
Preparatory Activity 3

*Towards the new Professional
Profile of Home Care Worker*

Melius, June 2016.



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1. Purpose of the report

The Carevolution project aims at defining an integrated profile of the Enhanced Home Care Worker (EHCW) including new competences and taking in consideration the existing profiles in the partner Countries. In this framework, the first two steps have been the collection and comparison of the existing profiles in Scotland, Basque Country, the Netherlands and Italy, and the research of unmet needs in each Country.

The results of these preliminary activities and the proposals of the partners have been taken in due consideration when preparing this report, which aim is to draft and share a possible proposal of the integrated HCW profile. The proposed profile, anyway, takes in consideration the main difference found out among the systems, regarding the health care competencies.

2. The existing professional profiles

The first activity, as anticipated above, has been the description and comparison of the National/Regional profiles already existing in the partner Countries. In the following paragraphs, a short resume of the findings per country and some comments following the comparison are illustrated.

2.1 Scotland

The SVQ2, Scottish Vocational Qualification 2, includes a wide range of UoCs, among which the candidates to the qualification have to choose two optional, preferred units, while four of them are mandatory (related to supporting effective communication, to supporting health and safety, to increasing knowledge and practice, and to supporting the safeguarding of individuals)¹.

¹ <http://www.sqa.org.uk/sqa/47015.html>; <http://www.ukstandards.org.uk/Pages/index.aspx>; http://www.aldrecentrum.se/Global/TDAR/15-9-2_tdar_context-analysis_country-profiles%20med%20framsida.pdf

2.2 The Netherlands

In the Netherlands official profiles exist only for higher levels, while (home care) work occupations do not fall within the national legislation/law. V&V 2020 has been advising to take action on a new structure for these occupations with priority. Nevertheless, the profile of “care worker” in the Netherlands is corresponding to the CAREVOLUTION project profile: the UoCs include general tasks, then supporting in daily activities and wellbeing, in housekeeping and personal hygiene, assisting in social and recreational activities².

2.3 The Basque Country

In the Basque Country the reference to NQ is “socio-health care for people at home”, to which two occupations correspond, both of level 2: the home care worker and the home care services assistant. Three main, wide UoC are envisaged, related to: physical home care interventions aimed at people with social and healthcare needs, psychosocial home care interventions, activities related to the management and running of the cohabitation unit.³

2.4 Italy

Programming of public social welfare services in Italy is carried out at regional level, whereas delivery of services is entrusted to municipalities. At regional level, Regional Laws no. 5/1994 and no. 29/2004 were issued in Emilia-Romagna to regulate integrated home care services (Assistenza Domiciliare Integrata). The only official professional profile is at level 3, the O.S.S., while a corresponding level 2 profile does not exist, even if the practice of home caring is widely present.⁴

2.5 Comparison and inclusion of unmet needs

The four existing professional profiles analyzed are, according to the National/Regional laws, very different, but most of the competencies of the HCW can be found in all the professional profiles. An effort has been done for identifying competencies areas which could be referred to each of the National systems, in order to allow the creation of a shared, agreed, complete, transnational and innovative EHCW professional profile.

The main competencies areas identified as already included in the HCW profile are the following ones:

- *To support / develop activities related to home and environment safety*
- *To support/develop the home environment care*
- *To promote the relational and psychological welfare of the assisted person*
- *To support in daily living and personal hygiene*

² http://www.ancien-longtermcare.eu/sites/default/files/LTCSYSstemInThe%20Netehrlands_RR90.pdf

³ http://www.aldrecentrum.se/Global/TDAR/15-9-2_tdar_context-analysis_country-profiles%20med%20framsida.pdf

⁴ <https://www.operatorosociosanitario.net/oss-profilo-professionale/oss-profilo-professionale-per-operatore-socio-sanitario>

- *To support personal health care*
- *To support effective communication*

To these or within these areas, as a result of the “unmet needs” survey, the following competencies have been added or enhanced (as in the case of communication and health care) taking in consideration all the Partners’ suggestions:

- *Effective communication in EHCW*
- *Self-development of the EHCW*
- *Health Care for EHCW*
- *ICT and electronic assisted technology for EHCW*

The proposed profile will take in consideration the results of the above mentioned preparatory activities, the meetings discussions, and the wide literature on this subject. Thus, the resulting profile will not fully adhere to each National existing profile, but each partner Country and in general all the EU Institutions in the field of Home Care Work can easily adapt it to their existing structures and certifications.

