

# Quality Management Plan



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## 1. INTRODUCTION

### 1.1 Purpose

This Quality Management Plan describes the Quality Management Process that the project team will follow to assure and control the quality of all procedures, processes and deliverables produced during the course of the IDECO project.

### 1.2 Scope

The scope of this plan includes the quality practices and procedures to be employed by *the consortium* in the development of all components of IDECO, as defined in section 2.

### 1.3 Annexes

The following documents are integral part of the quality management plan:

A1 - Steering committee and Technical committee rules of procedures

A2 - Executive plan

A3 - Monitoring plan and questionnaire

### 1.4 Contents

This Quality Management Plan is organized as follows:

Section 1 – **Introduction** Introduces the document;

Section 2 - **Quality Requirements** defines the quality aspects of the IDECO project and model that must be monitored and measured;

Section 3 - **Quality Management Organization** identifies the project control bodies and organizations involved in project and programme management;

Section 4 - **Quality Management Activities** identifies the activities and the matching among them.

## 2. QUALITY REQUIREMENTS

The success of IDECO project is dependent upon the delivery of quality outputs and results. The objective of this section of the Quality Management Plan is to define the exact meaning of quality within the context of the project.

### Context

In 1980s and 1990s “long-term care” was primarily a range of services that were offered to frail older adults living in institutes that provided health care, personal care, and rehabilitation services, usually for extended periods of time. Quality management practices allow long-term care facilities to respond to environmental and industry changes. In the last few years, terms such as “total quality management” (TQM) and “continuous quality improvement” (CQI) represent the main innovation of the sector. In order to better sustain changes the training of key professional figures has become extremely important. Department coordinators are professionals involved the management of facilities and in the coordination of technical staff. They should be considered of primarily importance in change management process but, in many qualification systems, “department coordinator” is a qualification not precisely outlined. For this reason, vocational pathways to become department coordinator are not easily identifiable. As an effect, the acknowledgment and the exploitation of experiences and know-how learn in other Countries or other sectors is problematic. This affect in particular non-formal and informal training as for instance voluntary work which should be considered perfectly focused for the profession. Moreover, the changes in quality management approach in long term care institutes make the definition of “department coordinator” more difficult. In Germany, department coordinator professional profile is clearly defined and the training pathways disciplined by law. The IDECO project aims at making the German training model transferable in other contexts thanks to the application of the ECVET system. Preparatory context studies will contribute to the adaptation of the model to target territories. The testing of the adapted model will bring to the validation of a fully transferable model which should be replicated also in other contexts. The incorporation of the model into regional policy is the goal of mainstreaming activities carried out with policy makers. The consortium is composed by training agencies with specific know how in long term care facilities and European projects management. Partnership involves also social partners as employer associations and a trade union. The dialogue between these different categories will help to obtain transparency and recognition of learning outcomes and qualifications for department coordinator profile. Department coordinators often have the same responsibility of a manager but the remuneration of a common employers. The project will demonstrate that an appropriate training for department coordinators guarantees better performances to the organization and contributes to the increase of services quality.

### Quality

The objective of the remainder of this section is to provide an exact and measurable definition of **Quality**, within the frame of reference defined above. This definition is stated in terms of general **Quality Factors** and specific system oriented **Quality Criteria**.

To satisfy the Quality Factors and Criteria defined in this section, they must be consciously addressed, right from the start of the project life cycle. Prior to developing each IDECO component, the Quality Factors and

Criteria must be assessed to determine their applicability. Those factors and criteria deemed to be relevant must serve as critical success factors for the component.

## 2.1 Quality Factors

Quality factors have been identified in order to determine whether the outputs of the IDECO Project meet beneficiaries requirements. In the schemes below direct beneficiaries are considered “department coordinator” and indirect beneficiaries “elderly people”.

Table 2.1 presents quality factors considered as important in the frame of the project. The table identifies and describes each factor. Partners in charge of the project assessment have to rank the factors in order to identify the Critical Success Factors of the project. The evaluation score for each Quality Factors is calculated by the Lead Partner processing the data collected for each Quality Criteria of each Quality Factor (see table 2). In order to calculate the evaluation scores the following formula will apply:

$$X = \text{AVGc} * \text{Wf} / 10$$

*X = Evaluation of the Quality Factor*

*AVGc = average of the evaluation scores assigned to Quality Criteria which composed the factor;*

