



Empowering The Employabilities of Low-Skilled and Low-Qualified Adults in Home Care Sector



EMPOWER4EMPLOYMENT
Erasmus+ KA204
Strategic Partnerships for Adult Education

PROJECT NUMBER: 2019-1-TR01-KA204-076960

EMPOWER4
EMPLOYMENT





TRAINING CURRICULUM IO2

**Empowering The Employabilities of
Low-Skilled And Low-Qualified Adults
in Home Care Sector Project**

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Introduction

Moving to a competence-oriented approach in education, training and learning represents a paradigm shift. It impacts not only on the structure of curricula, but also changes the organisation of learning. Implementing competence-oriented education, training and learning requires often cross-curricular approaches a greater emphasis on interactive learning and teaching styles, combining formal with non-formal and informal learning, more collaboration with non-education stakeholders and local community, a new role of the teacher, trainer, and educator in guiding learning processes as well as new approaches to assessment.

In the 'More Better Jobs for Home Care' report published by EUROFOUND the following are advised.

- Targeting labour reserves to attract new employees to the sector, including the recruitment of unemployed people and groups such as immigrants and labour migrants.
- Promoting and facilitating the education of potential employees – by, for example, creating specific learning paths, developing campaigns to encourage young people to choose a career in the sector and improving the relationship between this labour market and educational institutions:
- Improving the working conditions of current employees to optimise their potential and retain them in the sector – for instance, by introducing training programmes, professionalising the sector and providing more career opportunities for existing employees.

(<https://www.eurofound.europa.eu/publications/report/2013/labour-market-social-policies/more-and-better-jobs-in-home-care-services>)

Brief description

The previous stages of the E4E project implementation, i.e., a review of specialist literature in the field of care for the elderly and the disabled patients, as well as focus interviews with the specialists - mainly the practitioners in this area, clearly indicated the need to change the approach to educating future careers by drawing on various resources. The preparation of a methodological guide on the basis of which the training program will be developed, and then its effectiveness will be checked during the testing phase, are the subsequent activities in the E4E project.

Providing safety and professional care to the elderly and disabled patients in their place of residence poses undoubtedly one of the greatest challenges, not only in terms of health policy and social assistance, but also with regard to the functioning of the family. The aim of this care is not so much about regaining the previous fitness, vitality and health by the elderly and disabled ones, but improving the quality of their lives by offering them support, care and assistance with due respect and the possibility of self-decision at the same time.

Providing care for the dependent people is associated with certain costs that are borne by the family or the state budget. The most beneficial form of care, both in terms of psycho-social and economic

aspects, is making sure that the patient can function in the abode environment for as long as possible.

The more we know about old age and disability, the easier it is for us to understand ourselves and the others. What are the needs of the elderly and disabled people? What situation is conducive to accepting the passing time and the loss of strength? What is worth remembering? Who can become a home care worker? What competences and skills must the home care worker represent? What does it take to prepare a tutor for work? In what way should care be prioritized? These are the questions and many others that arise with reference to taking care of the dependent persons.

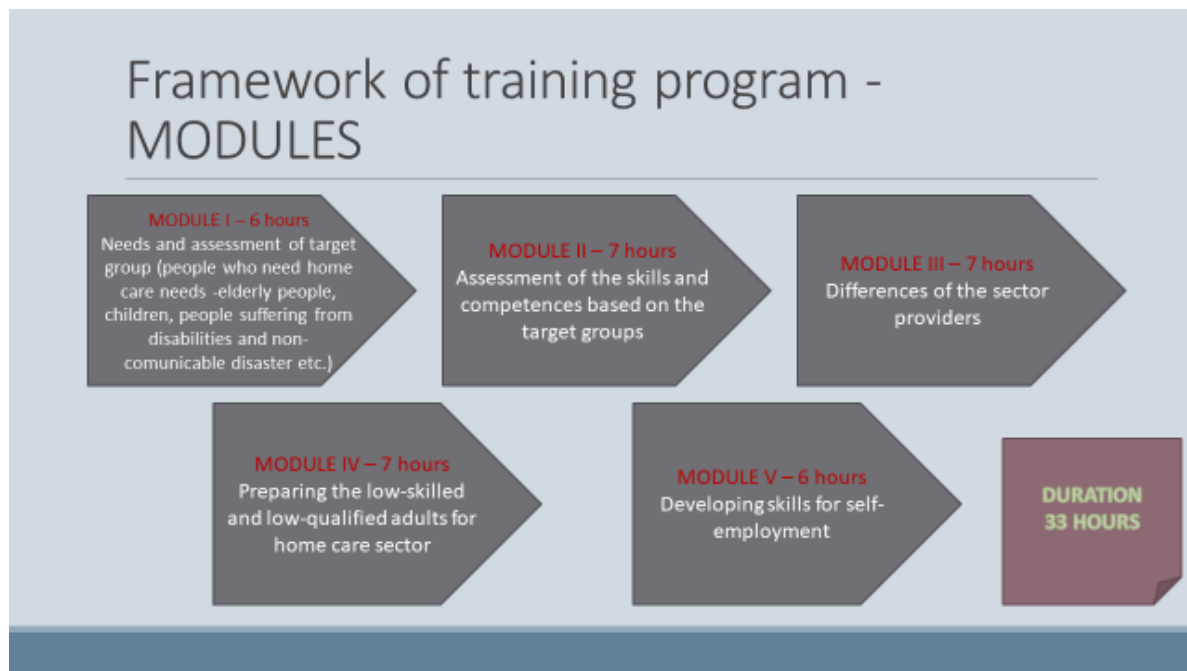
The effect of this stage of the project implementation is the preparation of such a training that will not only address these compelling questions, but also provide the future careers with a sense of being well prepared for work when exploiting their individual resources. It will also allow them to take up and maintain satisfactory employment despite low qualifications as well as will afford tangible benefits for the dependent ones and their families.

Aim

The aim of the training curriculum aimed at trainers, educationalist, job coaches, public servants, third sector workers is to provide tools and methodologies on supporting and empowering the low-qualified and low-skilled adults to find a job career in home care sector.

The Training Curriculum is based on the Skills/Competences Determination Handbook containing data from each partner country on the various job profiles in the home care sector; references to the EQF levels in order to compare the different national qualification systems; competence assessment methods and the skill gaps of professionals that must be addressed in the EMPOWER4EMPLOYMENT Training.

Structure



Module 1 - Needs and Assessment of Target Group – Unit

<p>Main contents</p>	<p>Needs and Assessment Guidance Module.</p>
<p>A short description of the objectives to be reached</p>	<p>4.0 Unit One</p> <p>Introduction to Health Needs and Assessment</p> <p>The overall aims and objectives of Unit One is encourage the development of a supportive learning environment for those participating. The overall objective is to attain the knowledge and skill in completing the Needs and Assessment and the benefits to why should be completed.</p> <p>Summary of the content</p> <ul style="list-style-type: none"> • Group introductions • Setting the ground rules for the group • Defining health needs assessment • Why complete a Health Needs and Assessment? <p>5.0 Unit Two</p> <p>Principles and Concepts of Health Needs and Assessment</p> <p>The overall aim of Unit two is to explore the concepts underpinning Health Needs and Assessment and to learn how it should be done.</p> <p>Summary of the content</p> <ul style="list-style-type: none"> • Defining health? • Defining what is a “health need”? • Factors that influence a person’s health • What is equity in health, what do we mean? • Ethical issues and Health Needs and Assessment <p>6.0 Session Three</p> <p>How to complete</p> <p>The overall aim of Unit Three is to find out what health information is needed</p>

	<p>and how to collect and use health data.</p> <p>Summary of the content</p> <ul style="list-style-type: none"> • How to complete a Health needs and Assessment • Exploring and identifying different types of health information • Using and collecting health information • Sources of information • Involving local people • Planning your own health needs assessment <p>7.0 Session Four</p> <p>Using the Health Needs and Assessment</p> <p>Agreed field observations – SMART.</p> <p>Specific-Measurable-Achievable-Realistic-Time</p> <p>Summary of the content</p> <ul style="list-style-type: none"> • Presentation of the individual profile for Continued Personal Development • Agreed action planning assessment – Ensuring SMART has been followed. • Evaluation and sign off...date for next review and field observations
Units	Unit 1 – 4.0 Introduction to health needs assessment
Topic	Introduction to Health Needs and Assessment Process.
Aims	<ul style="list-style-type: none"> • Developing a supportive learning environment. • For students to understand what a Health Needs and Assessment is and why it should be completed.

The main activities
– program flow
process, its stages,
description of
activities, tasks;

4.1 Group introductions

- To encourage the group to learn from each other (peer learning), by sharing their views they will need to get to know each other quickly.
- Fun interactive introductory tasks are useful tools in helping a group in developing cohesion.
- To be successful in achieving this, the trainer must adopt a facilitative approach to the session.
- There are a variety of different ways of introducing oneself, such as simply saying one's name and job. However, you could be more innovative and creative by making it more interesting, creating an informal atmosphere.
- An example is illustrated below...however, there are plenty more ways of breaking the ice with a new group.

4.2 Example Activity:

Ask the participants to pair up with someone they do not know and get them to interview each other. You could provide a set number of questions in which the pairs will have to extract the information, write it down and then relate back to the group. A time of 15/20 mins should be sufficient, and each pair will be called to introduce each other person to the whole group.

Although not exhaustive, example questions could be.