3. What the Enhanced Home Care Worker should be

3.1 Definition of EHCW

The HCW profile differs in each Country, depending on the needs areas felt as most relevant to satisfy, and – this is the highest problem – on the EQF level. In fact, the analyzed existing profiles are level 2 in Scotland, Spain, being developed as level 2 in the Netherlands, whilst in Italy the only professional profile in the sector is level 3.

This situation has brought to choose the solution of creating an enhanced level 2 profile where all the areas of competencies found out as relevant are included, and to propose it also where a corresponding profile does not exist officially. This profile, integrated with competences facing the found out unmet needs, has been defined as Enhanced Home Care Worker (EHCW).

In general, the EHCW can be defined as

***A PERSON BEING AWARE OF AND USING HIS/HER SKILLS AND COMPETENCES,
WORKING IN A STRUCTURED OR UNSTRUCTURED NETWORK OF PROFESSIONALS,
ABLE TO CARRY OUT ACTIVITIES OF INTEGRATED CARE AT HOME AND ASSISTANCE
TO PEOPLE WITH CHRONIC HEALTH CONDITIONS, IN ORDER TO MEET THEIR BASIC
NEEDS AND PROMOTE THEIR WELL-BEING AND AUTONOMY AND SOCIAL
INTEGRATION.***

3.2 The EHCW integrated professional profile proposal

<i>EQF level</i>	<p style="text-align: center;"><i>2 plus</i></p> <p><i>Knowledge: Basic factual knowledge of a field of work or study</i></p> <p><i>Skills: Basic cognitive and practical skills required to use relevant information in order to carry out tasks and to solve routine problems using simple rules and tools</i></p> <p><i>Competence: Work or study under supervision with some autonomy</i></p>
<i>Professional profile definition</i>	<i>Enhanced Home Care Worker</i>
<i>Professional profile description</i>	<p><i>He/she is able to work in the clients living environment but also in the environment where a client may get long term or temporary/short care. He/she can work in a nursing home, social domain, carecenter, hospital care, (special) education, day care, assisted living etc.</i></p> <p><i>Tasks are done on a question based need for one or more clients and involved/related people (family, friends).</i></p> <p><i>He/she is able to adapt to te careplans, capabilities, wishes, needs, values, beliefs, habits and cultural background of client and relations.</i></p> <p><i>He/she guards privacy, is aware of her influence and of the effect of her behaviour on client and relatives.</i></p> <p><i>He/she is able to communicate effectively with clients, families, network workers.</i></p> <p><i>He/she has basic knowledge of the main diseases and of the National legislation related to Health Care and Data Protection.</i></p> <p><i>He/she is able to use the ICT tools and Electronic Assisted Technology related to clients' home care.</i></p>
<i>ESCO/ISCO areas</i>	5133

3.3 UoCs of the complete EHCW profile

In the following tables all the Unit of Competences for the already existing HCW profile are listed – combining the National Profiles in a common view – where new competences matching with unmet needs are in brown, as no new units will be developed - and the new or widened units of competences for bringing the HCW profile to become the EHCW one are added, in blue:

- *To support / develop activities related to home and environment safety*
- *To support/develop the home environment care*
- *To support/promote the relational and psychological welfare of the assisted person*
- *To support in daily living and personal hygiene*
- *To support health care*
- *To use effective communication in a person centred/family centred approach*
- *To adopt/suggest tools and solutions for the self-development of the EHCW*
- *To be able to use/suggest the use of Assisted Living technology for home care*

3.3.1 To support / develop activities related to home and environment safety

UoC: To support / develop activities related to home and environment safety	
Skills	Knowledge
Carries out health and safety checks before beginning work activities	What and how to check safety in the client's home and environment
Ensures actions supporting health, safety and security in the place where he/she works	What and how to ensure safety and security in the workplace
Takes action to deal with emergencies	Actions to be undertaken in case of emergency
Clarifies his/her awareness of harm, abuse and safeguarding	Definitions and cases of harm, abuse and safeguarding
Supports practices that help to safeguard individuals from harm or abuse	Main practices helping safeguarding individuals
Relates to individuals and key people in ways that support safeguarding	How to behave and to relate with key people for supporting safeguard
Works in ways supporting rights, inclusion and wellbeing of individuals	Common principles and practical aspects of current legislation on safety
Supports individuals to keep themselves safe	How to support individuals to keep themselves safe
Contributes to evaluating risks associated with working at home and encourages prevention and reduction of risk factors	Main risks associated with working at home, rules and patterns of behavior

