

Checking if services are good and safe for people with intellectual disability

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Introduction

- ▶ Thank you
- ▶ Today's presentation will focus on findings from my PhD study
- ▶ Special thanks to my supervisors Professors Christine Bigby and Jacinta Douglas

Aim

- ▶ Despite 30 years of legislative, regulatory and policy initiatives, abuse and neglect remains rife across Australian disability landscape
- ▶ I aimed to identify strengths, limitations and opportunities for improvement in current approaches.

Background

- ▶ For most people, 'service quality' is an abstract concept of little importance
- ▶ For people with intellectual disability, service quality can often refer to acts which are both intimate and intrusive
- ▶ One in five people over fifteen with disability have been victims of abuse
- ▶ People with disability four times more likely to be victims of sexual assault

Methodology

- Constructivist grounded theory methodology
- Qualitative content analysis
- Explored systems used elsewhere in the world to monitor service quality in disability services
- Semi-structured interviews

Findings: Analysis of quality systems

- Analysis of systems revealed a focus on paperwork or process compliance.
- Standards focused on human rights usually monitored via observation and other social research methods such as interview.
- Paperwork focus may be contributing to cultures where staff practices are not observed, which may result in poor quality care, abuse and neglect going undetected.

Findings: Analysis of quality systems

- Standards for systems were often written in high level abstract concepts
- Little guidance on what concepts mean in practical real world ways

Findings: Interviews with staff and leaders

- Questions asked of frontline staff and leaders
- Questions included ‘What is good service quality’ and ‘how do you measure good service quality’?
- Most views about service quality based on personal experience

Findings: Interviews with staff and leaders

- Most frontline staff valued hands on, collaborative leadership.

*“Managers are measuring something, but it’s not the important thing, and that’s because you don’t often get people managers, you get organisational managers who focus on paperwork, they don’t understand”
(Mark, Support Worker).*

- Most staff felt that there were no consequences for staff who did ‘the wrong thing’.

*“If management want better services, they need to keep a better eye on services, everyone needs to be more accountable about what they do”
(Mary, Support Worker).*

Findings: Interviews with staff and leaders

- Most frontline staff measured service quality via the lived experience of service users
- Many staff took it upon themselves to engage and collect information from service users about their experience of service provision.
- However, many staff expressed frustration, that service leaders did not measure service quality in the same way.

“They measure money, they measure increasing clients, they focus on compliance” (Megan, Support Worker).

Findings: Interviews with staff and leaders

- Leaders divided on service quality
- Policies and procedures vs the way service users experience support

“It’s about having a good process in place” (Elle, Quality Manager).

“Service quality for me, is about the relationship between staff and how many times you get a good outcome for the client (Priya, Manager).

Findings: Interviews with staff and leaders

- Leaders were equally divided on how they measured service quality in disability services.
- Half of all leaders measured service quality via internal administrative data and compliance with policy.
- Half of all leaders believed service quality should be measured via observation of the way staff interact with service users.

Findings: Interviews with staff and leaders

- Leaders expressed concern about not measuring service quality via the lived experience of service users.

“It’s important to engage with people [service users] who communicate non verbally, because staff can write something and then you may later find out that it is unverified, incorrect (Nat, Quality Manager).”

“What people say vs what people do and how they treat people are two different things, I need to know that people are being treated well” (Ron, CEO).

Conclusion

- Paperwork compliance may be causing poor quality care, abuse and neglect to go undetected within disability services.
- Consideration should be given to responsive regulatory methods
- Consideration should be given to the knowledge staff and leaders hold
- Evaluation and observation of how standards are realised in practice and the audit process.