



# Tusla Quality Improvement Framework

A Tusla Approach to Improving the Quality and Safety of Services

**TUSLA**

An Ghníomhaireacht um  
Leanaí agus an Teaghlach  
Child and Family Agency





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A Tusla Approach to Improving  
the Quality and Safety of Services



## Document Information and Revision History

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## 1.0 INTRODUCTION

This document introduces the Agency's Quality Improvement Framework (the Framework). The purpose of the framework is to introduce a systematic method for embedding quality improvement into organisational practice and culture for the ultimate benefit of children and families. The Framework defines what a quality service looks like, provides a system to assess quality and a mechanism to make improvements.

The implementation of the Framework also positions the Agency as a self-evaluating organisation. This is a key strategic objective for Tusla – Child and Family Agency as stated in the Agency's Corporate Plan 2015 – 2017: *“Develop a strategic approach to quality assurance that supports continuous improvement and positions Tusla as a self-evaluating organisation that meets its regulatory compliance requirements.”*

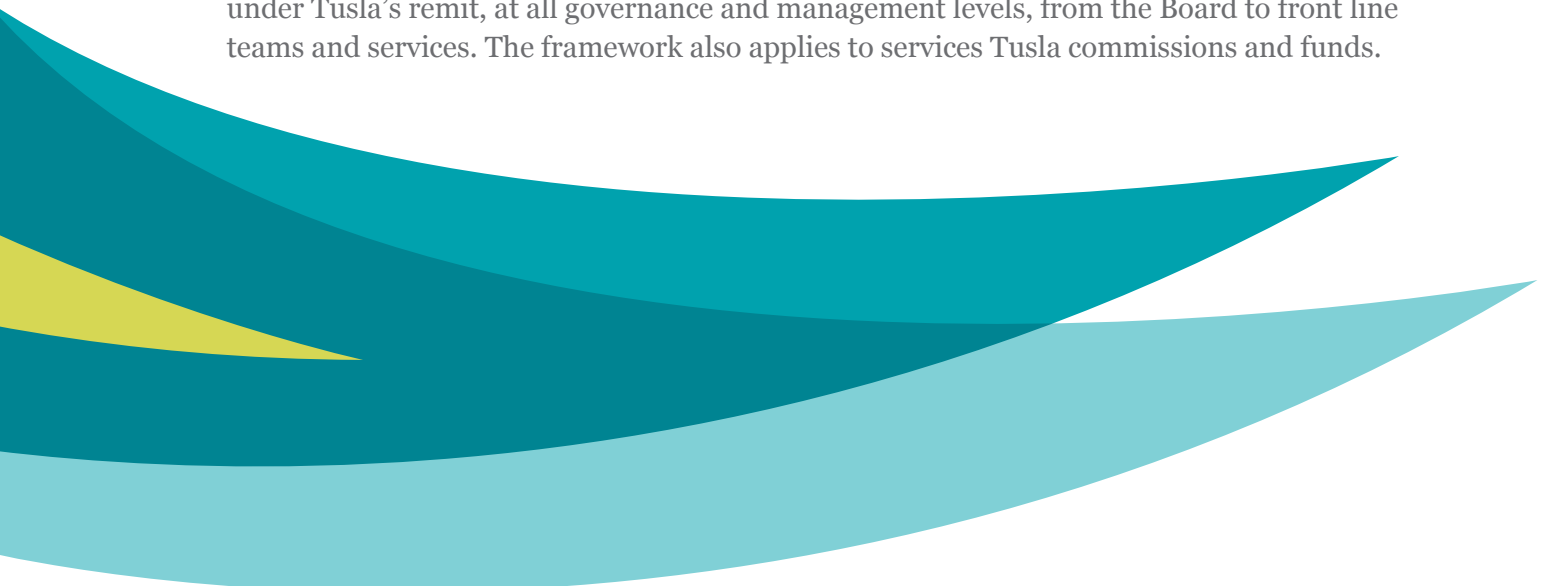
The successful implementation of the Framework will ensure that the Agency is not solely reliant on external regulatory and inspection activity to provide assurance that its services are safe and being delivered to a high standard.