3.3.2 To support/develop the home environment care

UoC: To support/develop the home environment care	
Skills	Knowledge
Cleans or checks cleaning of rooms, work areas, equipment and surfaces	Techniques of hygiene and safety in the living environment and patient care
Monitors and maintains the cleanliness of environments	Time organization for hygiene and safety in the living environment and patient care
Organizes the space, applying the technical aids prescribed by optimizing accessibility and mobility conditions	Space organization for hygiene and safety in the living environment and patient care
	How to detect demands and special needs of the

<i>Helps with the household management detecting demands and special needs which can require referral to competent professionals and services</i>	<i>client. How and when to refer them to competent professionals and services</i>
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3.3.3 To support/promote the relational and psychological welfare of the assisted person

UoC: To support/promote the relational and psychological welfare of the assisted person	
Skills	Knowledge
<i>Receives visitors in health and social care settings</i>	<i>Main types of users and service issues</i>
<i>Receives visitors according to work setting requirements and procedures</i>	<i>Simple recreational activities</i>
<i>Supports individuals and their visitors during a visit</i>	<i>How to deal with visitors keeping the safety and hygiene needed level</i>
<i>Takes action to control the activities of visitors where necessary</i>	<i>Main individual and group animation techniques</i>
<i>Supports individuals to plan and make short journeys</i>	<i>How to plan short journeys keeping the safety and hygiene needed level</i>
<i>Accompanies individuals on journeys</i>	<i>How to make short journeys keeping the safety and hygiene needed level</i>
<i>Asks specific questions to clients/relations to find out about wishes, needs, abilities and possibilities</i>	<i>Communication and interpersonal techniques in relation to various disease / discomfort and dependence, with particular reference to situations of dementia</i>
<i>Gives information support on the mental and physical health of the assisted to the family and to services</i>	
<i>Handles his/her own feelings and emotions in a professional way when enduring difficult situations, resistance or setback</i>	
<i>Proactively finds out about strengths, possibilities, perceptions and state of mind of individuals and their relations</i>	
<i>Handles his/her own feelings and emotions in a professional way when enduring difficult situations, resistance or setback</i>	
<i>Supports individuals who are distressed Identifies aspects of individuals' lives that may cause distress</i>	

<p><i>Works with individuals and others to alleviate their distress</i></p> <p><i>Supports individuals through periods of stress and distress</i></p> <p><i>Supports individuals to take part in development activities</i></p> <p><i>Prepares for participation in development activities</i></p> <p><i>Supports the individual to participate in development activities</i></p> <p><i>Contributes to the evaluation of development activities</i></p>	
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3.3.4 To support in daily living and personal hygiene

UoC: To support in daily living and personal hygiene	
Skills	Knowledge
<p><i>Helps address the physical comfort needs of individuals</i></p> <p><i>Assists in minimising individuals' pain or discomfort</i></p> <p><i>Assists in providing conditions that will help the individual to rest</i></p> <p><i>Supports individuals to meet their domestic and personal needs</i></p> <p><i>Supports individuals in the preparation of food that meets their nutritional and dietary requirements</i></p> <p><i>Handles and prepares food (or supports the preparation) according to the nutritional requirements, respecting the current food hygiene regulations and noting in each case any specific medical prescriptions related to special diets</i></p> <p><i>Supports individuals to manage their personal appearance</i></p>	<p><i>Basic knowledge of anatomy</i></p> <p><i>Basic knowledge about client segments</i></p> <p><i>Basic knowledge about group processes during activity</i></p> <p><i>Basic knowledge about guidelines, rules, regulations, reporting requirement, home safety</i></p> <p><i>Basic knowledge about (healthy) food and food safety</i></p> <p><i>Tools and techniques for personal hygiene and dressing</i></p>