- Current work
- Home
- An interesting fact (E.g., they are related to someone famous)
- What they are hoping to get out of the Module.

4.3 Setting/agreeing ground rules for the group

The main objective of this exercise will help participants to feel a sense of ownership of the group and the training programme. Setting ground rules increases commitment and willingness to participate and learn from each other. This exercise will provide the participants to openly discuss how they wish the group to be run, ensuring that learning is effective and takes place in a supportive and positive atmosphere. Participants are asked to think about this and write a list, taking into consideration the behaviour of the people in the group (participants and facilitators). Once the rules have been agreed each participant will be invited to sign their name on the whiteboard/flipchart etc and a photo will be taken for dissemination. The flipchart with the rules and signatures should be displayed in the room as a reminder to everyone of their

commitment and participation. At the end of the session provide feedback to whole group and reflect on the process of doing this exercise.

4.4 Defining health needs assessment

This activity is an informal initial assessment that will assist the trainer in discovering what the participants existing knowledge of what a health needs assessment means. It can be adapted to within the context of participants own practice and the local health care system. This activity will highlight the participants' knowledge of their own health care system and to identify the value and realisation of health needs assessment.

4.5 What is health needs assessment?

This activity is designed to draw from participants their existing knowledge and to think about what health needs assessment means.

Activity 4.5

Community health needs assessment word association (30 minutes)

Divide the participants into small groups. Each group is given one of the following words to write in the middle of a piece of flip chart paper: Mind Map!

- Vulnerable individuals
- Health
- Needs
- Assessment

Each group will be asked to write down as many words that they can think of associated to the word they have been given.

After 5 minutes they pass their paper to the next group to add any other words until all ideas are exhausted, and then again until each group has had a chance to add words.

The whole groups will then put together the pieces of paper on the wall and ask the group:

- Was this task easy or hard?
- Any surprises, gaps, reflections, agreements/disagreements?
- For each key word, which do you think are the most important?
- Have an open discussion on the key words together and come to an

agreement for the definition for “Health Needs and Assessment”.

4.6 Example definitions (This is not exhaustive)

- “Health needs assessment is an approach that helps those in the Home Care Sector and others to provide services that tackle needs rather than just reacting to demands.”
- “It is not just about looking for problems and needs but also about assessing the strengths and resources/assets that promote wellbeing in the community.”

Activity 4.6

Assessing health needs at an individual level

(30 minutes) (This can be delivered as a whole group).

Ask each participant:

“When you are planning your care of a patient, what makes a good health assessment?”

Provide each participant with coloured sticky notes and ask to write their answer and stick to the flip chart at the front of the class. Once all the answers have become exhausted. Review and discuss each answer, challenging the group and clarify any questions and confirm understanding. As a trainer you should then take a holistic approach and make the link between individual and community health needs assessment.

Things to consider when delivering this session.

- Patients’ perception of their own needs
- The views of carers and family members
- Social and psychological needs as well as physical needs
- Wider factors, positive and negative, that influence health (e.g., housing, income, employment)
- The involvement of other professionals in care.
- It is also important to reflect and re-evaluate the activity.

Activity 4.7

Why do an individual health needs assessment?

It is important that home care workers have a good understanding of the value of completing and following a health needs assessment in their everyday

duties. They should understand how it can help improve the health of the people that they are responsible for. Revisiting the structure or organization of their duties within the health care system too. The next activity is designed to enable those in the Home care sector to see how health needs assessment fits into their duties, supporting the individual, families and the organisation.

Activity 4.8

Your local health system structure. (30 minutes)

This activity to be delivered as a group discussion format and should address the following questions:

- How is the health system organized in your area?
- What are the health priorities locally and who decides what they are?
- What are the factors that influence these decisions?
- Who decides the duties of the Home care worker. what they do, to whom and why?

Exploring through open discussion on the health system structure should raise awareness of how local systems are implemented.

4.9 Feedback and reflection

Give each participant two post-its/sticky notes and ask them to write on each piece:

- What went well
- What did not go so well
- How can we improve
- Other remarks

	<p>Unit 2 – 5.0 Principles and concepts of health needs assessment</p>
Topic	<p>Principles and concepts of health needs assessment</p>
Aims	<ul style="list-style-type: none"> • To explore the concepts underpinning health needs assessment. • To consider the ethical issues arising from health needs assessment.
The main activities – program flow process, its stages, description of	<ul style="list-style-type: none"> • What do we mean by “health”? • What do we understand about a “health need”? • What are the factors that influence health • What do we mean by equity in health?

activities, tasks;

- What do we mean by ethical issues and health needs assessment?

5.1 How do we define “Health”?

How a Home Care Worker defines health will greatly influence how she/he will carry out their duties and follow the Health needs and Assessment plan. However, before undertaking such duties it is crucial that the home care worker has prior knowledge of the different models of health. This exploration will allow the health needs assessment to be set within the culture geographical terms of health locally within each country. The comparison of different models of health will encourage the home care worker to investigate what influences the definition of health. As the trainer, it maybe more appropriate to deliver this session in lecture or discussion format. Activities as in Unit 1 can be delivered to support learning outcomes.

Examples

- Biomedical model
- Social model

5.2 Factors and Influences

Prevention of ill health by tackling the factors that influence the health of the local population is a major part of health. Overcrowding, lack of clean water, sanitation, and poor hygiene practices have an impact on health. Also, having the correct resources can make a positive impact on health of an individual or community. Having the right knowledge and skills in caring for and promoting health is essential for health carers (family and friends) including having the correct social support networks. It is important that the whole range of possible influences is included, in group discussions as some groups may limit their thinking to lifestyle issues. Given the importance of a wider understanding of health and its determinants, trainers delivering this unit are advised to familiarise themselves with wider reading around this subject before delivering to the participants.

Things to consider when delivering this Unit and its activities are;

- Economic, e.g. poverty,
- unemployment Environmental,
- poor housing, lack of transport,
- pollution
- Social, e.g. isolation, racism
- Genetics and individual biology,

- Lifestyle/behaviour, e.g. smoking, alcohol misuse
- Educational, e.g. knowledge of causes of disease

5.3 What do we mean by equity in health?

This is concerned with fair opportunities for people to experience good health. It is concerned with creating equal opportunities for health, bringing health differentials down to the lowest levels possible. Breaking down barriers for equal access to the available care for equal an need, equal utilisation of health care for equal need and equal quality of care for everyone.

As a trainer you should take this opportunity to raise the following issues during any activities or discussions you have prepared.

- The ethical dimension of equity in health Concepts of fairness vary from culture to culture and over time.
- Opinions on whether differences in things such as income or employment opportunities are justified and therefore “fair” will differ in the group.
- The impact of other inequalities on health Poverty is the biggest risk factor for health, but there are also differences in health status between men and women and between different social groups based on ethnicity, religion, race and culture.

The relatively small number of unavoidable differences in health Only a small number of differences in health are generally considered to be fair, such as natural biological variations, age and hereditary factors. Most others are generally regarded as avoidable, and those that are not under the control of the individual are also mostly considered to be unfair and unjust. The impact of ill health on other factors that affect health Sick people and the elderly are generally less able to work and therefore often lose income and economic stability. Thus, natural and unavoidable variations in health status can have an impact on exposure to other factors that are unfair.

5.4 Feedback and reflection

Give each participant two post-its/sticky notes and ask them to write on each piece:

- What went well
- What did not go so well
- How can we improve
- Other remarks

	<h2>Unit 3 - 6.0 Session Three – How to complete</h2>
<p>Topic</p>	<h3>How to complete Assessment forms</h3>
<p>Aims</p>	<p>The overall aim of Unit Three is to find out what health information is needed and how to collect and use health data.</p> <ul style="list-style-type: none"> • How to complete a Health needs and Assessment • Exploring and identifying different types of health information • Using and collecting health information • Sources of information • Involving local people • Planning your own health needs assessment
<p>The main activities – program flow process, its stages, description of activities, tasks;</p>	<h3>6.1 How to complete a Health needs and Assessment</h3> <h4>Activity 6.1</h4> <p>The completion of an individual Health and Needs Assessment (trainer input) is a process that:</p> <ul style="list-style-type: none"> • Describes the health of an individual. • Identifies any substantial risk factors and causes of ill health. • Identifies any actions needed to address the risk factors and causes of illness. <p>An individual Health and Needs Assessment is an ongoing activity that will be added to and amended over time during the care of the person. The information is a passport profile of the individual receiving the care to plan their health care needs. The steps for completing the Health and Needs Assessment are as follows:</p> <ul style="list-style-type: none"> • Profiling – Collecting the appropriate and relevant information that will inform the Home Care Worker about the state of health and health needs of the individual in care • The analysis of the information collected will identify any immediate and future health issues. • Will support any deciding factors of priorities for immediate and future action. • Planning health care programmes to address the priority issues identified. andImplementing any planned activities • Evaluation of health outcomes

Activity 6.2

Role Plays

This activity is important as it will allow participants to practice completing Health and Needs Assessment forms through role plays. It will get participants to think about the practicalities of undertaking an individual's Health and Needs assessment exercise.

This activity will allow you as the trainer to adapt and develop this session to meet the needs of the individual and organisation by providing different scenarios that Home Care Workers may face in the field. Through the adaptation you may also wish to adapt this scenario to ensure the exercise is relevant to your students and that the situation is unfamiliar to them. This will ensure peer learning will take place.