The development of the Framework involved the following steps:

- Literature review – Q3 and Q4 2014
- Eight workshops with Tusla staff from all services and functions in – Q1 2015
- Consultation with all staff on the framework via survey monkey – Q3 and Q4 2015
- Four pilots of the framework – Q2 and Q3 2016.

## 2.0 SCOPE

The framework takes a whole system approach and applies to all services and functions under Tusla's remit, at all governance and management levels, from the Board to front line teams and services. The framework also applies to services Tusla commissions and funds.

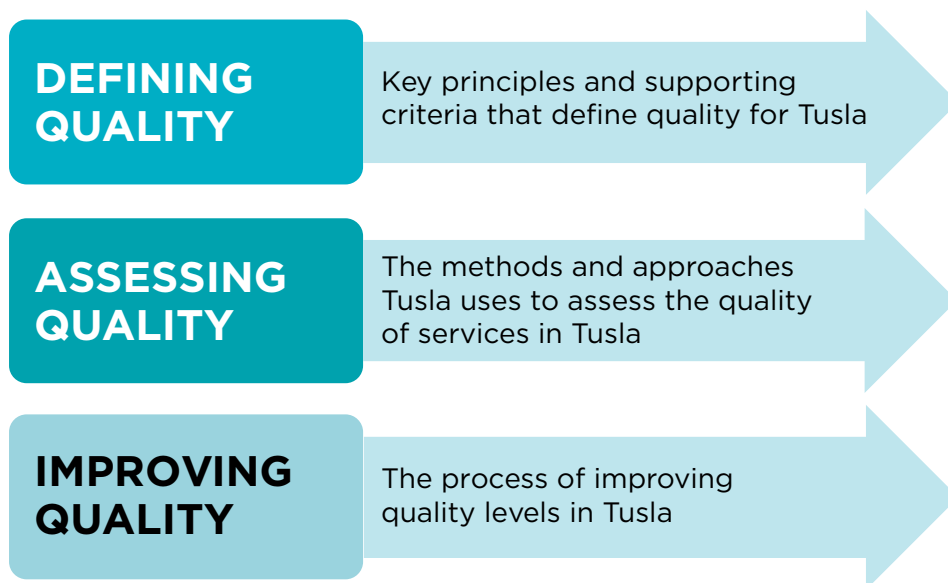


### 3.0 THE FRAMEWORK

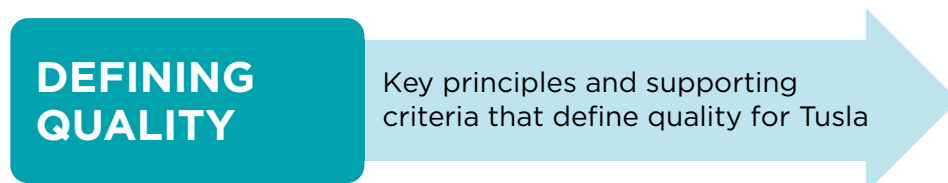
At the heart of the model are the children, young people and families engaging with Tusla. This is illustrated in figure two. The Framework is informed by international models and evidence as well as local improvement experience and learning. The principles identified reflect and are informed by best practice in national and international literature, consultation with Tusla staff and HIQA standards.

The Tusla quality improvement framework comprises three components as illustrated in Figure one. The details of each of the three components are outlined in the subsequent sections of the document.

**Figure 1: Components of the Tusla Quality Improvement Framework**



### 4.0 DEFINING QUALITY



To define what quality means in a service, it is best practice, both nationally and internationally, to describe quality in terms of domains or **principles**. These are specific attributes or characteristics which have supporting criteria associated with them.

Three principles characterising high quality services have been identified for Tusla. These are:

- Child-Centred
- Well-Led
- Safe.

These principles are described in detail in Table 1.

**Table 1: Quality principles and descriptors identified for Tusla**

| <b>QUALITY PRINCIPLES</b>  |
|--|
| <p><b>Child-Centred</b></p> <p>The rights and views of children and families are respected and taken into consideration when planning, delivering and improving services.</p>                            |
| <p><b>Well-Led</b></p> <p>There are governance, leadership and management systems in place that support staff to deliver consistent, appropriate and accountable services for children and families.</p> |
| <p><b>Safe</b></p> <p>Services are designed and developed to achieve the best and safest outcomes for children and families in a timely and proportionate manner.</p>                                    |

Each of the quality principles is underpinned by supporting criteria (Table two). These supporting criteria comprise the arrangements, actions, processes and good practices required to be in place. The principles of quality together with the supporting criteria form the basis for a self-evaluation by services to gain an understanding of their strengths and areas for improvement.