<p><i>Carries out observations in relation to therapy sessions</i></p> <p><i>Contributes to reviewing the effectiveness of therapy sessions</i></p> <p><i>Tidies the environment and materials after therapy sessions</i></p> <p><i>Assists in the administration of medication</i></p> <p><i>Supports individuals to prepare and carry out their own healthcare and monitoring procedures</i></p> <p><i>Supports individuals to carry out their own healthcare procedures for treatments and dressings</i></p> <p><i>Supports individuals to monitor their own health by obtaining specimens and taking physical measurements</i></p> <p><i>Supports individuals to manage materials and equipment safely after carrying out healthcare and monitoring procedures</i></p> <p><i>Receives and stores medication and products</i></p> <p><i>Obtains and tests capillary blood samples</i></p> <p><i>Obtains and tests specimens from individuals</i></p> <p><i>Contributes to the care of a deceased person</i></p> <p><i>Detects new or progressive symptoms</i></p> <p><i>Communicates detected symptoms</i></p> <p><i>Promotes health & helps preventing diseases & complications</i></p>	<p><i>medications</i></p> <p><i>Basic techniques and protocols of intervention and first aid</i></p> <p><i>Basic legal and regulatory references for the care and assistance activities, data protection and personal protection equipment</i></p> <p><i>Basic knowledge about chronic conditions</i></p> <p><i>Basic knowledge about promotion of health & prevention of disease</i></p> <p><i>Basic knowledge about Cognitive improvement strategies</i></p>
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3.3.6 To use effective communication in a person centred/family centred approach

UoC: To use effective communication in a person centred/family centred approach	
Skills	Knowledge
<i>Adapts way of communicating to the group in an adequate manner even if the group is diverse in background and/or culture</i>	<i>Communication and interpersonal techniques in relation to various disease / discomfort and dependence, with particular reference to situations</i>

<p><i>Identifies how best to support communication with and by individuals</i></p> <p><i>Supports individuals to communicate</i></p> <p><i>Communicates with individuals and key people</i></p> <p><i>Responds to questions and concerns of individuals and key people</i></p> <p><i>Contributes to communicating through records and reports</i></p> <p><i>Supports individuals to access, use and evaluate information on services and facilities</i></p> <p><i>Deals with messages and information</i></p> <p><i>Processes messages received</i></p> <p><i>Passes on messages</i></p> <p><i>Responds to requests for information</i></p> <p><i>Represents one's professional opinions and listen other team members, including patients, when expressing their opinions and contributing to decision making</i></p> <p><i>Actively participates to the flow and exchange of information among the patient, family members and relevant providers</i></p> <p><i>Ensures the flow and exchange of information among the patient, family members and relevant providers</i></p> <p><i>Demonstrates active & emphatic listening</i></p> <p><i>Communicates in a non-judgmental manner</i></p> <p><i>Contributes to health education that are appropriate to the communication style and literacy of the patients and family members and reinforces information provided verbally</i></p>	<p><i>of dementia</i></p> <p><i>Information tools for recording and / or transmission of data</i></p> <p><i>Main individual and group animation techniques</i></p>
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Advocates for the role of the patient & family members in healthcare decisions

Comprehends that effective care planning requires several discussions with the patient and other parties, over time

Uses focused interventions to engage patients and increase their desire to improve health and adherence to care plans (motivation)

Contributes to working in partnership with informal carers to support individuals and to plan support for their own needs and preferences

Contributes to working in partnership with informal carers to access resources, service and facilities

Contributes to the review of services and facilities for informal carers

Contributes to effective group care that helps to meet the needs of group members

Contributes to group care programmes and activities

Contributes to the assessment of group care

Actively participates to the flow and exchange of information among the patient, family members and relevant providers

Ensures the flow and exchange of information among the patient, family members and relevant providers

Links patient and family members with needed resources & financial assistance

*Assesses the nature of the patient's family (if appropriate), social supports and other socio-economic resources that impact on patient's health
Clearly identifies and supports roles and responsibilities of all team members, including patients*

<p><i>Demonstrates practicality, flexibility, and adaptability in the process of working with others, emphasizing the achievement of treatment goals</i></p> <p><i>Contributes to solve differences of opinion or conflicts quickly and without acrimony</i></p>	
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3.3.7 To adopt/suggest tools and solutions for the self-development of the EHCW

