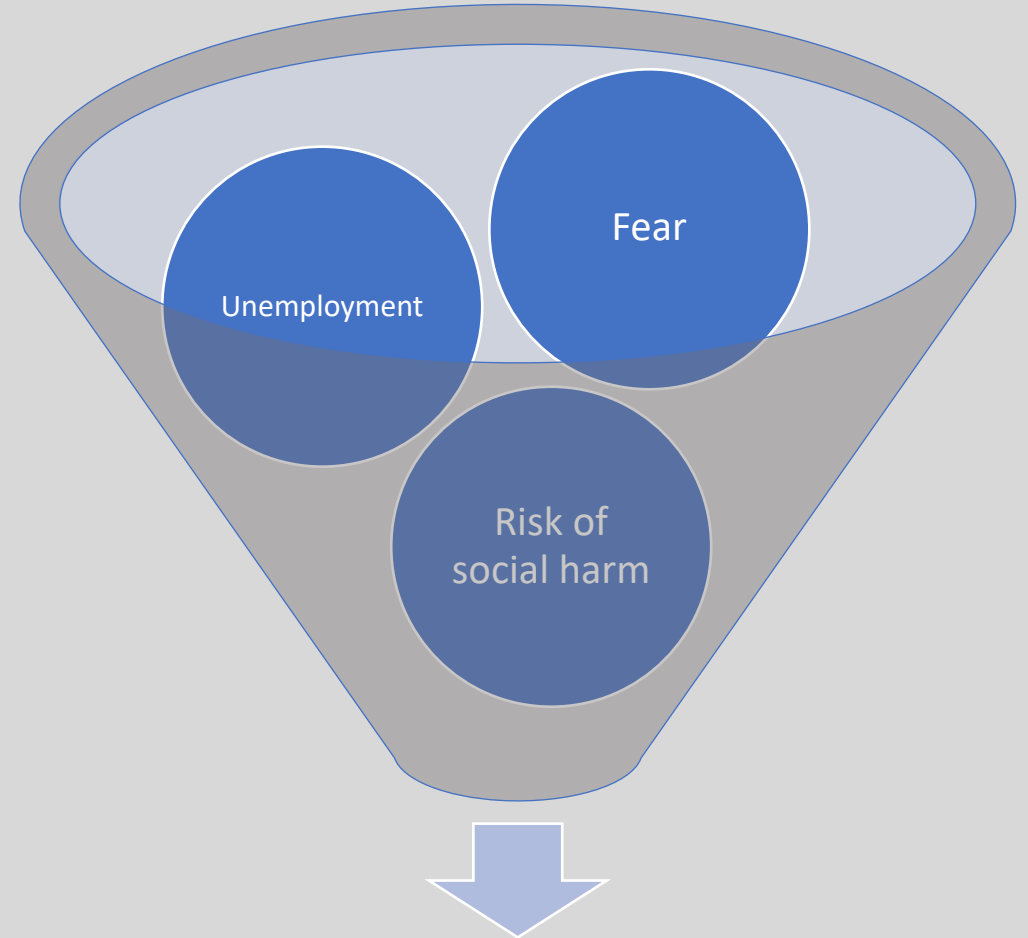
9-point scoring system



9. Human Resources Management

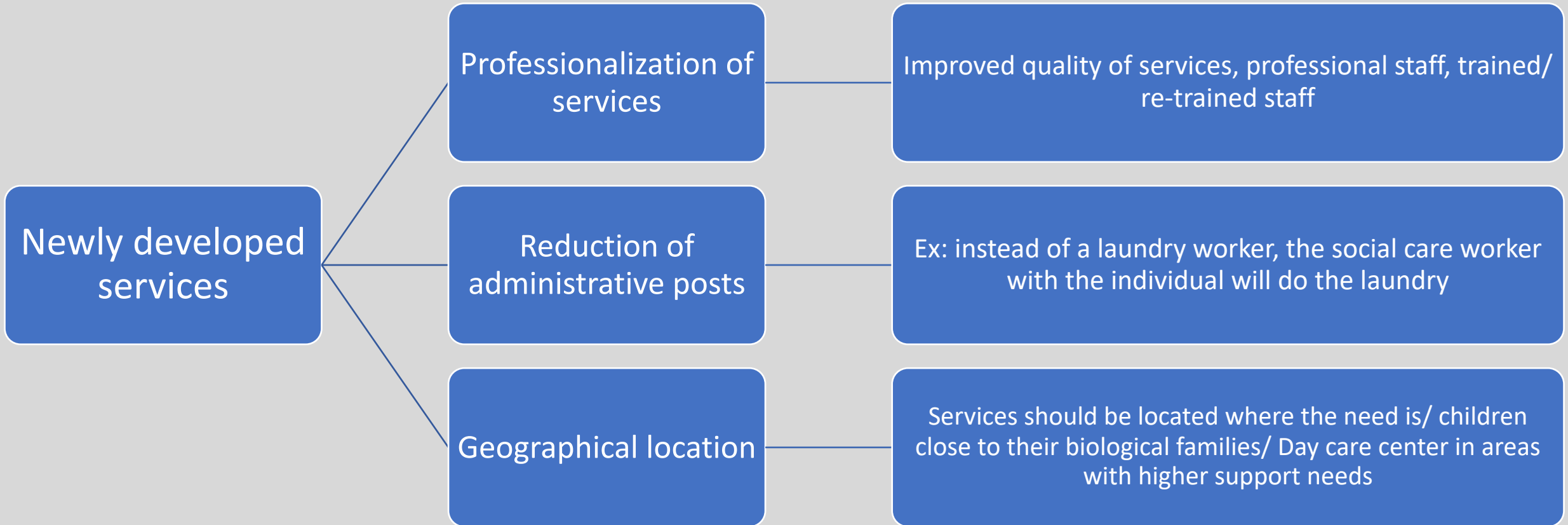


Staff



Resistance to change

9.1 Identifying staffing needs in the new services



9.2 Evaluating/ Selecting Personnel

Box 10.1 Evaluating the staff's general practice

Part A

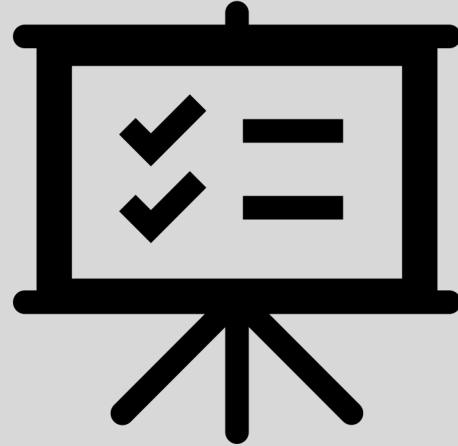
1. Attitude to the children (High score desirable: max of 28)

Does the staff member?:	Circle score
a. Engage the child in age-appropriate play	0 1 2 3 4
b. Use positive reinforcement	0 1 2 3 4
c. Display pride in the child's achievements	0 1 2 3 4
d. Engage in appropriate physical affection	0 1 2 3 4
e. Respond to the child's cues	0 1 2 3 4
f. Get down to the child's level (physically)	0 1 2 3 4
g. Use age appropriate language and explanations	0 1 2 3 4

2. Capacity to identify and meet needs (High score desirable: max of 16) - (Method – observations of preparation programme coordinator & institution director) - Does the staff member?:

a. Demonstrate an understanding of the reasons for the child's behaviour	0 1 2 3 4
b. Demonstrate an understanding of the child's needs	0 1 2 3 4
c. Show initiative in responding to the child's needs	0 1 2 3 4
d. Contribute positively to preparation programme (based on observations of programme coordinator)	0 1 2 3 4

- Attitude towards children
- Capacity to identify and meet needs
- Ability to learn and take on new ideas
- Consistency with colleagues/ teamwork?
- Methods of behavior management
- Age-group best suited to?
- Suited to work with PwD?
- Effects of institutionalization
- Staff with special relationships with the children