As the trainer it is a good idea to take on the role of observer and, ask questions that will stimulate critical thinking.

Activity 6.3

Exploring and identifying different types of health information

From the role play activities that you have set, the group will have a list of the information and questions that will support the completion of the Assessment forms.

These could include

- What are the key characteristics of the local population?
- What is the health status of individuals in the community?
- What community factors are affecting individuals health.
- The good/bad impact do these factors have on individuals
- What local services are currently being provided?
- What do individuals/family see as their health needs?
- What are the national and local priorities for health?
- You can provide examples from your experiences.

6.4 Using and collecting health information

When the trainer is planning this part of the session it will be helpful to introduce the Health and Assessment Needs forms. It is not necessary for participants to learn about statistics and the in-depth details of epidemiology. However, they will need to have a good understanding, or awareness of commonly used words in public health and measures and what they mean. Any examples that the

trainer provides must be clear in what definition you are using. For example;

- Deprivation index,
- Standardized mortality rate,
- Prevalence and incidence,
- Infant mortality rate,
- How to collect health information,
- what information is readily available locally,
- What do you already know,
- Common pitfalls in health and collecting health data.

Activity 6.5

Sources of information

It is acknowledged that each country, region or organisation will have different sources of information available to it. So, this part of the session will heavily rely upon the trainer having the knowledge of what there is within their local area.

The trainer, needs to ensure that participants are provided with the following information. This can either be discussed as a question and answer group session or presented as a group activity and presentation.

Below are four activity topics for Home care workers to research and present as groups:

- **What sources of information are already readily available locally for Home Care Workers to use?**
- **Where would you need to go to find information required?**
- **What do we mean when we say community involvement?**
- **Advantages and disadvantages of involving community.**

Activity 6.6

Planning your own health needs and assessment.

By the end of this session the group will have discussed and planned how it will carry out its own health needs and assessment appropriate to their region. The group will be ready to use and complete the health needs and assessment forms in its local setting. In this activity the trainer will work and support individuals in producing an action plan for delivering this work in their local setting. This activity will rely upon a series of questions that will need to be answered by the home care worker when using the health needs and assessment forms.

This activity will produce a great deal of information that will have been given during this session. This will raise a number of complex issues which should be

covered with the trainer. It is especially important that at this stage the trainer spends time summarizing with the group what they have learnt and finish with an evaluation exercise.

Planning profiling activity (1 hour).

Home care workers will be provide with the Health Needs and Assesment forms to complete through role plays.

The trainer will ask each individual to work through the following questions.

- What is the main focus for completing the forms?
- The Home care worker will need to identify who and what she/he is assessing.
- An individual such as the elderly, refugees, the unemployed or young people and the disability or illness.
- What outcomes are we looking for?
- What are the reasons for doing the assessment?
- Who should be involved and how will we involve them? Health needs and assessment should not be completed by the Home Care Worker working alone.
- What do we know already?
- What do we want to find out?
- How will we do it? When, what and how? Writing the action plan.

6.7 Feedback, reflection and evaluation

Give each participant individual feed back on the activity and provide an action plan. Provide an A4 paper with the questions below and ask them to write their answers under the headings:

- What went well
- What did not go so well
- How can we improve
- What are your strengths
- What could you improve on
- Agree on any action plans and time scales- SMART
- Other remarks

6.8 Action planning

Action planning is an extremely complex activity and should undertaken by experienced trainers and assessors. The basis of the action plan is that it is



	<p>constructive, positive and meets the SMART accronym. The more commitment from all the people involved in drawing up any action plans the more likely it is that the plans will be implemented. Action planning will consist of the following stages:</p> <ul style="list-style-type: none"> • Preparation • Agreement of the aims • A description of the objectives • Details of any activities needed to meet or fullfil the objectives • Evaluation.
	<p>Unit 4 – 7.0 Observations</p>
	<p>Observations</p> <p>Sign off.</p> <p>Smart Targets on going observations</p>
	<p>Field visits should be ongoing and should form part of a Continued personal development. Two observations in a year would be realistic as it would highlight any potential training needs or gaps.</p> <p>Any action plans should follow SMART</p> <ul style="list-style-type: none"> • Specific • Measurable • Realistic • Time

Duration of the module	4 to 6 hours per unit dependent on number of participants and trainers
Learner requirements	<p>What (if any) are the learner requirements?</p> <p>Commitment to the module units.</p> <p>A positive attitude and active input to the sessions</p>
Learning outcomes to be reached after completion	<ul style="list-style-type: none"> • A great knowledge of health Care background. • Increased understanding of the role of the Home Care Worker • Increased knowledge of the Health Care system, its professionals, organisations, local community, and where the Home Care Worker fits into the system. • Increased new skills, competences and applying them into everyday home care duties. • Competent completion of the Health Needs and Assessment forms. • Competent observations
Resources required	Digital resources, white boards, Flip boards, Health needs and Assessment forms, Continued Personal Development folder, Admin materials, Sticky notes, Note pads.
Learning methodologies used	<ul style="list-style-type: none"> • Reading • Discussions • Quizzes • Role plays • Group work • Individual work • Presentations • Feedback • Form completion • Tasks • Evaluation • Action plans • Observations • Continued Personal Development
Assessment Methods	<ul style="list-style-type: none"> • Discussions • Quizzes • Role plays • Group work • Individual work • Presentations • Feedback • Form completion • Tasks • Evaluation



	<ul style="list-style-type: none">• Action plans• Observations• Continued Personal Development
References	N/A

Module 1 - Needs and Assessment of Target Group - Description

Module 1 - Needs and Assessment Curriculum Guidance Module

1.1 Introduction

Home care workers play a vital role to the needs of the most vulnerable groups in society. They will need to have in-depth knowledge of the determinants of health and will base their practice on primary health care and public health principles. To enable care workers to carry out this role effectively and to plan their home care work accordingly, they will need to have a thorough understanding of the person they are caring for and their individual needs. They will require to have the necessary competencies to assess families and individuals with their health and related needs, so that their care can be jointly planned. The care worker will need to show, competence in the undertaking of knowing the community, individual in care and the family needs assessment. This document offers a tool to assist the care worker in doing just that. It is clear to point out that health needs assessment is not a one-off exercise but an ongoing process of assessment of an individual needs that allows the carer to plan health care and public health programmes. Needs and assessments is a process of profiling the individual receiving the care, and therefore deciding on their priorities, planning public health and health care programmes, implementing planned activities, and evaluating health outcomes that will enable the appropriate action to take in delivering the right care for everyone in need.

1.2 Purpose of Needs and Assessment

This guide will provide practical support and guidance to anyone in the care sector who is undertaking the work of caring for an individual and will assess their needs. It provides information and advice on the stages of needs assessment, enabling the care worker to complete the process realistically within her/his everyday work. The pack does not assume that the care provider has any prior knowledge of the subject of care.

1.3 What are Health needs and Assessments?

The needs assessment is a process that will:

- describe the state of health of the individual requiring ongoing care.
- enable the identification of the major risk factors and causes of ill health.
- enable the identification of the actions needed to address these risk factors.

The needs/assessment process are not a one-off activity, but it is an ongoing developmental process that will be amended over time as the needs of the person in care changes.

The steps of Home Care Health Needs and Assessment are as follows.

1.4 Profiling

Collection of relevant information that will inform the Home Care worker about the state of health and health needs of the individual requiring the care. There will be a process of analysis of this information in identifying and major and immediate health issues. Profiling will support the deciding factors of priorities for action to be taken. Will support any Planning public health and health care programmes that will address any priority issues identified. Profiling will support the implementation of any planned activities and will evaluate health outcomes.

1.5 Why should we complete a Needs and Assessment?

Needs assessment will enable the Home Care worker to:

- Effectively plan and deliver the most appropriate care to those individuals with the greatest needs.
- Support the application of the principles of equity and social justice in practice.
- Ensure that scarce resources are allocated where they can support the maximum health benefit for the individual and the care providers.
- Support and work collaboratively with the community, families, other professionals, and agencies in determining which health issues cause greatest concern and plan interventions to address those issues.

1.6 Concepts and Principles of Health Needs Assessments

The Definition of “Health” and “Need”

This guidance tool will follow a European holistic model of health, which will place emphasis on the social, economic, and cultural factors that affect health as well as individual behaviour.

The concept of “need” used will incorporate those needs felt and expressed by local people, those providing the care, those defined as trainers and managers, as well as those defined by professionals. It takes into consideration of going beyond the concept of demand and takes account of the care workers and care providers capacity to benefit from health care and public health programmes.

2.0 Factors that have an impact on health

Health is affected by several factors:

- The physical environment in which those in need of care live.
- It could be measured by the quality of the air breathed, the water they drink.
- Their social and emotional environment and what support they receive from friends/ family.
- If they live in an environment of poverty, which has a negative impact on enjoying life.
- Their past and current behaviour and lifestyle for example, excessive alcohol consumption, smoking, drugs abuse, eating habits and past working conditions which has been related to the cause of lung cancer and coronary heart disease and of course family genetics.

This guide will support the person giving the care to consider all these risk factors in relation in making an of needs and assessment of importance.

2.1 Things to consider

Other things to consider when completing are:

Age, Gender, Ethnicity and religion, Language and literacy should all be respected and considered when completing the Needs and Assessment tool. The list is not exhaustive as it will be adapted by the experienced trainer to meet the ongoing needs of every individual touched in the care of a person.