UoC: To adopt/suggest tools and solutions for the self-development of the EHCW	
Skills	Knowledge
<p><i>Reflects on his/her current practice: role, risks, problem solving.</i></p> <p><i>Plans to develop his/her knowledge and practice</i></p> <p><i>Applies acquired knowledge and skills in his/her work</i></p> <p><i>Reflects on time management and prioritizing the needs of the Individual</i></p> <p><i>Regularly engages in continuing professional development</i></p> <p><i>Participates in practice-based learning and improvement activities</i></p> <p><i>Regularly engages in interdisciplinary training for staff</i></p>	<p><i>Limits, responsibilities, risks of his/her role and of the roles of the team members</i></p> <p><i>How to evaluate the feedback from professionals, family and the individual for improving practice</i></p> <p><i>Basic techniques of problem solving and decision making</i></p> <p><i>Basic techniques of time management</i></p> <p><i>Available continuing professional development</i></p> <p><i>The advantages of practice-based learning to developing his/her knowledge and practice</i></p> <p><i>The advantages of interdisciplinary training to developing his/her knowledge and practice</i></p>

3.3.8 To be able to use/suggest the use of Assisted Living technology for home care

UoC: To be able to use/suggest the use of Assisted Living technology for home care	
Skills	Knowledge
<p><i>Is able to use ICT and A.L. technology for enhancing wellbeing of the individuals in the home care</i></p> <p><i>Is able to use digital devices for communication without decreasing the empathy level</i></p> <p><i>Is able to use ICT for information & reporting with Care Professionals and families</i></p>	<p><i>Knowledge and use of the main A.L. tools for home care service</i></p> <p><i>Knowledge and use of the existing ICT tools for communicating and reporting between care professionals</i></p>

Is able to use ICT for care (ambient assisted living & telecare, telehealth)

Is able to support the elderly person and family in the use of ICT and A.L. technology

Is actively engaged in the deployment of technology at home

Is able to encourage the use of A.L. technology and ICT to reduce social isolation, to be part of Virtual Communities

Knowledge and use of the main tools for ambient assisted living, telecare, telehealth

Knowledge and use of Smart Homes and Domotic Sensors

Knowledge and use of robotic applications and devices for improving mobility

Legislation and Policies and Procedures related to E.A. Technology

4. Beyond the HCW profile

In the previous paragraphs, the idea of what the EHCW should be, which competences should possess, how much should be advanced his/her knowledge has been given. Nevertheless, as anticipated in the PA1 and 2, the situation we are facing is that of already existing profiles and qualifications in each partner, and in each European country⁵. It would be too ambitious, and sincerely quite unrealistic, to try to change the existing systems which, furthermore, have required decades to become as they are.

*The realistic, attainable purpose of this project is to influence the system by ADDING, where possible, and in any case by suggesting the adoption or improvement, of new training curricula for the enhancement of the HCW professional profile in the context of integrated care models. This is the reason why, after having considered the whole, complete theoretical profile of the EHCW, the final choice has been to develop **4 new or enhanced units**, in order to allow the creation of a sharable, exploitable, adaptable, transnational and innovative EHCW professional profile as a “plus” towards the existing National qualifications. The choice of matching these enhanced competences again with a level 2, whilst “plus” – or better empowered, has been taken for social and economic reasons. With reference to the levels’ description in the (EQF), defining level 2 and three in the following way:*

EQF Level	Knowledge	Skills	Competence
	In the context of EQF, knowledge is described as theoretical and/or factual.	In the context of EQF, skills are described as cognitive (involving the use of logical, intuitive and creative thinking), and practical (involving manual dexterity and the use of methods, materials, tools and instruments)	In the context of EQF, competence is described in terms of responsibility and autonomy.
Level 2	Basic factual knowledge of a field of work or study	Basic cognitive and practical skills required to use relevant information in order to carry out tasks and to solve routine problems using simple rules and tools	Work or study under supervision with some autonomy
Level 3	Knowledge of facts, principles, processes and general concepts, in a field of work or study	A range of cognitive and practical skills required to accomplish tasks and solve problems by selecting and applying basic methods, tools, materials and information	Take responsibility for completion of tasks in work or study; adapt own behaviour to circumstances in solving problems

In the following paragraphs, the EHCW profile, as further qualification of level 2 HCW in a homecare service career, will be detailed according to the needed development of the training curricula for achieving it.