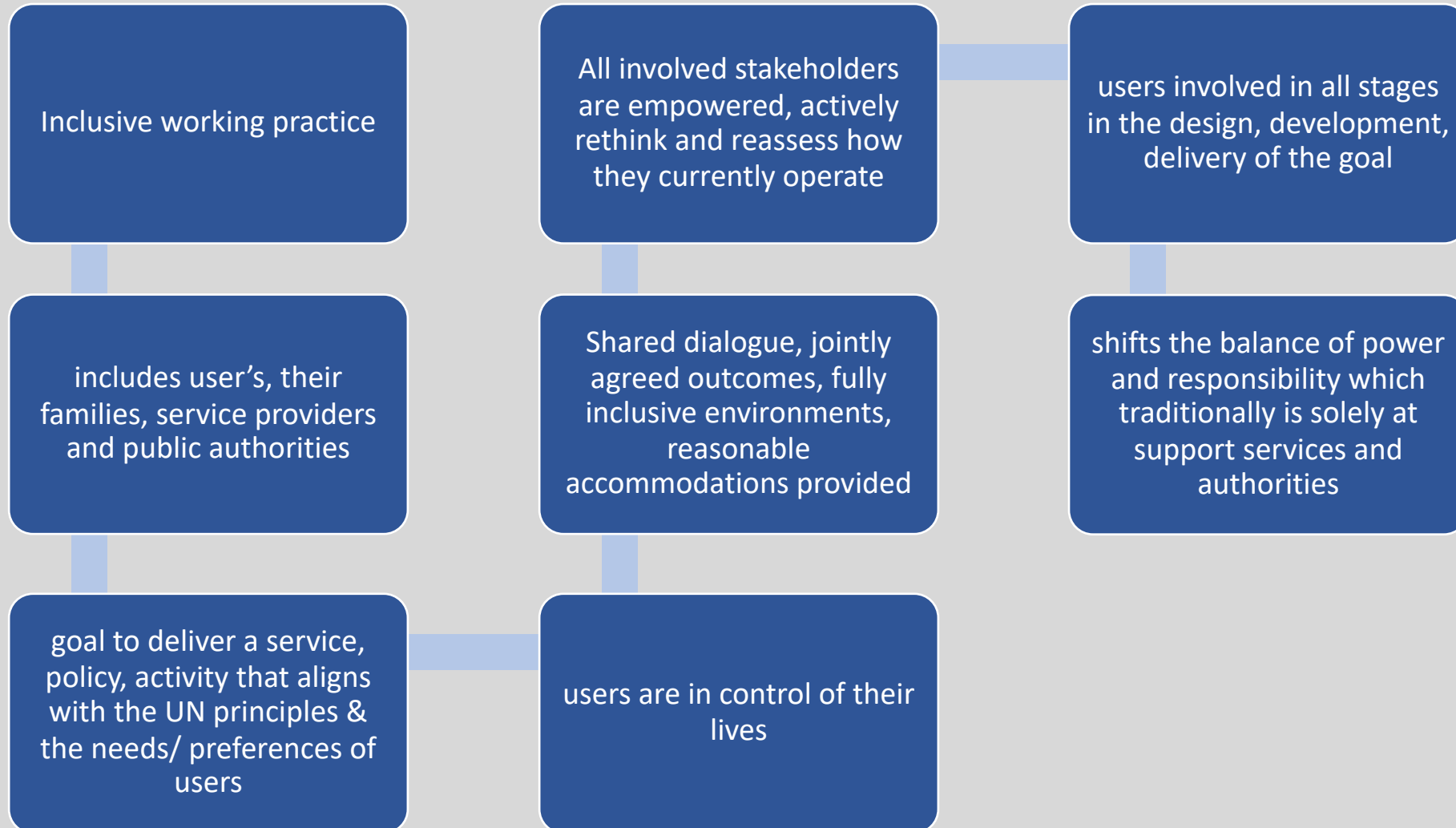


LEARNING OUTCOME 6

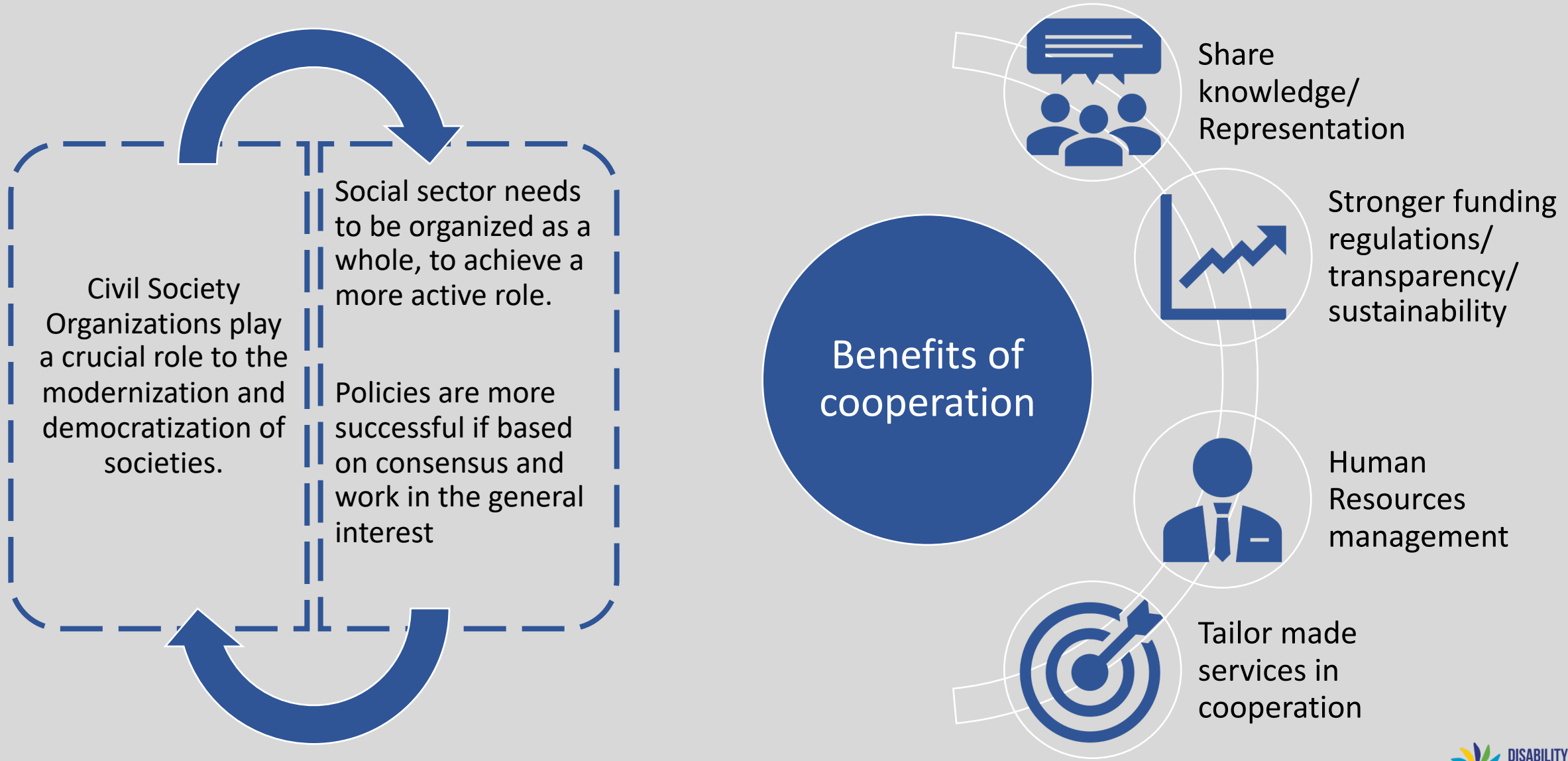
DEVELOP AN EFFECTIVE INCLUSION STRATEGY TO LEAD THE CHANGE, SHARE THE PROCESS WITH RELEVANT STAKEHOLDERS, BUILD NETWORK CAPACITY IN THE COMMUNITY AND MANAGE RESISTANCE

10. Inclusion Strategy

10.1 Co-production and cooperation



10.2 Building cooperation and networks



Areas of cooperation



Knowledge transfer



Political representation of the social service sector

Successful cooperation



Common goals



Coordination of plans



Common values

Forms of cooperation

- With decision makers and regulators
- other service providers
- other sectors
- users and families
- Service providers and international agencies

Stakeholder's approach



creating the tools and instruments to organize the communication between all parties involved