*Wf = Weight of the Quality Factor*

Table 1 : Quality Factors

Factor	Description	Weight
<b>Product Factors</b>		
Correctness	The extent to which IDECO satisfies its specifications and fulfils the beneficiaries' objectives as expressed in the application form;	10,00
Efficiency	The extent to which IDECO model performs its intended function with limited resources;	10,00
Sustainability	The extent to which IDECO results can be maintained over their expected useful life;	14,00
Transferability	The extent to which IDECO can be transferred to new contests and new countries;	10,00
Presentability	The extent to which project results can be interesting for market, stakeholders and policy maker;	8,00
Profitability	The ability of IDECO model to positively impact the productivity, profitability and quality of long time care facilities working with elderly people;	13,00
Interoperability	The extent to which the functional elements delivered by IDECO are understandable and applicable by the end-users;	10,00
Social Sustainability	The extent to which IDECO model contributes to ensures that basic needs are met and promotes a good quality of life for direct and indirect beneficiaries	10,00
<b>Process Factors</b>		

Factor	Description	Weight
<b>Product Factors</b>		
Timeliness	The extent to which IDECO is delivered in a timeframe which meets beneficiaries' requirements;	5,00
Resource Effectiveness	The extent to which the optimal resources are assigned to IDECO model to ensure quality, on-time outputs delivery;	5,00
Future Potentialities	The extent to which Long time Care Institutes involved in the pilot phase are likely to provide a positive reference to other potential customers of the model;	5,00

## 2.2 Quality Criteria

Each Quality Factor has been broken down into one or more **Quality Criteria** which will be monitored throughout the project life span. These criteria serve as strategic-level input to the process of analyzing and designing all the elements of the IDECO model. For all criteria the evaluation score ranges from 1 (one) to 10 (ten) where:

1 = the IDECO project/model has not achieved at all the criterion scope;

10 = the IDECO project/model has fully achieved the criterion scope;

Table 2: Quality Criteria.

		Factor	Criterion	Description	Evaluation	Actors involved in the evaluation process
<b>Product Factors</b>						
1	1.1	Correctness	Completeness	The degree to which IDECO provides full implementation of the activities foreseen;		Partners
	1.2		Consistency	The degree to which IDECO model provides consistent tools for implementation of processes		Partners
	1,3		Accuracy	The degree to which IDECO projects matches the required number of outputs		Partners
	1.4		Flexibility	The extent to which IDECO model maintains an audit trail able to adopt modification coherent with its objectives, scopes and nature		Partners
2	2.1	Efficiency	Effectiveness	The degree to which IDECO utilizes minimal resources (e.g., processing time) in performing model functions.		Partners
3	3.1	Transferability and Sustainability	Innovativity	The degree to which IDECO improves knowledge and available data;		Partners