⁵ http://www.euro.who.int/_data/assets/pdf_file/0008/181799/e96757.pdf

5. The EHCW profile as a “plus” qualification of the HCW profile

EQF level	2 plus <i>Knowledge: Basic knowledge of facts, principles, processes and general concepts in a field of work or study</i> <i>Skills: Basic cognitive and practical skills required to use relevant information in order to carry out tasks and to solve routine problems by selecting and applying basic methods, tools, materials and information</i> <i>Competence: Work or study under supervision, but with some autonomy and adapting own behaviour to circumstances in solving problems</i>
Pre-requisites	<i>Previous qualification as HCW according to NQFs</i>
Professional profile definition	<i>Enhanced Home Care Worker</i>
Professional profile description	<i>He/she is able to work in the clients living environment but also in the environment where a client may get long term or temporary/short care.</i> <i>He/she can work in a nursing home, social domain, carecenter, hospital care, (special) education, day care, assisted living etc.</i> <i>Tasks are done on a question based need for one or more clients and involved/related people (family, friends).</i> <i>He/she is able to adapt to the careplans, capabilities, wishes, needs, values, beliefs, habits and cultural background of client and relations.</i> <i>He/she guards privacy, is aware of his/her influence and of the effect of his/her behaviour on client and relatives.</i> <i>He/she is able to communicate effectively with clients, families, network workers.</i> <i>He/she has basic knowledge of the main diseases and of the National legislation related to Health Care and Data Protection.</i> <i>He/she is able to use the ICT tools and Assisted Living Technology related to clients' home care.</i>
ESCO/ISCO areas	<i>5133</i>

The partnership, starting from the competences and knowledges listed in the complete EHCW profile as a result of the preliminary activities, has analyzed each of the units and "rebuilt" the competences and knowledges in a more detailed, structured way, in order to allow an easier development of training programmes. Thus, even if the main contents of each unit can be found in both tables, there is no strict correspondence to the units as shown in the previous paragraphs in the following ones, which are the

final ones, to be used for developing training courses and materials with a further detail and further specifications. Furthermore, for Unit "Health Care for EHCW" two sub-units have been built, as in some partner Countries there is a need of widening health related competences for HCW, while in other ones this is not possible, as National laws do not allow HCWs to provide any medications to individuals.

5.1.1 Health Care for EHCW

UoC: Health Care	
Competences (divided in part A and part B, this latter including competences required only in some Countries and national Systems)	Knowledge
<p>A Supports the rights and wellbeing of individuals when they undergo healthcare procedures</p> <p>Supports individuals before, during and after healthcare procedures in line with their care plan</p> <p>Supports the individual with their eye, dental, podiatry care</p> <p>Detects new or progressive symptoms and communicates them to the care professionals</p> <p>Works collaboratively with other actors of the network and acts according to the specialists' advice</p> <p>Receives and stores medication and products</p> <p>Supports individuals with Stoma, Catheters, peg feeding, etc. by providing information and emotional support</p> <p>Detects risks of complications in individuals with Stoma, Catheters, peg feeding, etc., and communicates them to the care professionals</p> <p>Monitors and records pressure area care</p> <p>Supports individuals with dementia and mental diseases, etc. in a creative way in line with their care plan</p>	<p>Basic knowledge of human anatomy and physiology</p> <p>Basic knowledge about common and relevant illness and symptoms (cardiovascular diseases, diabetes, respiratory, etc...)</p> <p>Basic knowledge of dementia diseases, neurological disorders and mental illness</p> <p>Basic legal and regulatory references for the care and assistance activities, data protection and personal protection equipment</p> <p>Basic knowledge of Catheter, Tracheostomy, Stoma, Peg Tube Care, etc..</p> <p>Basic knowledge of eye care, dental care, and podiatry</p> <p>Basic knowledge about chronic conditions and symptoms of deterioration</p> <p>Techniques of hygiene and safety in the living environment and patient care</p> <p>Basic knowledge of feeding and food hygiene preparation</p> <p>Basic knowledge of mobilization techniques and equipment</p>