3.0 Background

This module has been developed to support teachers and trainers who are involved in teaching the Low-Skilled and Low-Qualified Adults in Home Care Sector. The module will be split into four units and will provide some practical ideas and suggestions as to how the trainer can support and prepare adults in the home care sector in undertaking a health needs and assessment of those in need of care. It is designed to be used alongside the delivery of the Erasmus+ KA204 Strategic Partnership for Adult Education Project Number: 2019-1-TR01-KA204-076960, Empowering the Employability of Low-Skilled and Low-Qualified Adults in Home Care Sector Project.

This module aims to support the continued development of the Low-Skilled and Low-Qualified Adults in Home Care Sector Project throughout Europe, for which one of

the core competencies are to “identify, assess the health status, health needs of

individuals in need of care and their families in the context of their culture and community”. It is also aimed at all care workers primary employed in the home community care to help them to work towards the WHO HEALTH21 targets. “WHO Health21 is a European policy framework derived from the Health for All policy for the twenty-first century adopted by the World Health Assembly in 1998.”

<https://www.euro.who.int/en/publications/abstracts/health21-the-health-for-all-policy-framework-for-the-who-european-region>

The framework was called Health21 not only because it dealt with health in the 21st century but also because it laid out 21 targets for improving the health of Europeans. Health21's goal is to achieve full health potential for all people in the region, with two main aims: to promote and protect people's health throughout their lives; and to reduce the incidence of the main diseases and injuries and alleviate the suffering they cause. Three basic values form its ethical foundation: health as a fundamental human right, equity in health and solidarity in action and participation and accountability for continued health development. The aims and objectives of each unit is concerned with continued Professional Personal Development in strengthening the Home Care workers role within public health and primary care in Europe, in which assessing the health needs of each vulnerable individual within their community is a fundamental activity.

3.1 The Delivery and Training the Health Needs and Assessment.

Teaching and training are an extremely complex and requires a professional role, and although the aim is to support the Low-Skilled and Low-Qualified Adults in Home Care Sector, the units may look simply easy, but the actual delivery and processes can be complicated and time-consuming. For home Care workers to carry out their duties in assessing the needs of those in need of care they will have to understand concepts of health, community, and the need for assessment. The Home Care Worker will be required to have a competent understanding of how to use, collect and analyse data, how to prioritise needs, and how to move forward in planning and implementing an effective solution in addressing individuals needs. For these reasons, there are several activities in this module in supporting the home care worker through this learning process.

The units outlined in the module should raise awareness among participants of how important their role is in addressing inequalities in the health sector. It may challenge traditional ideas of the working duties, cultural backgrounds. However, it is hoped that it will promote the personal development of those in the home care sector leading to a broader understanding of the diversity in performing their role and the promotion of the sector in general.

Needs and Assessment training is not limited to the classroom but is also a practical activity that requires ongoing training, observations, feedback, and reflection. This module has been designed with the intention of developing the home care worker whilst they are carrying out their duties. It is recommended that the practical side will take place whilst the person is delivering the care, with the teacher in presence, guiding, facilitating, encouraging, and providing constructive reflection and providing information when required.

Through a methodology of consultation, focus group interviews and analysis, "Empower 4 Employment" has identified that there are differences in the levels of skills, competences and knowledge and resources available amongst trainers and care workers, throughout the EU.

Although the aim is to have a foundation of consistency, flexibly could be used at the discretion of the trainer to suit the needs of local conditions and needs. For example, language/communication maybe a barrier, or topics or cultural assumptions underlying within the units may not work in your locality. In this case it may be more appropriate to adapt activities to make them more relevant to local situations. Drawing on our own experience of pedagogy and autonomy, it is recommended that the following approaches be used to maximize a positive learning outcome:

- Experiential methods and role plays are a preferred option, as Needs and Assessment are practical activity exercises.
- Home Care Workers should be encouraged to undertake an assessment of the Needs and Assessment activity during their working duties as it will provide live demonstration with immediate feedback.
- If practically viable, home care Workers should have the opportunity to be taught in a group session to promote peer learning and the sharing of good practices, experiences, and mutual support.
- As suggested in the “Guideline for Developing the Training Curriculum” 3.1 pilot, the ideal group size is 15 as it needs to be undertaken within a supportive environment that allows individuals to discuss the issues that emerge as they go through the process.
- Each unit uses group works towards the methods as described in the WHO Training the Trainer package, as the most effective method for supporting learning.

3.2 The Structure of Units

Each unit is designed in supporting the trainer and consists of activities and exercises that will support an understanding of the concepts underpinning health needs assessment and its role and use in health provision. Each Unit will be specific in guiding the trainer through an incremental process of skills and knowledge acquisition. However, this module allows the trainer to use their own experiences, initiative, pedagogy, and autonomy in supporting the home care worker in carrying out their duties at a local level. It has been designed into four sections, each covering a different aspect of learning and designed to be approximately 4–6 hours in duration, depending on how many of the activities the trainer has put together or wishes to deliver.

Having the correct resources available reflects the importance of everyone understanding the Needs and Assessment process in modern health care systems today. The delivery time scales are down to the discretion of the organisations, or trainer delivering the training and when it is appropriate and practically effective. However, ideally, the training should be delivered over four days, which can be spread over several weeks as ongoing personal development training to allow the home care workers with low skills to continue to carry out their duties between each session. This length of time will support the group to explore the relevant issues in depth, allowing the home care worker to discuss their findings and reflect on any previous training and observations.

The first three sections will explore the “why, and the how to complete the Needs and Assessment, while unit four uses the profiles made to identify priorities and develop action plans. If your group is not going to carry out a health assessment as part of the programme, then you may need to cover unit four in a different way or finish after Section three.

3.3 Expectations of the Trainer delivering the Training

This module has been developed through prior research for use of any individual or organisation linked to the development low skilled and low qualified care workers working in the Home Care Sector. However, it is essential that the individual or organisation delivering the module is familiar with the following features:

- Experienced in effective adult learning techniques, especially to low skilled and low qualified students.
- Has knowledge, experience of the local health and other government systems.
- Has prior knowledge, or an understanding of health needs assessments and its ongoing benefits to those within the home care sector.
- The role of the home care worker.
- How to access and support digital learning.
- Has local knowledge of experts who can provide input when required.

3.4 Definitions

Trainer

The individual who will be responsible for the effective teaching delivering of the curriculum and supporting the low skilled and low qualified home care workers through the processes. Ideally the trainer should have experience of working with small groups and be familiar with the **Empower 4 Employment** curriculum and guidelines.

Participants

Those home care workers intending to undertake a Needs and Assessment for the individuals they work with. The focus of the units is to support the home care workers working with individuals of all ages, cultures, and backgrounds and the term home care worker is used generally throughout this module and its units.

Module 1 - Needs and Assessment - Role Play Guidance

Role Plays Communications Skills

Don't we all participate in role play every day?



So why not use it in teaching to prepare learners for employment in the Care Sector

1.1 Introduction

To have the right skills in any career is vital everyone’s wellbeing and over all job satisfaction. Possessing excellent communication skills is a necessity if you are to succeed in any career. Whether you are a mentor, supervisor, career counselor, trainer or otherwise, teaching these skills to others provides them with a strong foundation to achieve future career goals. However, learning these skills can take time, but sharing good/best practices can help your learners quickly learn and apply them on the job. With improved communication skills, learners will see an increase in their self esteem, and their confidence will grow as their and knowledge grows too. Through correct methods learners will not only excel in the workplace but also help them to perform well in interviews. In this Guidance module for role plays, you will see examples of proven methods for effectively teaching these skills through a variety of methods.

1.2 What are communication skills?

Communication skills are the abilities we all use when giving and receiving different kinds of information. These skills are what we would call “essential soft skills” when working with others, or managing people, or overseeing projects like Empower4Employment. Although the lists are not exhaustive a few examples could include volume, clarity, empathy, respect and understanding nonverbal cues. We can certainly use these skills to communicate ideas, feelings, and tasks.

Types of Communication and ways how to use them

Verbal	Non-Verbal	Visual	Written
Use of a strong, confident speaking voice	Notice how your emotions feel physically	Ask others before including any visuals	Strive for simplicity
Use of active listening	Be intentional about your non-verbal communications	Consider your audience	Don’t rely on tone
Avoiding filler words	Mimic non-verbal communications you find useful and effective.	Only use visuals if they add value	Take time to review your written communications
Avoid care sector jargon when appropriate.		Make them clear and easy to understand	Keep a file of writing you find effective and enjoyable

1.3 How to teach communication skills?

We can all learn, practice and improve our communication skills through a variety of methods including role plays. Learners can all benefit from methods that give them hands-on practice, with clear directions, and also given the opportunity to reflect through self reflection and peer reflection.

By practicing scenarios we can prevent...

1.4 Here are some of the best ways to teach these skills with several examples.

Methods
<ul style="list-style-type: none">• Role-play• Group games• Films• Introspection• Turn-talking• Asking questions• Record and reflect

1.5 Role Play

Role Play
<p>Role-playing is a classic method for teaching communication skills. To use this technique, learners will act out skills after discussing them.</p> <p>For example, the use of appropriate posture or body language.</p> <p>Role-playing should always focus on full group participation and mutual respect.</p> <p>Be sure to talk to all learners about how to be a respectful audience member, and allow plenty of time for daily role-playing to help learners get comfortable.</p> <p>Learners will need to have patience and open-mindedness, as well as a positive rapport with each other.</p> <p>If you foster these skills first, role-playing can be a great way to learn communication abilities quickly.</p>

1.6 Role Play Tips

Role Play Tips

- Whenever you teach a new skill, use role-playing to check that students fully understand the information.
- Act out a skill for your learners.
- Then have the learners guess which skill you modeled.
- Use specific scenarios learners experience on a day-to-day basis in the Home Care Sector setting.
- Have the learners discuss what went well and what went wrong after each role-play. Ask them what they would have done differently to improve the situation.