**Table 2: Supporting criteria underpinning each of the quality principles**

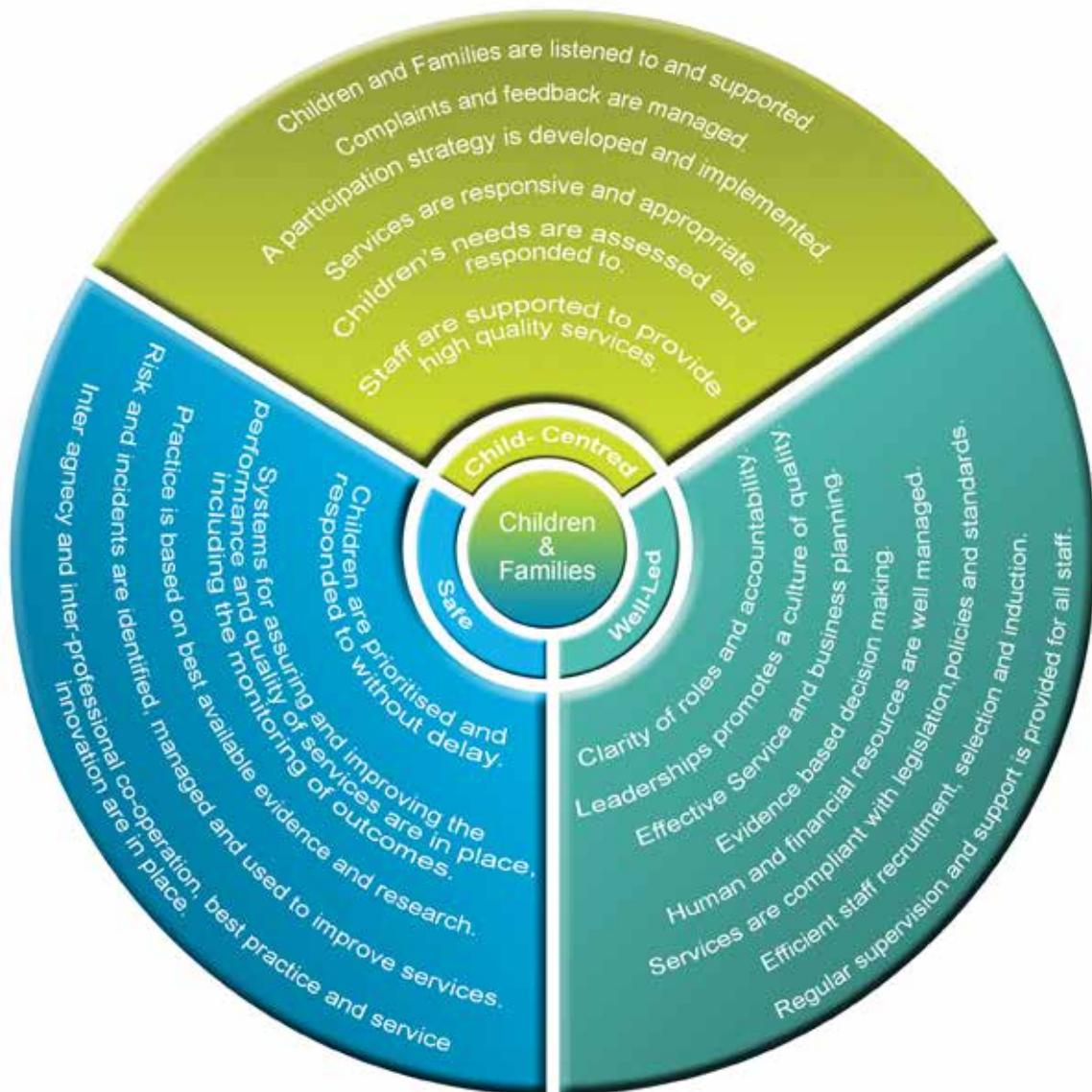
| <b>QUALITY PRINCIPLES</b>   | <b>SUPPORTING CRITERIA</b>  |
|---|---|
| <p><b>Child – Centred</b></p> <p>The rights and views of children and families are respected and taken into consideration when planning, delivering and improving services.</p> | <ul style="list-style-type: none"> <li>■ Children and families are listened to and supported to participate in decisions made about them</li> <li>■ A system to ensure high standards of customer service, including managing complaints and feedback</li> <li>■ Children, families and communities are engaged with to inform improvements in practice and policy and to support participation in service design and delivery</li> <li>■ Services are responsive, coordinated and proportionate to the needs of children and families to ensure children receive a seamless service, including effective interagency working</li> <li>■ Child and Families are treated with dignity and respect and children and are advised of their rights and services</li> </ul> |