<p><i>Monitors individuals' wellbeing and reporting any deterioration</i></p> <p><i>Supports the individual in increasing autonomy and self-confidence through active involvement</i></p> <p>B</p> <p><i>Feeds the individual and ensures correct hygiene in food preparation</i></p> <p><i>Administers medications to the individual (by mouth, rectal or topical administration)</i></p> <p><i>Assists the individual in their eye, dental or podiatry care.</i></p> <p><i>Detects new or progressive symptoms, communicates them and takes appropriate actions in case of risk</i></p> <p><i>Supports individuals in the use of catheter care, peg tube feeding, stoma care, tracheostomy care, oxygen saturation measurement, etc.</i></p> <p><i>Takes physical measurements and monitoring of fluid intake/output</i></p> <p><i>Mobilises or supports mobilization of bedridden individuals</i></p> <p><i>Monitors the individual's psychological wellbeing, reporting any deterioration</i></p> <p><i>Works collaboratively with other actors of the network and acts according to the specialists' advice</i></p> <p><i>Supports the rights and wellbeing of individuals when they undergo healthcare procedures</i></p>	<p><i>Basic knowledge of medicines for chronic diseases</i></p> <p><i>Basic knowledge of skin and pressure area care</i></p> <p><i>Basic knowledge about promotion, motivation and education on health & prevention of disease</i></p> <p><i>Basic knowledge about activities in care and wellbeing in a Person/Family centred approach</i></p> <p><i>Basic advocacy skills for advocating on behalf of the individual</i></p> <p><i>Basic knowledge about Cognitive improvement strategies</i></p>
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5.1.2 Effective communication for EHCW

UoC: Communication	
Competences	Knowledge
<p><i>Communicates with individuals whose ability to communicate has been affected by their health conditions</i></p> <p><i>Supports individuals to communicate through basic counselling skills</i></p> <p><i>Uses basic counselling skills, active listening and reflecting of feelings to encourage the individual to express their feelings and to develop their self-confidence</i></p> <p><i>Actively participates to the flow and exchange of information and advice among the individual, key people members and relevant professionals</i></p> <p><i>Supports the individual to discuss their health with care professionals and key people</i></p> <p><i>Actively and effectively advocated on behalf of the individual in healthcare decisions</i></p> <p><i>Assesses the nature of the key people (if appropriate), social supports and other socio-economic resources that impact on individual's health</i></p> <p><i>Links individual and key people with needed resources & financial assistance</i></p> <p><i>Adapts way of communicating to the group in an adequate manner even if the group is diverse in background and/or culture</i></p> <p><i>Identifies how best to support communication with and by individuals</i></p> <p><i>Contributes to solve differences of opinion or conflicts quickly and without acrimony</i></p> <p><i>Demonstrates practicality, flexibility, and adaptability</i></p>	<p><i>Basic communication theory and interpersonal and techniques in relation to various chronic diseases / discomfort and dependence, with particular reference to situations of dementia and mental diseases</i></p> <p><i>Empathic listening</i></p> <p><i>Conflict management</i></p> <p><i>Assertiveness</i></p> <p><i>How to use effective communication skills to increase the Individual's self-confidence</i></p> <p><i>How to use effective communication skills in inter-disciplinary team working</i></p> <p><i>The stresses that Key People may experience in their support of the Individual</i></p> <p><i>The skills of effective networking for the benefit of the Individual</i></p> <p><i>How and when to inform in a clear, detailed way the professionals' network and key people</i></p> <p><i>Knowledge and use of information tools for recording and / or transmission of data</i></p> <p><i>How to enable the individual to develop or maintain social relationships</i></p> <p><i>Communication skills needed for effective inter-disciplinary team working</i></p> <p><i>Main individual and group animation techniques</i></p> <p><i>Relevant Legislation and Organisational Policies and Procedures related to Communication and</i></p>

<p><i>in the process of working with others, emphasizing the achievement of care goals</i></p> <p><i>Ensures a smooth flow and exchange of information between the Individual, Key People in their life and the Care Providers</i></p> <p><i>Contributes to communicating through records and reports</i></p>	<p><i>Confidentiality of information</i></p>
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5.1.3 Self-development and the EHCW

