

Quality Management

Definition of Quality management is managing quality within a business or organisation, whether this is a product or service provided. Focused Quality management ensures that a business, product or service is of a consistently high quality. Does the product or service do what we want it to do and does it meet the expectations of the company, clients etc. ? Although managing quality may sound straightforward many organisations have suffered from not prioritising it. The Volkswagen emissions scandal is a recent example and we're yet to see how much it has cost the company both financially and in future sales. It can take years to build a reputation and minutes to lose it!

As straightforward as it may initially seem there are actually a number of principles and theories behind Quality management. In this assessment I will analyse three of those theories.

Firstly, Juran's Quality Trilogy details three managerial processes; Quality planning, quality improvement and quality control. Planning involves identifying customers and their needs in order to develop processes to create a quality product/service to meet those needs. Quality improvement is a managerial process that involves identifying the production workers and then giving them the resources, training and incentive they need to be effective and achieve a quality service or product. Quality improvement would probably work really well in a sales/ target driven industry as it relies on data collection and clear objectives to achieve. However as it is a managerial process this means the team takes very little ownership of quality and it is not a whole organisation approach. Quality control measures performance against expectations, assessing any shortfall and addressing this, if necessary, to achieve quality. This type of management approach may work in factory production however it would not work so well in an organisation such as Darlington Borough Council as it is not a whole organisation approach.

Deming's seven deadly diseases theory examines whether an organisation is suffering from one of the pitfalls Deming lists as 'diseases'. These are;

1. A lack of constancy of purpose
2. An emphasis on short term profits
3. Evaluating performance using merit rating which destroys team working
4. Mobility of management
5. Running the organisation on visible figures only
6. Excessive medical costs
7. Excessive warranty costs

However Deming's 'diseases' can only be fixed if management are on board and sometimes the management team are the cause of the deadly diseases! For example, there may be a lack of mobility of management because senior managers put a stop to this or just don't progress themselves to allow mobility from the lower ranks. These 'diseases' cannot be fixed from the bottom up they need to be fixed from the top down! Again this theory wouldn't work in an organisation such as Darlington Borough Council where middle management isn't committed to quality. Deming's diseases is much better suited to profit organisations such as Ikea which model a democratic leadership style and staff are permitted to give their views on all decisions and issues and influence how the company can be best managed. In comparison Deming's deadly diseases theory would work for non-profit organisations such as charities as the focus is too much on short term success, making profits and

short term thinking. Most non-profit companies need to have long term planning and long term goals in order to succeed.

Another theory which is more suited to an organisation like Darlington Borough Council is Imai's Kaizen 5S Housekeeping model. The Kaizen model seeks continuous improvement and this is the model most similar to the one I use in my work. The plan, do, review model. Kaizen is a continual improvement method that relies on team work, good morale, suggestions for improvement and quality forums. It is known as the housekeeping theory as the focus is on, tidiness (*work is free from clutter*), orderliness (*arranging equipment and materials needed*), cleanliness (*cleaning and maintaining equipment*), standardising (*meeting the required standard*) and discipline (*maintaining what has been accomplished*). Improvements are little and often and Kaizen works on the premise that we are all responsible for quality and all feed into total quality of the organisation as a whole. As a local authority with many departments this best suits the model we work to. We must constantly improve plan, do, and review and then make changes where necessary. We do this to keep quality practices, manage resources and staffing and demand. Working to this model also involves sharing good practice, giving and receiving feedback from employees and service users and adapting to new practices/tools for working more effectively. This is how we manage quality using total quality management for everything we do. An example of this in action is how we receive referrals from stakeholders. Historically stakeholders such as schools would have a main point of contact and speak to them directly and the employee would then discuss work required and manage their own caseload, with some management oversight during supervisions, as the service has changed over the last few years of austerity this has been reviewed and changed over time. The first plan was that referrals came through managers in twice weekly allocations meetings, managers would then vet requests for service and allocate to the teams accordingly. (Some 'backdoor referrals' were still happening as the stakeholders would ring an employee and request some work be undertaken without going through the allocations procedure.) Feedback was also given on previous allocations and actions and cases were brought for step up and step down from social care. Using the plan, do review model this process was then adapted to meet the changes to the service and the reduction and restructure of staff. As staffing levels were reduced the allocations and referrals needed to be tighter and spread evenly across the team. Due to this all referrals have to go through the 'front door' so managers can keep a closer track of caseloads. The new process is that stakeholders now have to complete a referral form and send this through the central children's access point and from there a decision is made whether the case is referred to social care or early help teams. If the case comes to early help the managers decide who has capacity and can best meet the client's needs. Stakeholders in particular have not been happy with this change as it requires them to complete a form rather than pick up a phone or invite staff to a meeting but the change was necessary to ensure a quality service and to ensure that the service is needed and directed to the right team. Since then we also have a new data system, Liquid Logic, which has meant another change in due to technological advances, referrals are sent directly to a staff members work tray on the system rather than a paper file handed over.