| QUALITY PRINCIPLES   | SUPPORTING CRITERIA   |
|--|---|
| <p><b>Well-Led</b><br/>There are governance, leadership and management systems in place that support staff to deliver consistent and accountable services for children and families.</p> | <ul style="list-style-type: none"> <li>■ Defined organisational structures and clarity in relation to roles and accountability for all staff are in place, and staff are made aware of them</li> <li>■ Leadership promotes and supports a culture of quality at all levels</li> <li>■ Effective service and business planning to meet the needs of children and families</li> <li>■ Decision making is underpinned by available evidence and information</li> <li>■ Human and financial resources are well managed and deployed based on analysis of need</li> <li>■ Services comply with legislation, regulations, national policies and standards</li> <li>■ There is a process in place for effective and efficient staff recruitment, selection and induction</li> <li>■ Regular supervision and support is provided for staff at all levels focusing on staff development and retention</li> </ul> |
| <p><b>Safe</b><br/>Services are designed and developed to achieve the best and safest outcomes for children and families in a timely and proportionate manner.</p>                       | <ul style="list-style-type: none"> <li>■ Services are delivered using agreed practice models that are based on best available evidence and research</li> <li>■ Children are prioritised and responded to without delay to meet their identified needs in a proportionate manner</li> <li>■ Systems for assuring and improving the performance and quality of services are in place, including the monitoring of outcomes for children and families</li> <li>■ Risks and incidents are identified, managed and used to improve services</li> <li>■ Inter-agency and inter-professional co-operation, best practice and service innovation is in place.</li> </ul>  |

The principles and supporting criteria are designed to be relevant to all services and functions. However, it is important that the framework is applied in the context of how each service is delivered and structured.

**Figure 2: Quality principles and supporting criteria defined for Tusla**



## 5.0 ASSESSING QUALITY

### ASSESSING QUALITY

The methods and approaches Tusla uses to assess the quality of services in Tusla

The second component is assessing for quality which involves services undertaking a process of self-assessment against the principles and supporting criteria the framework. Self-assessment for Tusla involves services assessing themselves against the supporting criteria specified for each of the three quality principles. To assist services in conducting a self-assessment check questions or prompts relating to key aspects of the supporting criteria have been developed and are presented in a companion document. Services can,

with reference to this document assess and assure the quality of their service. The list of check questions is not intended to be exhaustive. Services can and should identify other elements if considered more appropriate for their service.

The unit/level of assessment will depend on the nature and scope of the service being delivered and may be undertaken at national, regional, area or unit/team level.

Individual service areas may need to undertake both a service specific and integrated service approach to self-assessment which reviews the overall impact and coordination of all of the services being delivered in a particular area.

The benefits of self-assessment are:

- Provide a comprehensive picture of the quality and safety of the service
- Reviewing all aspects of service operations by staff who have a detailed practice understanding and expertise of the service under review
- Up-skilling and development of staff through supporting reflective practice and making improvements
- Provides an opportunity to identify and celebrate key strengths and addressing risks.

Each of the three quality principles has a separate self-assessment tool. The assessment tools are available as separate documents on the Tusla hub. Each tool provides a number of prompts to support the assessment against each of the supporting criteria, using four categories to describe the evidence in place to support the assessment made. These are:

- In place and effective
- In place but needs improving
- Currently being established
- Not in place
- After assessing against each prompt there is a requirement to state an action to ensure the requisite improvement is made (if required). The person responsible and the date the action is due to be completed is also required.