Examples:

In a role-playing scenario, two learners act out examples of both excellent and ineffective communication during a mock scenario in the Home Care Sector disagreement.

Afterward, the group takes two minutes to write down the effects of each communication style and shares with the group.

Write various communication skills on strips of paper. Have Learners choose at random and then act out the skills. The rest of the group can guess.

Choose clear examples such as eye contact, posture, body language, active listening and confidence.



1.7 Group Games

Group games

Group games are an interactive, engaging way to teach verbal and nonverbal communication, persuasion, collaboration and relationship-building skills. Through group games, learners will learn to efficiently pass the information on to others. During games, you should watch closely, make notes and be prepared to share your observations with learners so they can improve over time.

Group game examples:

- Complete a group Project
- Working towards a specific goal as a group requires communication.
- Ask the team to build, design or create something over a set period of time.
- Provide the group with any necessary materials and observe their interactions as they work. Afterward, ask the group what went well and what they could've done differently.
- Share your observations with positive feedback for each individual on what they did well.

1.8 Play the „Emotional Roller Coaster“ game

Play the “emotional rollercoaster” game

Divide the group into two teams. Each team gets a set of cards with an emotion written on it, such as “angry,” “delighted” or “sluggish.”

A learner from the first team acts out an emotion while their team mates guess what it is. Then the other team tries.

Set a time limit for guesses, and the team who guesses the most by the end is the winner. This game will help students become more aware of the expressions and body language signals they use to express emotions.

It will also spark conversations about non-verbal signals. Be sure to leave time for post-game discussion.

1.9 Lead a team member through an obstacle course

Lead a team member through an obstacle course

Divide the group into teams of two and put a blindfold on one member of each team. Then, have them stand at the start of the course.

The second member guides their partner through the course using only verbal directions.

Let both the blindfolded and non-blindfolded members share their experiences, then ask them to swap roles and try the course again.

2.0 Films

Films

A carefully compiled collection of film and TV clips is a great teaching tool. You can pause, discuss and replay clips.

Video clips also make for great take-home work.

Students can watch as many times as they like, write responses and share during the next class.

You can look for examples of:

Characters who learn how to handle crises using clear, concise communication
Non-verbal communication skills

How characters process and communicate complex emotions
Ways to use multiple communication skills to solve problems

Examples of situations that went wrong as a result of poor communication

2.1 Introspection

Introspection

- Learning about interpersonal and communication skills often necessitates time for reflection and introspection.
- When learners are learning about communication, especially those related to social and emotional health, provide ample time for structured self-analysis.
- Give students prompts to guide them as they contemplate.
- For example, ask them to think about communication methods that have worked well for them during difficult situations in the past.
- Here are several additional introspection exercises you might consider:

Journaling, Drawing, Photography, Poetry, Lists, Stream of consciousness, Collages

2.2 Turn-Talking

Turn-talking

One of the most basic and helpful communication skills learners can learn is turn-talking.

During a turn-talking lesson, learners will learn the difference between interrupting and interjecting.

This is a critical skill people need to learn for negotiation, conflict resolution and idea-sharing.

Learners should also learn how to overlap in conversation cooperatively rather than competitively.

Turn-talking methods include:

Use a talking stick or other talking object in your classroom. This sets turn-talking as a standard on the very first day of class. **Introduce pause-fillers.**

Make a poster with helpful pause-fillers like, "Let me see," "Let me think" and "What I mean

is," to help keep the conversation going.

Suggest opinion phrases.

These can help learners invite others to speak.

A poster of opinion phrases might include "What do you think?" and "Do you like that idea?"



2.3 Asking Questions

Asking questions

Productive conversations are created by asking and answering thoughtful questions.

Asking open-ended questions can help move projects forward, encourage new ideas, solve complex problems and delegate tasks.

However, learning how to ask those questions is a skill.

Take time to teach Learners about open-ended questions and be sure to provide plenty of examples.

You might devote an entire class unit to a lesson on questions, using role-play activities to help guide the discussion.

You can start by conversing with one learner in front of the class.

Have other learners keep track of how many words their peer uses in response to your questions.

Alternate closed and open questions.

Your first question might be, “Did you like the movie?”

Follow that up with a question like, “What did you like best about the movie?” Ask alternating questions for a few minutes.

Then, get together with the class to discuss their findings.

Have them determine which questions prompted longer, more interesting answers and which inspired discussion.

Then have learners practice asking open-ended questions in pairs or groups.

2.4 Record and Reflect

Record and Reflect

Watching yourself is an effective way to learn communication skills.

If you have the time and resources, ask your learners to record themselves having a conversation with someone else or in front of a mirror.

Then, they should watch the recording and observe their verbal and nonverbal communication.

Finally, they should take time to reflect on what they did well and what they can focus on improving.

Here are several additional examples of record and reflect methods:

Record a two-person conversation.

Have the participants watch the recording while writing down their responses or sharing their observations out loud.

Have learners record a short speech by themselves.

Record their speech in front of an entire classroom audience. Compare the two videos. Record a video at the beginning of class and another at the end.

It can be useful to watch the improvement between the two videos. Assign video-watching and reflection as a take-home assignment.

This is a helpful alternative to learners watching their videos with their peers and may offer the chance for a more in-depth response.



2.4 Summary

If you are still not convinced check out what these people say...

“**Role-play** is a technique that allows students to explore realistic situations by interacting with other people in a managed way in order to develop experience and trial different strategies in a supported environment.” (Glover, 2014).

“Involvement in authentic tasks provide them with the opportunity to make discoveries.” (Harper 2013) p14

References:

Glover, I. (2014, July 4). Role-play: An Approach to Teaching and Learning. Retrieved from https://blogs.shu.ac.uk/shutel/2014/07/04/role-play-an-approach-to-teaching-and-learning/?doing_wp_cron=1573162960.6957910060882568359375#

Harper, H. (2013). Outstanding teaching in lifelong learning. Berkshire: Open University Press

Module 1 - Questionnaire

Needs and Assessment of Target Group Module

Below there are 3 questions with a series of statements that are either true or false.

1. The needs assessment is a process that will...
2. Needs assessment will enable the Home Care worker to...
3. Health is affected by several factors...

Please, read each question and answer the following statements with the following TRUE or FALSE.

Example

Which of the following statements are True or False

The Need assesment is a process that will	True	False
❖ Describe the state of health of the individual requireing ongoing care.	True	
❖ Enable the identification of the major risk factors and causes of ill halth	True	
❖ Enable the identification of actions needed to address this risk factor	True	
❖		

Your answers will be used to access your knowledge and understanding of modüle 1. Answers will be provided and each question will be evaluated for any questions you may have.

Which of the following statements are True or False?

Question 1 The Need assesment is a process that will	True	False
❖ Describe the state of health of the individual requireing ongoing care.		
❖ Enable the identification of the major risk factors and causes of ill halth		
❖ Enable the identification of actions needed to address this risk factor		
❖ The needs assement process is one-off activity		
Question 2 The Need assesment will enable the Home Careworker to..		
❖ Effectively plan and deliver the most appropriate care to those individuals with the greatest needs.		
❖ Will stop continuous need for further training		
❖ Support the application of the principles of equity and social justice in practice.		
❖ Ensure that scarce resources are allocated where they can support the maximum health benefit for the individual and the care providers.		
❖ Will prevent any ongoing Plan interventions		
Question 3 Health is affected by several factors:		
❖ The physical environment in which those in need of care live in.		
❖ Their social and emotional environment and what support they receive from friends/ family.		

❖ Stress and anxiety		
❖ By the quality of the air breathed, the water they drink.		
❖ Talking to your colleague		
❖ Living in an environment of poverty, which has a negative impact on enjoying life.		
❖ Excessive alcohol consumption, smoking, drugs abuse, eating habits.		
❖ Not being able to use the computer		
❖ Missing your favourite Television show		

What is Profiling? You can choose more than one statement.

- Collection of relevant information that will inform the Home Care worker about the state of health and health needs of the individual requiring the care.
- Is a process of analysis that will identifying and major and immediate health issues?
- Profiling supports the deciding factors of priorities for action to be taken.
- Will support any Planning public health and health care programmes that will address any priority issues identified
- Profiling will not support the implementation of any planned activities and will evaluate health outcomes.

What is the acronym of SMART?

- Specific/Measurable/Achievable/Realistic/Time
- Specified/Measurable/Achievable/Realistic/Time
- Specified/Measurable/Attainable/Time
- Specific/Measurable/Attainable/Time

“When you are planning your care of a patient, what makes a good health assessment?”

- Patients’ perception of their own needs?
- The views of carers and family members?
- Social and psychological needs as well as physical needs?
- There is not the need to involve other professionals in care.