Developing a stakeholder's approach

Identify stakeholders



Identify roles and responsibilities

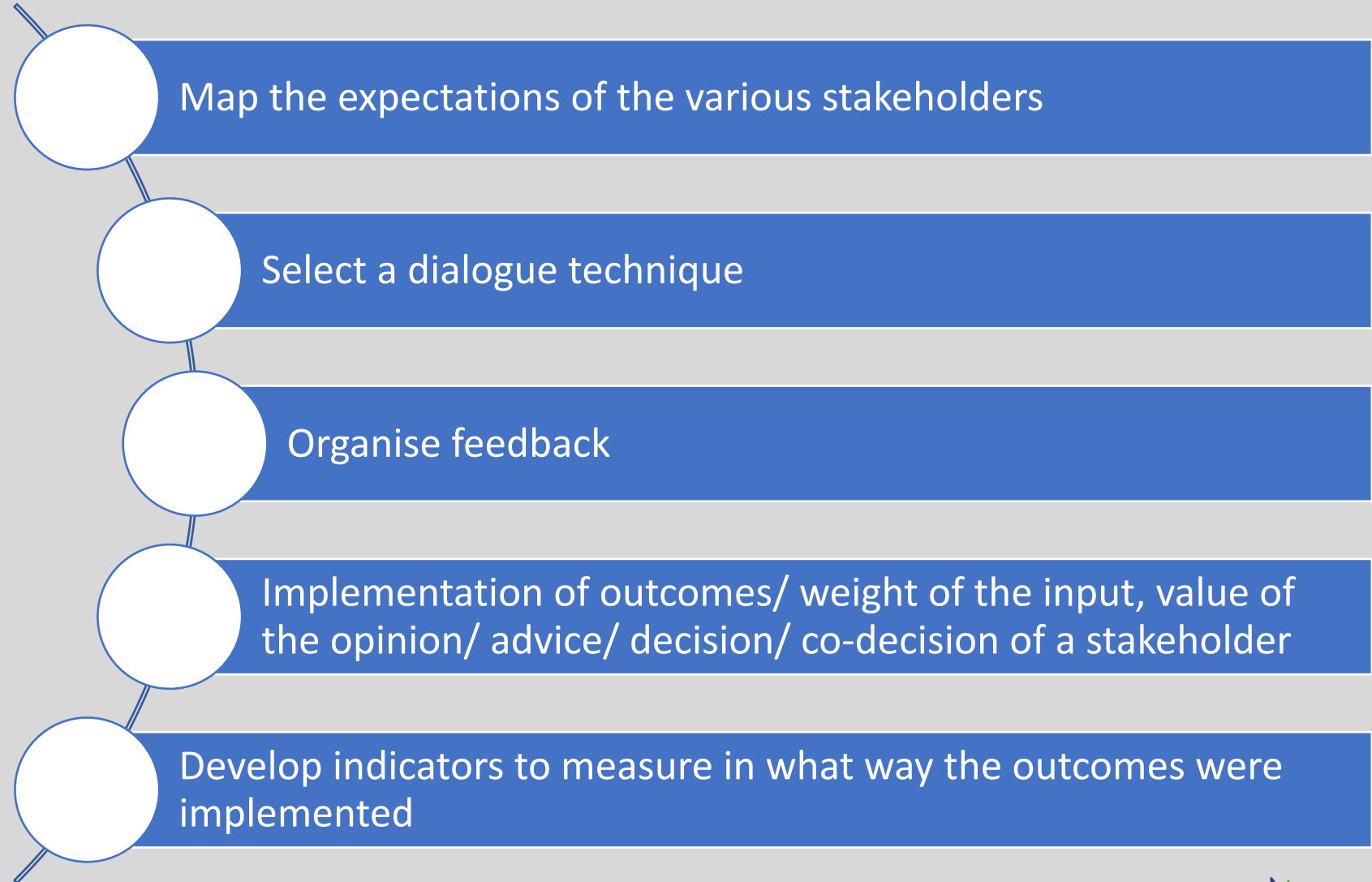


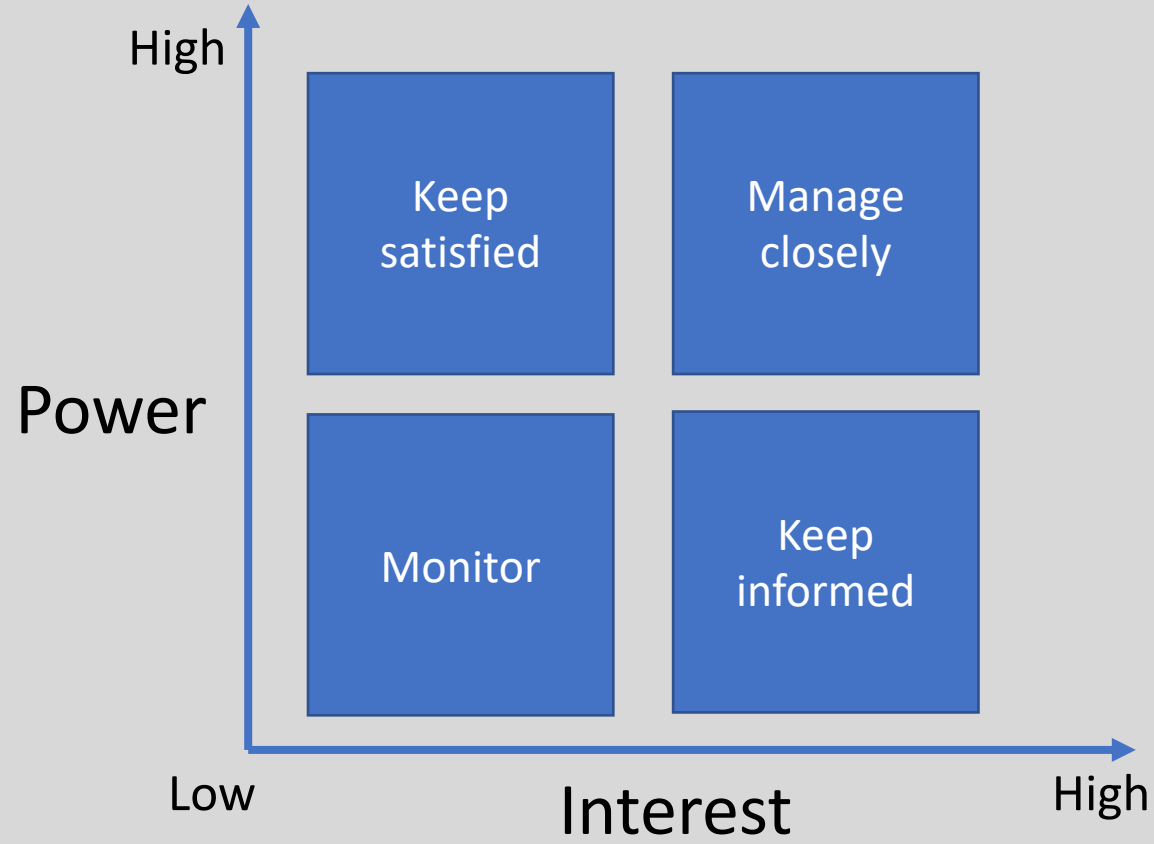
Manage stakeholders

Management of stakeholders



Stakeholder management:
Bring into balance the different perspectives of the different stakeholders





Power/interest matrix (Johnson and Scholes 1999, 2002)

Instruments



10.3 Turn factors of resistance into agents of positive change



Advocacy

An organized course of action to achieve change.