UoC: Self-development of the EHCW	
Competences	Knowledge
<i>Reflects on his/her current practice: professional values, role, risks, problem solving</i>	<i>Ways for improving practice through reflection</i>
<i>Deals with the dilemma of his/her own values clashing with those of the individual and demonstrates a sensitive and non-judgmental approach</i>	<i>How to deal with clashes of value with the individual</i>
<i>Plans to develop his/her knowledge and practice</i>	<i>How to take in due consideration and how to use the feedback from the individual about individual's needs and strengths</i>
<i>Applies acquired knowledge and skills in his/her work</i>	<i>Limits, responsibilities, risks of his/her role and of the roles of the inter-disciplinary team members</i>
<i>Reflects on time management and prioritizing the needs of the Individual</i>	<i>How to evaluate the feedback from professionals, key people and the individual for improving practice</i>
<i>Regularly engages in continuing professional development</i>	<i>Basic techniques of problem solving and decision making</i>
<i>Participates in practice-based learning and improvement activities</i>	<i>Basic techniques of time management and workload control</i>
<i>Regularly engages in interdisciplinary training for staff</i>	<i>Professional management of the personal emotions</i>
<i>Reflects on the feedback from the Individual in order to alter his/her practice or enhance his/her knowledge</i>	<i>The advantages of practice-based learning to developing his/her knowledge and practice</i>
<i>Manages conflict situations</i>	<i>Available continuing professional development</i>
	<i>The advantages of interdisciplinary training to</i>

<p><i>Takes in consideration supervisors' feedback for increasing his/her understanding and developing his/her practice</i></p>	<p><i>developing his/her knowledge and practice</i></p> <p><i>The legal and organisation responsibilities for accessing training and improving knowledge and practice</i></p> <p><i>The role of supervision in developing his/her practice</i></p>
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5.1.4 Assisted Living Technology for home care

UoC: Assisted Living Technology for home care	
Competences	Knowledge
<p><i>Is able to use A.L. technology for enhancing wellbeing of the individuals in the home care</i></p>	<p><i>Knowledge, effectiveness and use of the main A.L. tools for home care service</i></p>
<p><i>Is able to use digital devices for communication without decreasing the empathy level</i></p>	<p><i>What are and what is the difference between the main tools for ambient assisted living, telecare, telehealth</i></p>
<p><i>Is able to use digital tools for information & reporting with Care Professionals and key people</i></p>	<p><i>Knowledge and use of the existing ICT tools for communicating and reporting between care professionals</i></p>
<p><i>Is able to use A.L. Technology for health care (ambient assisted living & telecare, telehealth)</i></p>	<p><i>Knowledge and use of the existing ICT tools for communication between the individual and health and social care professionals</i></p>
<p><i>Is able to support the individual and key people in the use of A.L. technology</i></p>	<p><i>Available digital tools are for information gathering, processing and analysis</i></p>
<p><i>Is actively engaged in the deployment of technology at home</i></p>	<p><i>How actively engaging people in their disease management or wellness promotion through A.L. Technology is more likely to lead to a positive outcome</i></p>
<p><i>Is able to encourage the use of A.L. technology to reduce social isolation, to be part of Virtual Communities</i></p>	<p><i>Knowledge and use of robotic applications and devices for improving mobility</i></p>
<p><i>Is able to use and explain to the individual the advantages of robotic applications for improving mobility</i></p>	<p><i>Knowledge and use of Smart Homes and Domotic Sensors</i></p>
<p><i>Applies legislation and organizational procedures while using A.L. technology</i></p>	

	<p><i>Communication through A.L. Technology: empathy, virtual presence</i></p> <p><i>Challenges and safety issues associated with A. L. Technology</i></p> <p><i>Legislation and Policies and Procedures related to A.L. Technology</i></p>
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6. Conclusions

The above proposed EHCW profile is to be considered as a response to the unmet needs of a growing home care social emergency. In all the EU Countries adult social and health care are more and more brought towards a home care system, integrating a network of care professionals and the key people (family, friends, neighbors) for the individual wellbeing.

As stated above, the profile is built taking in consideration some assumptions:

- 1. In all Countries there are existing services, and in most of them also official profiles*
- 2. There are many differences among the national services, impacting also on the profiles*
- 3. The existing qualification of HCW are mostly corresponding to Level 2 EQF, and a level 3 would be too different and would not make possible an integration with the existing framework, in most EU Countries*
- 4. The profile has to be intended as a “plus”, a further qualification within level 2, with and increased autonomy and competence, but not achieving level 3 one.*

On this general basis, a EHCW general training curricula will be detailed and built, and national adaptations will be prepared in order to test and validate the effectiveness of the new EHCW profile.