The Matrix standard is a quality framework which helps organisations assess and measure their Information, advice and guidance services. It is the international quality standard for any organisation that delivers IAG, either as their sole purpose (careers advisers) or as part of their service (local authorities). The Matrix standard consists of 4 elements, Leadership and management, resource, service delivery and continuous quality improvement. The standard can be used by organisation to measure quality and identify areas for improvement. It is based around the plan do review model.

Another quality framework is Investors in people. The Investors in People standard explores practices and outcomes within an organisation under three performance headings: leading, supporting and improving. The standard show organisations the small steps they need to support their employees to make to achieve excellence through continuous improvement. By meeting the Investors in People Standard, you can be confident you're amongst the very best in the world, when it comes to people management. It shows as an organisation we are investing in our staff and listening to them on how best to develop the business. The Matrix standard is important in an organisation like ours as we provide IAG as a part of our service and this helps us to measure our services to clients are of a high quality. Investor in people is important to us in a very different way as it shows we are committed to developing our staff and that they are the cornerstone of achieving a quality service.

There are also quality techniques that can be used the manage quality within an organisation. Benchmarking gives us a standard to work to. It is acknowledging good work and raising other to the same benchmark. Organisations can do this internally or benchmark against competitors locally or nationally, even internationally. The key to benchmarking is identifying were you are and where you need to be by using like for like comparison. This can be a good tool to use to make sure you are keeping up with the competition and making your business a viable option for customers however the drawbacks to this is who sets the standard? Is it genuinely comparable? Will this be relevant locally, nationally, internationally? Another tool, which is one we use at Darlington Borough Council, is quality circles. We use this using the Signs of Safety tool to talk through cases that may be stuck in some way. In order for this to work though it has to be facilitated properly and not used as a form of criticism. Some employees can become defensive if they feel as though they or their work is being judged in this group format. The key is to ask questions rather than offer suggestions initially and then maybe some suggestions if another member of staff has had a similar situation or case. Quality circles can be damaging to a team when it is used to gang up on a particular member of staff, if people are very critical and judgemental or if an agreement cannot be made due to very different perspectives. This would need to be well managed and a lot of preparation for guidance and expectations before starting Quality circles. Any potential conflicts would also need to be avoided as soon as they arise as the focus should remain on quality in a positive blame free way that helps staff to grow and progress. How many staff would be willing to share their experience if they felt vulnerable to criticism? For example under the new Early Help team model in Darlington the emphasis is on much more scrutiny of cases and auditing employees assessments by managers on a more frequent basis than before. The previous model's emphasis was more focused on self-management of cases, still with supervisions, but employees were much more autonomous as long as the results were achieved managers were less involved. In the old model staff morale was better generally due to them being mostly self-managed not with more scrutiny there is a culture of paranoia and blame which does not lend itself to quality pieces of work. I think it is difficult as a manager to find ways to manage quality well rather than not managing quality at all.

Bibliography

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<http://matrixstandard.com/about-the-standard/>

<https://www.investorsinpeople.com/iip-standard>