

Available online at [www.sciencedirect.com](http://www.sciencedirect.com)

ScienceDirect

journal homepage: <http://www.elsevier.com/locate/kontakt>

## Original research article

# Perceptions of social services from the perspective of their users and providers in the selected region of the Czech Republic

*Paula Varvažovská<sup>a,\*</sup>, Martina Jarkovská<sup>b</sup>*

<sup>a</sup> Czech University of Life Sciences Prague, Faculty of Economics and Management, Department of Humanities, Prague, Czech Republic

<sup>b</sup> Czech University of Life Sciences Prague, Faculty of Economics and Management, Department of Languages, Prague, Czech Republic

## ARTICLE INFO

## Article history:

Received 16 August 2017

Received in revised form

9 January 2018

Accepted 20 February 2018

Available online xxx

## Keywords:

User

Provider

Senior

Social care

Social services

## ABSTRACT

Act No. 108/2006 Coll., on Social Services, brought a number of conceptual changes. The main aim of this paper is to compare the quality of social services in terms of user satisfaction in relation to the provider, and to find out whether these facilities are comparable in providing social services, whether they meet the needs of the target group of seniors and whether the seniors are satisfied with the service. A field survey was performed both quantitatively and qualitatively. The sample of respondents ( $n = 108$ ) was composed of seniors using residential social services for the elderly provided by both public and private entities. The questioning was conducted through structured interviews, taking into account the specificities of the questioning of the elderly. The qualitative survey was carried out using a semi-standardized interview with statutory representatives of homes for the elderly, family members and representatives of the founders of public organizations. More than three quarters of respondents rated the social service provided to them very positively. In the field of technical security, it was the non-state facility which received the better evaluation. Furthermore, the investigation conducted with statutory representatives of the organizations has provided valuable information on the funding of social services. The current funding method does not allow longer-term planning of organizational development, investment, and personnel policy. Finally, recommendations for practice are mentioned.

© 2018 Faculty of Health and Social Sciences of University of South Bohemia in České Budějovice. Published by Elsevier Sp. z o.o. All rights reserved.

\* Author for correspondence: Czech University of Life Sciences Prague, Faculty of Economics and Management, Department of Humanities, Kamýcká 129, 165 21 Prague 6 – Suchbát, Czech Republic.

E-mail address: [varvazovska@pef.czu.cz](mailto:varvazovska@pef.czu.cz) (P. Varvažovská).

<https://doi.org/10.1016/j.kontakt.2018.02.002>

1212-4117/© 2018 Faculty of Health and Social Sciences of University of South Bohemia in České Budějovice. Published by Elsevier Sp. z o.o. All rights reserved.

## Introduction

Population ageing is a global trend [1]. This is mainly due to a decrease in birth rates, which is greatly influenced by economy [2]. According to statistical indicators of the Czech Statistical Office, the Czech Republic is not an exception, and the increasing number of senior citizens is evidence of this [3]. From a socio-economic point of view, the ageing of the population and the decrease in the birth rate cause insufficient insurance fund fulfilment and increased requirements for the payment of pensions. These facts also generate a problem in terms of ensuring long-term health care for all elderly people in the future [4]. The negative multiplier effect of an increasing number of seniors is ageism – discrimination of older people because of age [5]. Older people often do not feel valued or appreciated; their opinions are not as strong as those of the middle generation [6]. Satisfaction with the quality of life of seniors often differs, both in relation to home care and care in retirement homes, but also whether it is a rural or urban area. In rural areas, the satisfaction with quality of life is related more to whether a senior lives with a family in a familiar setting, which has a positive impact on his health. In urban areas, seniors often live in nursing homes or in retirement homes where they are provided with day-to-day care, but more often the seniors here feel lonely and isolated, which can cause feelings of fatigue, depression, and a general worsening of health [7].

Every person ages completely individually. The health and social system are closely related. Health problems tend to be accompanied by social problems and vice versa.

In the Czech Republic, a system has been set up where a family is responsible for care as the primary care provider. The state service is used only secondarily. There is a need for social services that family members can rely on and which, if needed, can fully replace the family. The basis of health care consists of a general practitioner. He or she should co-operate with a family and other primary care services such as nursing staff, nurses and other non-profit organizations. Domestic nursing care is provided at the general practitioner's recommendation and is covered by health insurance.

For instance, remote Japan, one of the fastest ageing societies in the world, can serve as an example. Many of its municipalities have begun to provide concentrated prevention services for elderly people living in a community. The nature of these projects involves a certain cooperation between users and providers of social services. Elderly people volunteer in such programmes and increase the motivation of other older people to participate in activities initiated by social service providers, which could significantly help relieve professional workers [8].

## Objectives of the research

The main aim of the submitted paper is to compare the quality of social services in terms of user satisfaction in relation to the provider and the length of use of social services.

In order to achieve the main objective, the following partial objectives were defined:

- 1) determine the level of satisfaction of users with the quality of specific social services;

- 2) determine the satisfaction of users with the behaviour of care staff;
- 3) find out if the users of social services know where they can direct complaints in case of dissatisfaction;
- 4) find out the opinions of employees of social service providers; whether they are interested in their service, whether they cope with managing the funds they have and what their visions for the future are;
- 5) find out whether users' family members are satisfied.

## Theory

Following the adoption of a new law on social services in 2007, compliance with social services is now obligatory for their providers. A very important dimension of social services is an ethical dimension, which often decides about clients' satisfaction. According to Act No. 108/2006 Coll., on social services, social care is an activity or a set of activities providing assistance and support to persons for the purpose of social inclusion or prevention of social exclusion [9]. Quality standards of social services are based on a relationship with users, providers and founders. They are based on certain principles (respecting user rights, respecting user choices, individualizing support, the principle of focusing on the whole, the principle of flexibility) [10]. The quality of care is a subjective concept, [11] but needs to be defined by the minimum standards and the ideal variant at which the target could be approached. In Germany, a guardian inspection model of the standardization of the quality of social services (based mainly on technical standards) is applied. On the other hand, in England, a value-oriented system is emphasized, which refers to processes that are important for users of the service, such as ensuring their autonomy, privacy, dignity and the like. Australians support projects where professional healthcare professionals perform the role of managers of care, while non-professional staff take over basic long-term care. The projects have proven effective in reducing functional dependence and in increasing functional mobility, confidence in day-to-day activities, and quality of life. This has been found to lead to a reduced need for ongoing care services and to a reduced cost of care for the ageing population [12]. In the Czech Republic, quality standards of social services focus on users, their independence and rights, and define good practice in social services.

The standards themselves are usually not measurable and are therefore divided into so-called criteria that can be measured. The generally formulated standards apply to all services. A number of rules must be defined by the providers themselves (mission, objectives, complaints, rules for individual planning of services, etc.) in accordance with the principles contained in the standards [13].

The measure of the success of the quality services comes through the recipient of the service; his or her satisfaction is a subjective indicator of the quality of social services. The service offered is only relevant if it helps to improve the life of the user.

The satisfaction of the user with the service is mainly determined through surveys. These can be targeted at the overall satisfaction of the client or at certain components.

Download English Version:

<https://daneshyari.com/en/article/7521324>

Download Persian Version:

<https://daneshyari.com/article/7521324>

[Daneshyari.com](https://daneshyari.com)