At least one full self-assessment should be conducted annually using the accompanying assessment tools. It is recommended that services undertake a self-assessment against one of the quality principles every four months.

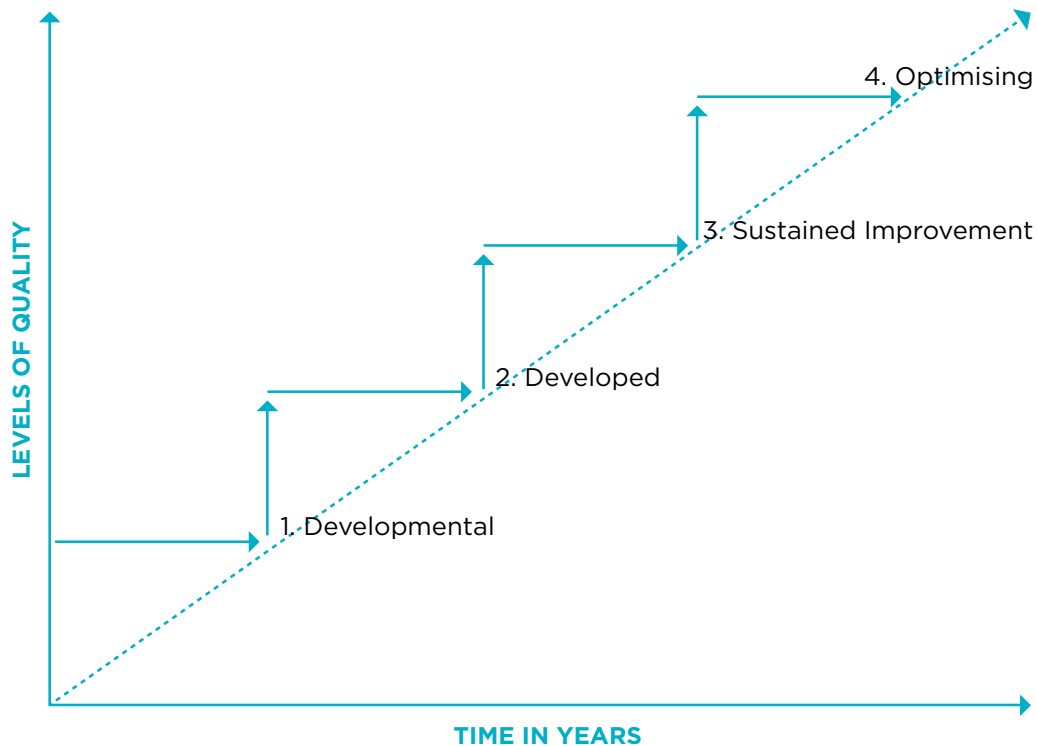
On completion of a full self-assessment cycle, services should reflect on where they would describe themselves on the quality maturity pathway as outlined in section 5.1.

## 5.1 TUSLA QUALITY MATURITY PATHWAY

To support continuous quality improvement and enable services identify the stage/ level of quality they are at, Tusla has developed a quality maturity pathway. The quality maturity pathway defines four levels of maturity - starting at a developmental level (level 1) to a highly mature and optimised level (level 4).

The quality maturity pathway should only be used on completion of the full self-assessment cycle where services consider the level of quality maturity that most accurately reflects where they sit on the pathway. The emphasis of the quality maturity pathway is to facilitate a process of reflection (there is no scoring mechanism) using the descriptors provided in figure three.

**Figure 3: Quality Maturity Pathway for Tusla**



- **Developmental:** There are ad hoc quality systems in place and a strong recognition of the need to further develop and improve
- **Developed:** Quality systems are implemented across all aspects of the service/ function
- **Sustained Improvement:** Established quality systems are evaluated, consistently achieve quality outcomes and support sustainable good practice
- **Optimising:** There is robust evidence that services delivered are of consistently high quality.