Reflection

On a scale of one to 10 (1 being the least and 10 being the best) rate the overall module
Needs and Assessment

Scale	0	1	2	3	4	5	6	7	8	9	10
Overall, how satisfied are you with the module Needs and Assessment of Target Group?											
Overall, how happy do you feel with the training delivered for the module Needs and Assessment of Target Group?											
Overall, do you feel you have learnt something new?											
Overall, after completing the module Needs and Assessment, are feeling more confident with your role in Home care?											

Module 2 - Assessment Of The Skills And Competencies Based On Target Groups - Unit

MODULE II - Assessment Of The Skills And Competences Based On Target Groups	
Main contents	<p>Home health care is an extremely diverse enterprise. It encompasses people with very different illnesses and capabilities, from children with diabetes to young adults with mental illnesses to middle-aged adults who might be taking medication for hypertension to older adults with dementia or renal failure. The home environment also exhibits tremendous diversity. As people get older, their hearing and vision often decline, to the point that medication instructions that younger people can make out easily are difficult for many older people to read. Similarly, medical devices, such as oxygen concentrators, may need both visual and auditory warnings to alert older users to potential hazards when the equipment is failing.</p> <p>This module will focus on the assessment of skills and competences of home care workers based on target groups (home care recipients).</p>
A short description of the objectives to be reached	<p>Module II will consist of 3 Units. Following objectives will be reached at the end of the module:</p> <ul style="list-style-type: none"> • Understanding the categories of home care recipients • Understanding the differences between the categories of home care recipients • Understanding the importance of using assessment tools for core competencies and skills • Understanding the supervision for home care workers • Recognising the role and responsibilities of trainers/mentors/educators etc. in home care sector • Recognising the onserving, recording and reporting responsibilities • Recognising the importance of using assessment tools in guiding home care workers
	3.0 Unit 1 - HOME CARE RECIPIENTS IN FOCUS
Topic	Understanding the characteristics and needs of home care recipients and other actors in home care sector.
Aims	It is aimed to identify the actors in the home care sector and clarify the characteristics of the target group. Learners will be able to understand the

	<p>dynamism between two group (home care recipients and home care workers) at the end of the module in guiding the home care workers for write group.</p>
<p>The main activities – program flow process, its stages, description of activities, tasks;</p>	<p>3.0.1 Definitions:</p> <p>Home Care Recipients</p> <p>Home Care Workers/Givers</p> <p>Learner</p> <p>Supervisor</p> <p>3.0.2 Activity 1- Understanding The Target Group (Home Care Recipients): (60 min.)</p> <p>3.0.3 Stage 1- Understanding the previous learning</p> <p>Previous learning and knowledge of the group are recommended to be checked at this stage. Learner should define the current knowledge of home carers through the questions below:</p> <ul style="list-style-type: none"> • Who might need home care? • Apart from your care experience, which groups should be added to the target group of home care recipients? • Can you compare the situation in your country with the groups in need of home care in the world? • Which groups of home care recipients do you think need home care the most? <p>3.0.4 Stage 2 – Step 1. Introduction and Definitions</p> <p>3.0.5 Step 2. Recognition of the changes in home care needs</p> <p>This stage covers brief information about the subject. Learners introduce the subject of the unit after then support a discussion in step 1 and a brain storming in step 2.</p>

*Learners should complete their knowledge gaps before providing the knowledge to home care workers.

3.0.6 Activities for learners' use in this stage:

3.0.7 Learner (trainer) should;

- Describe the stressors in the caregiving experience: Experiences differentiate among such factors as the functional disability of the care recipient, the care demands, the coordination of care, and the suffering of the care recipient. Learner should understand based on an in-depth understanding of the caregiving experience of home care workers.
- Coordinate formal and informal homecare: The task demands of informal care should be known in order to assess the capacity of caregivers. Caregiver performance and recipient status should be monitored, and training and tools should be provided to health and social service providers.
- Adopt a standard definition cycle of caregiving and home recipients's needs into the regular working system.
- Put the technology into the agenda: Emerging technologies could be very useful in training care providers, monitoring caregivers and recipients, and enhancing functioning and autonomy. More emphasis needs to be placed on implementation as opposed to developmental research, and privacy concerns need to be addressed.

3.0.8

3.0.9 Activity 2- Understanding The Characteristics of The Target Group (120 min.)

1. Learner introduce the subject of the stage and support a discussion in all stages of the

Activity 2.

2. At the end of the stage, based on the issues below learner should support a group work dividing the whole group in 3 different group to identify the characteristics of the home care recipients. Group discussion topics:
 - Characteristics of the elderly people
 - Characteristics of physically and mentally challenged people
 - Characteristics of the children
3. At the end of the group works, each group should be encouraged to report and present their works.

3.0.10 Stage 1- Elderly People



3.0.11 Stage 2- Physically and mentally challenged people

3.0.12 Stage 3- Children

	3.1 Unit 2 - SKILLS AND COMPETENCES BASED ON TARGET GROUP
Topic	Understanding the importance of skills and competences and mismatches between demand and capability in the sector.
Aims	This unit aims a clear understanding regarding core skills and competences of home care workers based on home care recipients for learners.
The main activities – program flow process, its stages, description of activities, tasks;	<p>3.1.1 Activity 1: Introduction and Definitions (40 min)</p> <p>3.1.2 Stage 1: Introduction and Definitions</p> <p>Learner provide a brief information and introduce the topic of the stage. After the introduction of the stage learner can support a discussion in step 2 through the questions below:</p> <ul style="list-style-type: none"> • Who prefer to provide home care to elderly people/children/disabilities? • Why do you prefer to provide home care to elderly people/children/disabilities? (For deep discussion and understanding) • What do you think about working conditions of home care workers? • What do you think about the future of the home care sector? <p>3.1.3 Step 1- Brief information</p> <p>3.1.4 Step 2 - The Mismatch Between Demand and Capability</p> <p>3.1.5 Activity 2- Main Competences and Skills (80 min.)</p> <p>3.1.6 Stage 1- Communication and Interpersonal Skills</p> <p>3.1.7 Step 1- In this step following issues are recommended to be discussed with home care workers, trainer’s (learner) role is being a facilitator at the discussion:</p> <ul style="list-style-type: none"> • Communication and its importance in home care • Different methods of communication • Principles of effective communication • Physical and emotional barriers to effective communication. • Communication techniques to use with individuals having special needs (e.g. Vision, hearing, aphasia, and cognitive impairment) • Active listening and barriers to effective communication. <p>3.1.8 Step 2- Core Skills</p> <p>3.1.9 Stage 2- Confidentiality, Professionalism and Ethics</p> <p>3.1.10 Step 1- In this step following issues are recommended to be</p>

discussed with home care workers, trainer's (learner) role is being a facilitator at the discussion:

- Common factors that contribute to accidents in the home
- Home Care Worker's role in injury prevention and fire safety
- Methods of ensuring own safety in the field
- Basic home fire prevention and response actions
- Basic first aid techniques for common emergencies
- Agency policies that relate to safety issues
- Situations that require immediate attention by self or emergency services

3.1.11 Step 2- Core Skills

3.1.12 Stage 3- Safety

3.1.13 Step 1- In this step following issues are recommended to be discussed with home care workers, trainer's (learner) role is being a facilitator at the discussion:

- Common factors that contribute to accidents in the home
- Home Care Worker's role in injury prevention and fire safety
- Methods of ensuring own safety in the field
- Basic home fire prevention and response actions
- Basic first aid techniques for common emergencies
- Agency policies that relate to safety issues
- Situations that require immediate attention by self or emergency services

3.1.14

3.1.15 Step 2- Core Skills

3.1.16 Stage 4- Applying Personal Care

3.1.17 Step 1- Definition of Main Tasks

- Bathing
- Toileting
- Teeth and mouth care
- Ambulation
- Dressing/grooming
- Eating
- Transferring

3.1.18 Step 2- When and Who Needs Personal Care

- Recovering from an illness/accident

	<ul style="list-style-type: none"> • Long term chronic condition • Frail advanced age • Permanently disabled • The dying home care recipients <p>3.1.19 Step 3- Core Skills</p> <p>3.1.20 Stage 5- Household Care</p> <p>3.1.21 Step 1- In this step following issues are recommended to be discussed with home care workers, trainer’s (learner) role is being a facilitator at the discussion:</p> <ol style="list-style-type: none"> 1. Purposes of housekeeping in home care <ol style="list-style-type: none"> a. Enhances quality of life b. Promotes independence and self-sufficiency c. Maintains the home during family crisis 2. Importance of maintaining a clean home <ol style="list-style-type: none"> a. Infection control – keeps bacteria, fungus under control b. Safety and security – less accidents likely to occur c. Basic needs are met – comfort, belonging, pride, higher self esteem, self-fulfillment <p>3.1.22 Step 2- Core Skills</p>
	<p>3.2 Unit 3- Assessment Tools</p>
Topic	Assessment tools that can be used by learners in home care sector
Aim	The aim of this unit is to provide an understanding related to the using assessment tools in guiding home care workers and in which purposes tools can be used.
The main activities – program flow process, its stages, description of activities, tasks;	<p>3.2.1 Activity 1- Template A-Basic Information (Annex 1) (60 min.)</p> <p>3.2.2 Stage 1- General Profile of Care Recipient and Care Worker</p> <p>3.2.3 Stage 2- Experiences in the Home Care Sector</p> <p>3.2.4 Step 1- Tasks according to the needs and demands of the Home Care Recipient</p> <p>3.2.5 Step 2- Health Conditions of the Care Worker</p> <p>3.2.6 Activity 2- Template B-Questionnaire (Annex2) (60 min.)</p>