European Coalition for Community Living, 2008

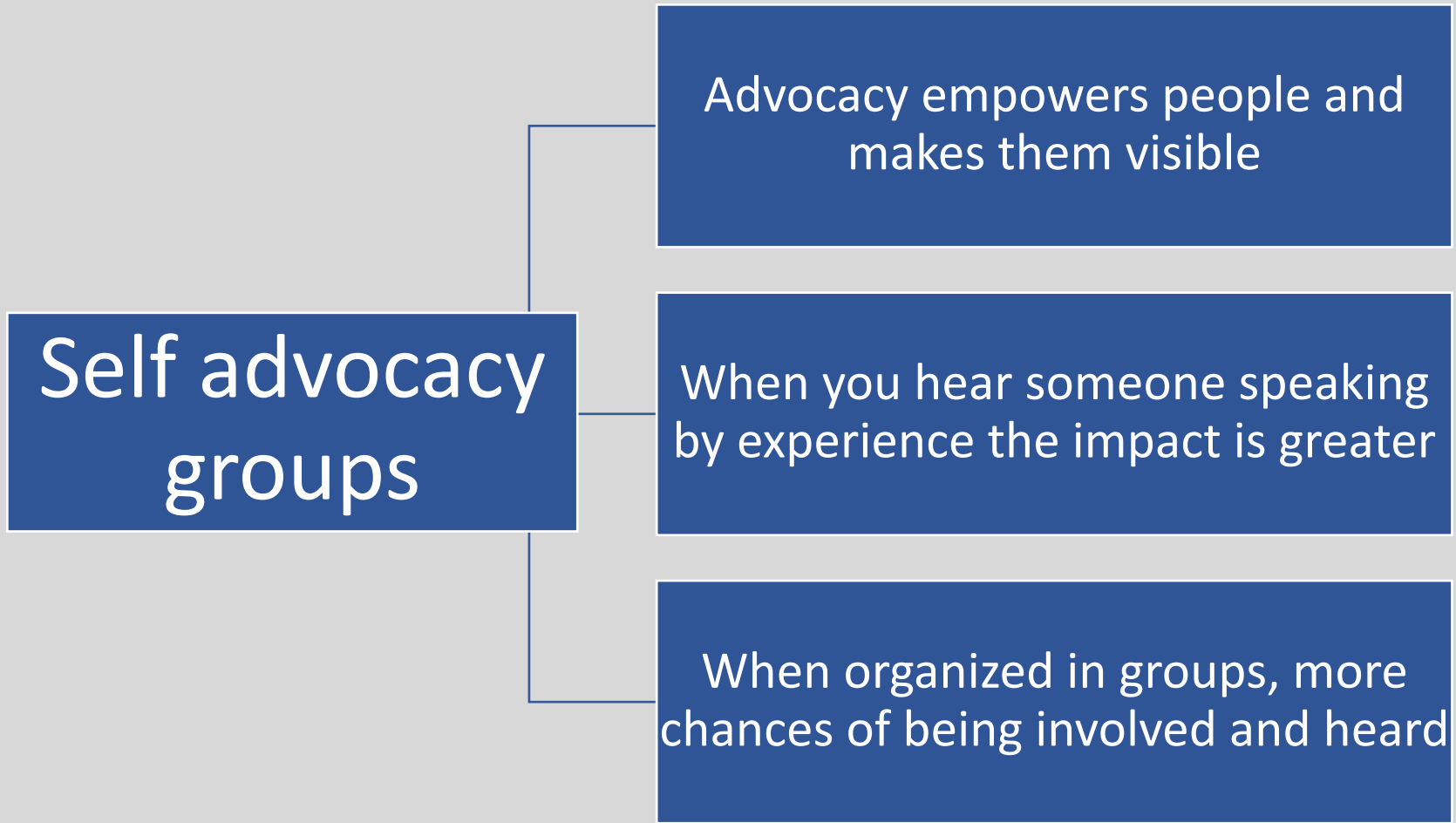
Steps on planning
an advocacy
strategy





Allies / Opponents		
Person/ Organization	Level/ Type of support	Motivation/ Agenda
Degree of Influence	Other	