## 6.0 IMPROVING QUALITY

### IMPROVING QUALITY

The process of improving quality levels in Tusla

Assessment by itself is of limited benefit; therefore a clear process for continuous quality improvement needs to be in place. The key output of any assessment should be the

development of a quality improvement plan (QIP). The QIP template is available as a separate template on the Tusla Hub with supporting guidance. The QIP shall address areas for improvement **but also build on the strengths** identified in the evidence provided as part of the self-assessment.

Clear ownership of QIP actions needs to be taken with clear and realistic timelines. A system for tracking QIP actions needs to be set up to ensure effective implementation. The QIP requires sign-off by the most senior manager for the service/ function. The most senior manager for the service/function will also be responsible for monitoring and reviewing the implementation of QIPs.

## 7.0 VERIFICATION AND REVIEW

The completed self-assessment(s) and the QIPs need to be owned and managed at the most appropriate level. A systematic process for the verification of self-assessments will be carried out by the Quality Assurance Directorate through audit and other sampling methods. Nominated quality assurance and monitoring staff will be assigned to work with each area as part of the verification and review process.

The Quality Assurance Directorate will organise learning seminars whereby one or more senior managers will lead a forum to discuss and test findings from self-assessments to support reflection, good practice and encourage learning.

### MONITORING BY SENIOR MANAGEMENT TEAM AND THE BOARD

The senior management team and the Board committee on quality assurance and risk will review compliance with the self-assessment process. Rapid improvement plans will be considered where difficulties are identified in the process of implementation and compliance with the self-assessment process. The process and necessary support for this will be agreed by the Chief Operations Officer in consultation with the Director of Quality Assurance and the senior management team.

## 8.0 IMPLEMENTING THE FRAMEWORK

It is expected that the journey to full implementation of this framework will take a number of years and will require considerable planning and commitment from service managers.

A lead person, or experienced staff member, will be identified in each area/ service to provide a leadership role in the implementation of the framework as part of their role and responsibilities. They will provide direction and support in the process of self-assessment and the development and monitoring of quality improvement plans. The quality leads will work closely with the monitoring officers within the Quality Assurance Directorate and the regional quality risk and service improvement managers to support the process of implementation.

## 9.0 OTHER IMPROVEMENT TOOLS

The Tusla 'Quality Improvement Framework' is the principal quality improvement system for the Agency. There are numerous other methods and systems for improving the quality of services. The Quality Assurance Directorate will develop supporting methodologies and tools to support services review and improve their services, such as specific practice audit tools, appreciative enquiry methodologies and lean practice methods.

The framework requires services to actively engage in quality audit and review and analysis of business information and operational data. Guidance for quality assurance audits and guidance on the effective use of performance data and information have been developed – a summary of each guidance document is provided in section 9.1 and 9.2.

### 9.1 QUALITY ASSURANCE AUDIT GUIDANCE

Audit is a component of any good quality assurance system. It involves assessing current activities or processes against explicit standards e.g., legislation, policies, procedures, standard business processes, national standards etc. The guidance document developed:

- Outlines the reasons why auditing is important and should be done
- Outlines the standard methodology (in a step by step approach) that is generally described in the literature. Adherence to this methodology will bring consistency and reliability to audits conducted across the system
- Includes standard templates for use e.g., audit plan, quality improvement plan, sample audit report, escalation form (for use where risks or issues of significant concern are identified during audit and require escalation to management)
- Includes information on wider considerations e.g., ethical issues, data protection, confidentiality, involvement of children/families
- Includes some additional practical tips and best practice guidance
- Applies to any staff managing, leading, facilitating and/or carrying out audits, both locally within services, or audits requested and commissioned by the Chief Executive/SMT etc.

### 9.2 GUIDANCE ON THE EFFECTIVE USE OF PERFORMANCE DATA AND INFORMATION

Performance data and information has a number of benefits as a management tool and when used effectively it has the potential to drive performance and forms the basis for continual improvement. The guidance document developed sets out a simple seven step process for staff and managers at all levels of the organisation on the effective use of performance data and information available. Key to the approach is collation, analysis and integration of data and information available from several disparate sources e.g., operations, human resources, finance, service users, staff etc. The focus is on data and information that is available to services and service managers and it is set within the context of current ICT limitations.



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