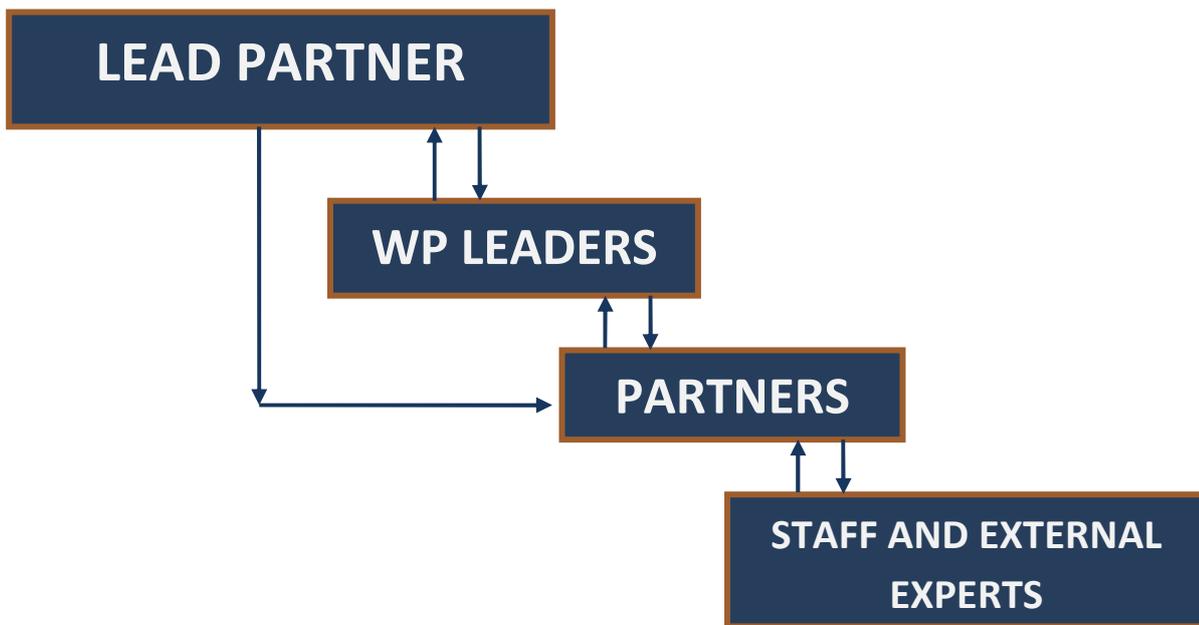
		Factor	Criterion	Description	Evaluation	Actors involved in the evaluation process
	3.2		Simplicity	The degree to which IDECO model defines and implements its elements in the most non-complex and understandable manner;		ARET UPIPA
	3.3		Virtuality	The extent to which users can implement IDECO model using materials available online;		ARET UPIPA
	3.4		Training	The extent to which IDECO model can be implemented without specific training;		UPIPA ARET
	3.5		Networking	The ability of IDECO to exchange information with stakeholders, policy makers and training organizations and to mutually use the information that has been exchanged.		Partners
4	4.1	Social Sustainability	Security	The extent to which IDECO project safeguards the privacy and the security of indirect beneficiaries;		ARET UPIPA
	4.2		Equity	The extent to which IDECO project provides equitable opportunities and outcomes for all the direct beneficiaries		ARET UPIPA
	4.3		Quality of life	The extent to which IDECO model improves quality of life for direct and indirect beneficiaries (eg. health, housing, education, employment, safety)		ARET UPIPA
5	5.1	Interoperability	Standardization	The extent to which IDECO utilizes interface standards for protocols, routines and data representations;		Lead Partner
	5.2		ICT Independence	The degree to which IDECO model is non-dependent on the software environment (computing system, operating system, utilities, I/O routines, libraries).		Lead Partner
	5.3		Conciseness	The degree to which IDECO implements its functions with a minimal amount of code;		Lead Partner
	5.4		Consistency	The degree to which IDECO model provides an uniform design;		Lead Partner
	5.5		Modularity	The degree to which IDECO model provides highly cohesive modules with optimum coupling;		Lead Partner

		Factor	Criterion	Description	Evaluation	Actors involved in the evaluation process
	5.6		Simplicity	The degree to which IDECO model defines and implements its functions in the most non-complex and understandable manner.		Lead Partner
6	6.1	Presentability	Image	The degree to which IDECO provides a consistent, attractive identity which is understood by all users.		Partners
	6.2		Penetration	The extent to which IDECO is successfully disseminated to its intended user community;		Partners
	6.3	Profitability	Productivity	The extent to which IDECO model demonstrates an improvement of quality or productivity of those who use it;		ARET UPIPA
	6.4		Affordability	The degree to which association of long term care elderly institutes can afford to operate IDECO model for all potential users;		ARET UPIPA
	6.5		Cost vs. Benefit	The degree to which the benefits of IDECO model outweigh the costs.		ARET UPIPA
		<b>Process Factors</b>				
7	7.1	Timeliness	Performance to Schedule	The extent to which IDECO is delivering outputs according the established schedule;		Lead Partner
8	8.1	Resource Effectiveness	Actual vs. Required Skills	The extent to which the skill set required by the project matches the skill set of the resources assigned to the project;		Lead Partner
	8.2		Performance to Budget	The extent to which IDECO model is delivered and tested according to the contracted costs;		Lead Partner
9	9.1	Future Potentialities	Customer Satisfaction	The extent to which Long Time Care Institutes and Coordinators are satisfied with the development process and the level of service provided;		ARET UPIPA

### 3. QUALITY MANAGEMENT ORGANIZATION

The coordination structure of the project foresees some specific bodies where all partners are represented. Lead Partner is responsible for all management of the project. Every WP has a Leader which has to monitor and coordinate project activities in the framework of the a WP under its responsibility.

The communication flows has been represented in the graphic below.



The main project bodies are the Steering Committee and the Technical Committee. For both, specific rules of procedure are approved by the partners (see attachments).

The primary function of the **Steering Committee (STC)** is to take responsibility for the feasibility and the achievement of outcomes of the IDECO project.