Involve users on the planning



Activity-Let's think of how we are going to develop a strategy



Split into groups of 5 people

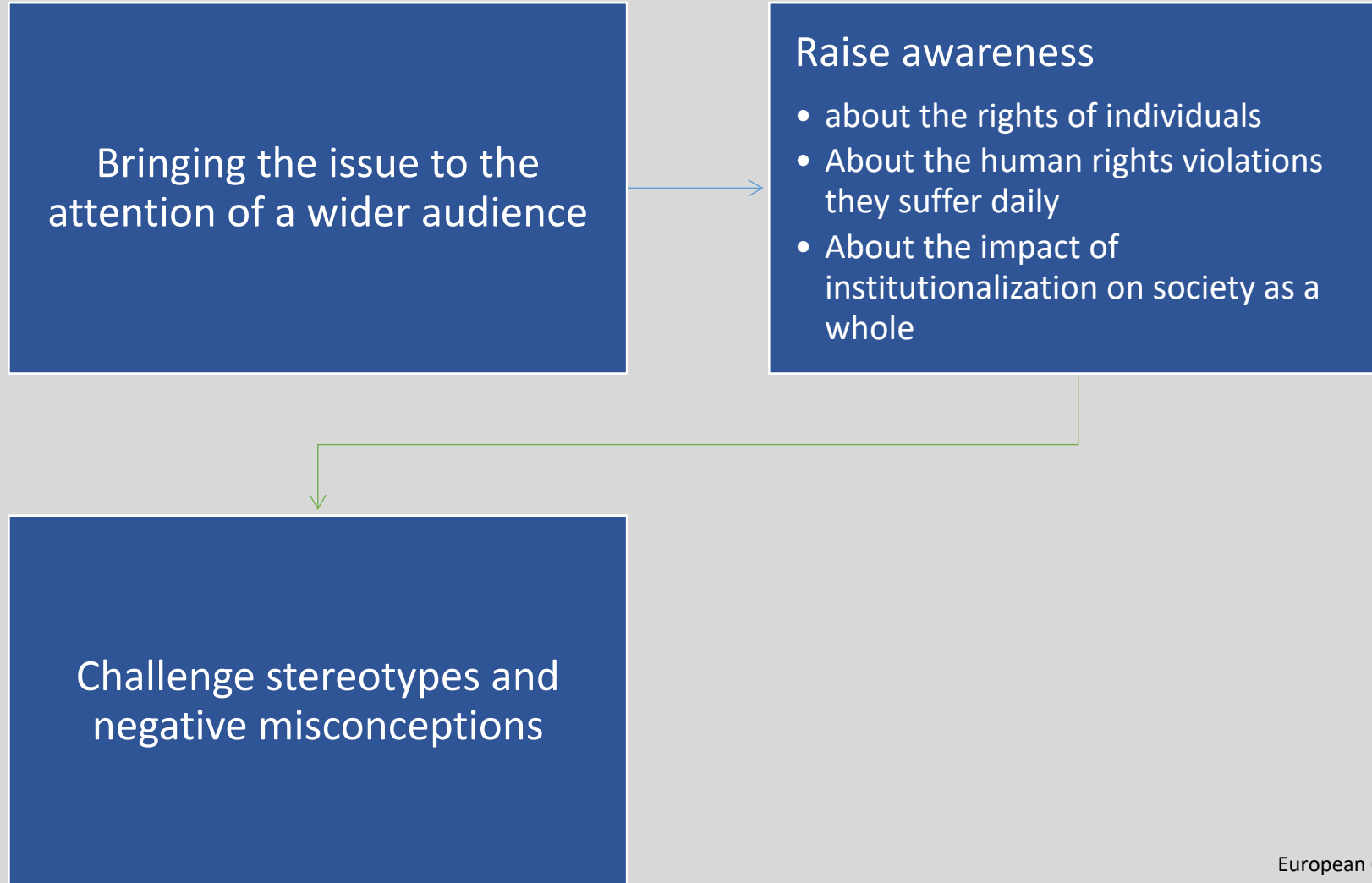


Who should you include in an advocacy strategy and how?



Present your thought process to the rest of the groups

10.3.1 Awareness raising in the receiving communities



Activities



CULTURAL
EVENTS



SPEAKING
TOURS



SUPPORT FROM
CELEBRITIES



CAMPAIGNS



MEDIA WORK

Media work

Way to
complement
other activities

Make the issue
visible and
credible

Informs the public
about the issue
and the solution

Recruits more
allies

Change attitudes
and negative
misconceptions

Influence
decision-makers

Funding
opportunity

Materials

- Leaflets
- Factsheets or reports
- Frequently Asked Questions/ Myths and Facts
- Newsletters
- Videos
- Press releases
- Website
- Social Media

How to develop your message?



European Coalition for Community Living, 2008



Activity



Have you implemented a raise awareness activity in the past?



If yes, how can you adapt your raising awareness activities to different audiences?



If no, what are your thoughts or ideas of starting a raising awareness activity?

Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.

Margaret Mead

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