Duration of the module	<p>7 hours for total</p> <p>3 hours for Unit 1</p> <p>2 hours for Unit 2</p> <p>2 Hours for Unit 3</p>
Learner requirements	<p>Learners are educators, mentors, trainers, professionals etc. actively working in home care sector who are good at communication and empathic skills, and working directly with home care workers.</p>
Learning outcomes to be reached after completion	<p>Measurable effects</p> <ul style="list-style-type: none"> • New approaches and tools in guiding home care workers • New assessment tools for learners • New training module <p>Immeasurable effects (uncountable results e.g. increase of skills);</p> <ul style="list-style-type: none"> • Improvement of skills and competences in guiding home care workers • Improvement of skills and competences in training/teaching home care workers • Increasing the awareness of the dynamics of the sector • Increasing the awareness of the future of the sector • Learning to use new assessment tools • Learning how to use assessment tools • Learning to use assessment tools based on target groups • Supporting right matches between home care recipients and home care workers in the sector • Understanding the importance of the right matching between home care recipients and home care workers • Understanding the differences of the characteristics of the home care recipients
Resources required	<p>Flipchart, notes, chairs, papers, pens, scissors, markers, PC, internet connection, post-it</p>
Learning methodologies used	<ul style="list-style-type: none"> • Group Work • Discussion • Brain Storming • Presentation • Q/A
Assessment	<p>Pre-test</p>

methods	Post-test
References	<p><i>National Research Council (US) Committee on the Role of Human Factors in Home Health Care. The Role of Human Factors in Home Health Care: Workshop Summary. Washington (DC): National Academies Press (US); 2010. 2, The People Who Receive and Provide Home Health Care. Available from: https://www.ncbi.nlm.nih.gov/books/NBK210063/</i></p> <p><i>Thomé B, Dykes AK, Hallberg IR. Home care with regard to definition, care recipients, content and outcome: systematic literature review. J Clin Nurs. 2003 Nov;12(6):860-72. doi: 10.1046/j.1365-2702.2003.00803.x. PMID: 14632979.</i></p> <p><i>Home care in Europe: a systematic literature review. BMC Health Services Research 2011 11:207.</i></p> <p><i>Lori Simon-Rusinowitz, PhD, Brian F. Hofland, PhD, Adopting a Disability Approach to Home Care Services for Older Adults, The Gerontologist, Volume 33, Issue 2, April 1993, Pages 159–167, https://doi.org/10.1093/geront/33.2.159</i></p> <p><i>T. Pohjonen, Occupational Medicine, Volume 51, Issue 3, 1 May 2001, Pages 209–217, https://doi.org/10.1093/occmed/51.3.209</i></p> <p><i>Kelly, C., Craft Morgan, J., Kemp, C. L., & Deichert, J. (2018). A profile of the assisted living direct care workforce in the United States. Journal of Applied Gerontology, 0733464818757000.</i></p> <p><i>Morgan, L. A., Rubinstein, R. L., Frankowski, A. C., Perez, R., Roth, E. G., Peeples, A. D., ... & Goldman, S. (2014). The facade of stability in assisted living. Journals of Gerontology Series B: Psychological Sciences and Social Sciences, 69(3), 431-441.</i></p> <p><i>Kistler, C. E., Zimmerman, S., Ward, K. T., Reed, D., Golin, C., & Lewis, C. L. (2016). Health of older adults in assisted living and implications for preventive care. The Gerontologist, 57(5), 949-954.</i></p>

Module 2 - Assessment Of The Skills And Competencies Based On Target Groups - Description

UNIT 1 – Home Care Recipients in Focus

Definitions:

Home Care Recipients: Who receive the home care services (target groups).

Home Care Workers/Givers: Who give/provide home care services (except professional members).

Trainer: Trainers, educators, job coaches, mentors, etc., who work directly with home care workers to guide and train them to find a right in the sector.

Supervisor: Trainers, educators, job coaches, mentors, etc., who directly observe and guide home care workers on the job and support on-the-job-training.

Activity Flow Process:

Activity 1 - Understanding The Target Group (Home Care Recipients):

Stage 1 - Understanding the previous learning

Stage 2 - Step 1. Introduction and Definitions

Step 2. Recognition of the changes in-home care needs

Activity 2 - Understanding The Characteristics of The Target Group

Stage 1 - Elderly People

Stage 2 - Physically and mentally challenged people

Stage 3 - Children

Activity 1-Understanding The Target Group (Home Care Recipients):

Stage 1: Previous learning and knowledge of the group are recommended to be checked at this stage. The trainer should define the current knowledge of home carers through the questions below:

- Who might need home care?
- Apart from your care experience, which groups should be added to the target group of home care recipients?
- Can you compare the situation in your country with the groups in need of home care in the world?

- Which groups of home care recipients do you think need home care the most?

Stage 2: This stage covers brief information about the subject. Trainers introduce the subject of the unit and then support a discussion in step 1 and brainstorming in step 2.

Step 1 - Introduction and Definitions: The lack of standardization of health and social care data constitutes a major difficulty in comparing home-care recipients across countries. There are three main reasons. First, the definitions of home care differ across countries. Secondly, data from different countries measure outcomes for differing lengths of time (some refer to one day, others to a week, and still others to a year). Thirdly, no data on home-care recipients were available in many countries. In particular, the utilization rate of home care differs widely across countries. The target population seemingly differs substantially within home care. As population aging will be a fundamental demographic change in the future, old people will probably be the greatest users of home care. Among the adult recipients of care, approximately 80% are age 50 or older and have mostly age-related disabilities. Another relatively large group consists of adults ages 18 to 49, often with mental illness. The disability and aging communities differ significantly in their perceptions, definitions, and values about the independence and autonomy of disabled individuals. These viewpoints are reflected in the different services and goals of personal assistance provided to older and younger disabled persons. The most common disabilities occurring in children are learning disabilities; attention deficit disorders; other mental, emotional, and behavioral problems; intellectual disabilities; developmental disabilities; asthma; speech or language problems; and diseases such as cancer and diabetes. These problems tend to vary with the age of the child. Speech problems are common early in life but tend to recede later, and learning disabilities are more likely to arise later in childhood.

Step 2 - Recognition of The Changes in Home Care Needs: Based on the patient's needs, undertaken to preserve and increase functional ability and make it possible for the person to remain at home. In conclusion, home care as a phenomenon was the care provided by professionals to people in their own homes with the ultimate goal of not only contributing to their life quality and functional health status but also replacing hospital care with care in the home for societal reasons; home care covered a wide range of activities, from preventive visits to end-of-life care.

A person's needs for home health care also vary over time. In the early stages of a disability or disease, preventive activities may be important. Later in a caregiving experience, technologies that make individuals more independent can have a big impact. Today, human factors research tends to focus on the later and more intensive caregiving period and slight the early-stage opportunities for prevention, along with the transitions that occur toward the end of the caregiving experience.

Activities for trainers' use in this stage:

Trainer should;

- Describe the stressors in the caregiving experience: Experiences differentiate among such factors as the functional disability of the care recipient, the care demands, the coordination of care, and the suffering of the care recipient. The trainer should understand based on an in-depth understanding of the caregiving experience of home care workers.
- Coordinate formal and informal home care: The task demands of informal care should be known to assess the capacity of caregivers. Caregiver performance and recipient status should be monitored, and training and tools should be provided to health and social service providers.
- Adopt a standard definition cycle of caregiving and home recipients' needs into the regular working system.
- Put the technology into the agenda: Emerging technologies could be very useful in training care providers, monitoring caregivers and recipients, and enhancing functioning and autonomy. More emphasis needs to be placed on implementation as opposed to developmental research, and privacy concerns need to be addressed.

Activity 2- Understanding The Characteristics of The Target Group

1. Trainer introduces the subject of the stage and supports a discussion in all stages of the Activity.
2. At the end of the stage, based on the issues below trainer should support group work by dividing the whole group into 3 different groups up to identify the characteristics of the home care recipients. Group discussion topics:
 - Characteristics of the elderly people
 - Characteristics of the physically and mentally challenged people
3. At the end of the group work, each group should be encouraged to report and present their work.

Stage 1 – Elderly People: In this stage, a brief discussion with home care workers is recommended within the scope of the issues below.

Step 1- General approach to aging

1. Aging and the individual
 - a. Aging as a normal process
 - b. Individual variations in the aging process
 - c. Physical/Mental process
 - d. Influences related to the aging process
2. Social factors and the elderly
 - a. The family

- b. Finances
 - c. Sex role differences
 - d. Cultural/Spiritual differences
 - e. Communication and interpersonal skills and the elderly
 - f. Observing and reporting unmet needs
 - g. Maintaining confidentiality/ethical behavior
3. Attitudes towards aging – personal/societal

Step 2-Aging and the Body/Body Systems

1. Define effects of aging, common health problems, care of the recipients, and symptoms to report.
 - a. Immune System
 - b. Respiratory System
 - c. Cardiovascular System
 - d. Skin (Integumentary System)
 - e. Musculoskeletal System
 - f. Sensory System
 - g. Digestive System
 - h. Urinary System
 - i. Endocrine System
 - j. Neurological System
 - k. Reproductive System

Step 3-Aging and the Mind

1. Mental and personality changes
 - a. Temporary changes in mental functioning and causes
 - b. Permanent changes in mental functioning and common problems
 - c. Caring for home care recipients with memory loss or confusion
2. Stress

- a. Causes and effects (mental, physical)
 - b. Coping mechanisms
 - c. Techniques to reduce stress
3. Observe, record and report.