The IDECO Steering Committee will:

- monitor and review the project status, as well as provide oversight of the project deliverable rollout;
- provide a stabilizing influence, both for organizational and partnerships matters, providing insight on long-term strategies in support of legislative mandate;
- ensure project objectives are being adequately addressed and the project remains under control, by controlling project scope as emergent issues force changes to be considered
- resolve project conflicts and disputes, reconciling differences of opinion and approach.

The primary function of the Scientific Committee (hereinafter SCC) is to analyse and validate the results and outcomes of the IDECO project.

The IDECO Scientific Committee will:

- Provide scientific validation with the best state-of-the-art expertise available, to ensure dissemination materials are suitable to be presented at the dissemination events to the relevant stakeholders (internal and external, i.e. policy makers, universities, major sector players, etc.)

The two bodies are also responsible for the monitoring of the project.

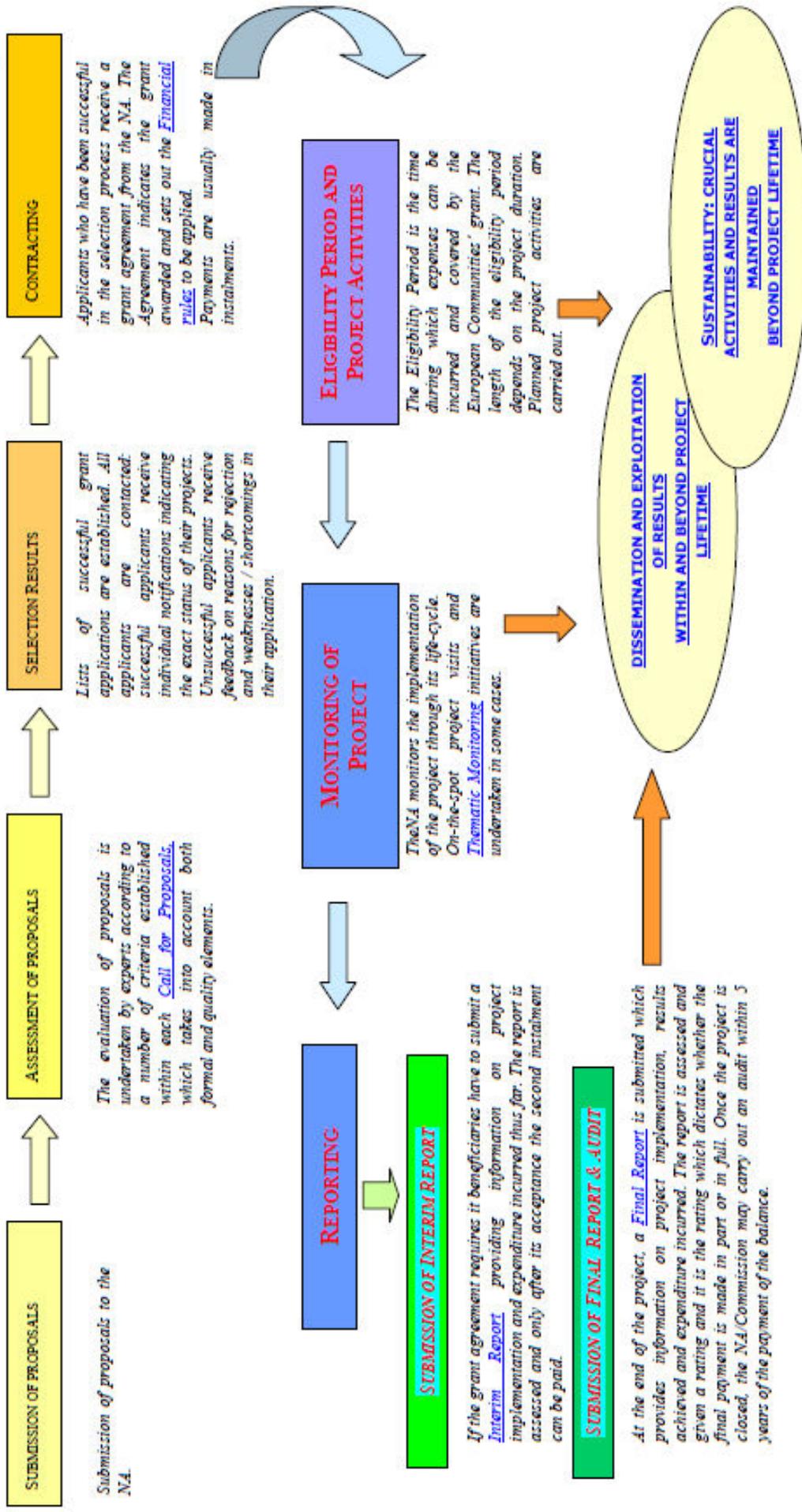
The project life cycle involved other important actors since the evaluation phase as EACEA and ISFOL, the Italian national agency responsible for program management. These players are still involved in project implementation as controller. In particular, the NA is responsible for monitoring all the projects that have been successful in securing funds from the Lifelong Learning Programme.

The monitoring may be performed in one or more of the following ways:

- assessment of the work carried out and reported by the project (desk check; for this the NA normally uses external expertise to analyse and assess the reports);
- visit by NA representatives to the premises of the beneficiary/coordinating organisation (on-the-spot check);
- visit by NA representatives to a project event or partnership meeting;
- visit by experts to review the work of the project and report back to the NA;
- visit by project representatives to the NA;

Invitation to project representatives to visit the NA to participate in an event organised by the NA.

# PROJECT LIFE CYCLE



#### 4. QUALITY MANAGEMENT ACTIVITIES

The Work breakdown structure foresees a division in four WPs named: “management and coordination” (WP1 – from month 1 up to month 24), “promotion and mainstreaming” (WP2 – from month 1 up to month 24), “making transferable German model through ECVET methodology” (WP3 – from month 1 up to 11) and “model transfer”.

In the project development, WP1 has a strategic importance because is the base for a correct development of all other activities. The coordination is due to Lead Partner initiative but every partner will have to develop an internal monitoring on the activities managed by their internal staff, claim regularly the reimbursement of expenditures, follow Lead Partner indications and respect WBS and GANT. The most important bodies for the management of the activities are the Steering Committee (decision body) and the technical body (dedicated to project contents elaboration). WP1 foresees three activities: monitoring (1.a); administration and financial reporting (1.b), coordination and activities management (1.c). All the activities will be implemented from month 1 to month 24. WP2 (1<sup>st</sup> - 24<sup>th</sup>) are declined in two activities. The first one is dedicated to promotion and dissemination (2.a) (1<sup>st</sup> – 24<sup>th</sup>), the second to mainstreaming (2.b) (20<sup>th</sup> -24<sup>th</sup>). The promotion will take place through WEB2.0 tools. A coordinated profile of the project will be design and used in dissemination materials and Website. Posts and twits on WEB2.0 tools and press releases will highlight project development. The great part of communication outputs will be realized in the last months of the project. The last event of the project will be realized the firsts days of 24<sup>th</sup> month. The mainstreaming activity will begin after the testing phase (4.c). The analysis of the testing phase will be finished in month 21 (4.d). The efforts will be intensified in order to raise the awareness of policy makers that will be control during project implementation. WP3 makes transferable the German model in an European contest that appear extremely diversified and variegated. It foresees seven activities. The WP is the most complex of the project and the activities are not consequential. Partners define a common description of department coordinator (3.a; 1<sup>st</sup> – 2<sup>nd</sup>) describing competences, abilities and training pathways necessary to achieve the qualification (3.b; 3<sup>rd</sup> – 4<sup>th</sup>). The professional profiles that can be associated to department coordinator are mapped (3.b; 3<sup>rd</sup> – 5<sup>th</sup>). The different juridical frameworks of the regions involved and the social and economic contests are analyzed (3.d; 3<sup>rd</sup> – 5<sup>th</sup>). The collected data permit the validation of the German model considering all the modifications needed to make possible the transfer at European level (3.e; 6<sup>th</sup>). Partners cooperate to define the professional profile in learning units evaluating also the allocation of ECVET credits (3.f; 3.g; 7<sup>th</sup> – 11<sup>th</sup>). WP4 comes after WP3 implementation and finishes at 21<sup>st</sup> month. WP has the objective to certify that the model can be transferred and implemented in very different contests. The four activities are consequent. In 12<sup>th</sup> month, long term care institutes for elderly people will be individuated in order to test the ECVET model and the department coordinator to involve in testing phase (4.a). In order to better organize the training courses, a competences assessment of the people involved will be realized (4.b; 13<sup>th</sup> – 15<sup>th</sup>) and on the base of the collected data training courses will be organized (4.c; 16<sup>th</sup> – 19<sup>th</sup>). The period of time requested for the implementation of this pilot phase can vary because the training courses are setting up following the specific needs of the department coordinators involved (4.d. 16<sup>th</sup> to 21<sup>st</sup>).