Stage 2- Physically and mentally challenged people: In this stage, a brief discussion with home care workers is recommended within the scope of the issues below. The trainer introduces the main titles stated below and supports a brainstorming discussion in all steps of stage 2.

3.1 Mentally Health

Step 1-What is Mental Health?

1. Mentally healthy people can:
 - a. adapts to change give and accept affection develop good relationships
 - b. control their impulses and accept responsibility for their actions
 - c. accept disappointment
 - d. tolerates a certain amount of anxiety and frustration
 - e. respect themselves and enjoy the respect of others

Step 2-Defining The Mental Illnesses

1. Describe mental illness (severe, mild)
2. Causes of mental illness
 - a. physical factors (i. brain injury, ii. chemical imbalance)
 - b. Environmental Factors
 - c. heredity
 - d. abnormal stress
3. Effects of mental illness
 - a. Individuals
 - b. families

4. Types of mental illness

- a. abnormal anxiety
- b. abnormal fears (Phobias)
- c. abnormal sadness or grief (Depression)
- d. abnormal ideas (Paranoia)
- e. abnormal thinking

Step 3-Mental Care and Home Care Worker

- a. Report any changes
- b. Observe, record, and report what is happening in the home
- c. Assist with home management and personal care
- d. Promote mental health through reassurance, encouragement, guidance
- e. Help HR to reserve his/her authority and affection in the family
- f. Assist in the recovery process

3. Maintain safety for the HR and the Home Care Worker

- a. Discuss a plan of care with your supervisor
- b. Maintain a safe home environment. Don't leave HR unattended if the plan of care requires constant home care need
- c. Observe/ report any changes
- d. Call the emergency number for extreme behavior changes

3.2 People with Developmental Disabilities

Step 1-Definition of developmental disabilities

1. List ways in which developmental disabilities affect normal development (i. Self-care, ii. Communication skills, iii. Movement, iv. Self-direction (control over life), v. Potential for independent life, vi. Potential for financial independence)
2. Types of developmental disabilities
 - a. Mental retardation
 - b. Cerebral Palsy
 - c. Autism
 - d. Neurological impairments
 - e. Multiple disabilities

3. Levels of functioning (a. Mild, b. Moderate, c. Severe, d. Profound)
4. How do developmental disabilities affect growth and development?
5. Causes of developmental disabilities
 - a. Congenital – chromosomal or genetic defects (Down’s Syndrome)
 - b. Acquired (i. Infections during pregnancy, ii. Brain damage during delivery, iii. Alcohol, drug abuse, or poor nutrition during pregnancy, iv. Premature birth (low birth weight), v. Lead poisoning)
6. Differences
 - a. Developmental disabilities are permanent, and mental illness may be temporary
 - b. Developmental disabilities occur before the age of 22, and mental illness can occur at any time in a person’s lifetime

3.3 People with Physical Disabilities

Step 1 - Differences based on cause and timing (Developmental (at or near birth), injury-related, disease-related)

- a. Temporary or permanent
 - b. Diagnosis does not indicate the level of function
 - c. Impact on function
 - d. Activities of daily living
 - e. Instrumental activities of daily living
2. Impact of physical disability on quality of life
- a. Supports (family, environmental supports, social supports)
 - b. Stresses
 - c. Coping mechanisms of individual
 - d. Coping mechanisms of family
 - e. Other stresses, i.e. lack of opportunities for socialization
 - f. Stress as related to basic needs

Step 2 - Home Care Worker and the Physically Disabled

1. Home care goals for people with physical disabilities
 - a. Promoting self-care and independence
 - b. Maintenance of dignity and self-worth

- c. Preservation of norlifestyletyle
2. The role of the home care worker
 - a. Plan of care for services provided
 - b. Emotional support
 - c. Encourage as much independence as possible
 - d. Assist HR in making the environment as supportive as possible
3. Social, cultural, and environmental influences in caring for people with physical disabilities
4. Situations in which people with physical disabilities may require home care

Stage 3-Children: In this stage, a brief discussion with home care workers is recommended within the scope of the issues below. The trainer supports a brief discussion after the introduction of the stage's topic.

Step 1 - Family Situations in Which Children May Need Home Care Workers

- a. Chronic illness of a child or parent
 - b. Disability
 - c. Prematurity
 - d. Post-trauma
 - e. Inexperienced or overwhelmed parent
 - f. Death or desertion of a parent
 - g. Domestic violence, abuse, neglect, drug abuse, or alcoholism by either parent
2. Five basic needs:
- a. Physical needs
 - b. Safety and security needs
 - c. Belonging needs
 - d. Self-worth needs
 - e. Self-fulfillment needs

Step 2-Development Stages: Home care workers should be aware of the development stages of children.

1. Child growth and development – physical, psychosocial, and play
 - a. Infant – Birth to 12 months
 - b. Toddler – 1 to 3 years



- c. Preschool – 3 to 6 years
- d. School age – 6 to 11 or 12 years
- e. Adolescent – 11 years to 18 years

Step 3-Factors that Effect The Quality of Home Care for Children

1. Environment
 - a. Socioeconomic status of family
 - b. Family dynamics
 - c. Illness and injuries
 - d. Mentally challenged
 - e. Alcoholism and drug abuse
 - f. Domestic violence
2. Stress
 - a. Effects on family
 - b. Effects on children in all stages of development

Step 4-Strengthen Home Care Services Through Work With Parent

1. Keys factors in working with parents and families
 - a. Understanding family roles and functions
 - b. Understanding family dynamics and responses to illness and stress
 - c. Working with families
 - d. Show respect for family's resources, lifestyle, and culture
 - e. Address caregiver's needs at beginning of each visit
2. Role of the Home Care Worker
 - a. Observing/Reporting
 - b. Communicating with the home care team (supervisors, etc.)

UNIT 2 – SKILLS AND COMPETENCES BASED ON TARGET GROUP

Activity 1: Introduction and Definitions

Stage 1: Introduction and Definitions:

Activity 2-Main Competences and Skills

Stage 1-Communication and Interpersonal Skills

Stage 2-Confidentiality, Professionalism, and Ethics

Stage 3-Safety

Stage 4-Applying Personal Care

Stage 5-Household Care

Activity 1: Introduction and Definitions

Stage 1: Introduction and Definitions:

The trainer provides brief information and introduces the topic of the stage. After the introduction of the stage trainer can support a discussion in step 2 through the questions below:

- Who prefers to provide home care to elderly people/children/disabilities?
- Why do you prefer to provide home care to elderly people/children/disabilities? (For deep discussion and understanding)
- What do you think about the working conditions of home care workers?
- What do you think about the future of the home care sector?

Step 1-Brief information

Home care is a labor-intensive sector. Although some initiatives use modern technology to replace some human labor, home care is mainly a hands-on activity. The provision of home care that is quantitatively and qualitatively satisfactory requires workers who are available at the right time, in the right place, and with the right skills. Furthermore, the quality and efficiency of in-home care may also be enhanced through effective human resource management methods.

Step 2 - The Mismatch Between Demand and Capability

The need and demand for home health care are going to increase dramatically in the future. The aging of the generation, increased survival of infants and children with disabilities, an increase in such disabling health conditions as obesity and diabetes, and new populations of disabled people, are all going to increase the need for home health care. Additionally, fragmented and geographically dispersed families, the high costs of formal care, and a lack of appropriately prepared home care workers create a big gap in the sector. Working conditions are also a big issue in this area. Good working conditions are needed to recruit and retain qualified home-care workers. The following working conditions were investigated:

- whether tasks are laid down at the national/regional level;
- whether home-care professionals have permanent working contracts;

- whether collective agreements on working conditions and salaries are in place; and
- home-care workers' salaries.

Activity 2-Main Competences and Skills

In this activity, the trainer should support a brief discussion in the same line stated below.

Stage 1-Communication and Interpersonal Skills

Step 1-In this step following issues are recommended to be discussed with home care workers, trainer's role is to be a facilitator in the discussion:

- Communication and its importance in-home care
- Different methods of communication
- Principles of effective communication
- Physical and emotional barriers to effective communication.
- Communication techniques to use with individuals having special needs (e.g. Vision, hearing, aphasia, and cognitive impairment)
- Active listening and barriers to effective communication.

Core Skills:

- Active listening skills to communicate with the client, family, and other members of the health care team.
- Recognize, interpret, and respond appropriately to nonverbal cues.
- Recognize and adapt communication style to address client barriers to communication. Barriers could include vision, hearing, speech, and language disorders, including clients with cognitive impairment and/or mental health and addictions challenges.
- Use tone, verbal, and nonverbal communication that demonstrates respect, promotes the home care recipient's dignity and is culturally appropriate.
- Demonstrate proficiency in comprehension of the language, including verbal and written communication.
- Communicate through a variety of methods: written (electronic/paper, client chart, and emails), verbal (telephone and in person).
- Demonstrate effective use of information technology appropriate for health care settings.
- Identify and demonstrate the use of verbal and nonverbal communication techniques and interventions to address responsive behaviors.

Stage 2: Confidentiality, Professionalism, and Ethics

Step 1-In this step following issues are recommended to be discussed with home care workers, trainer's role is to be a facilitator in the discussion:

- Scope and importance of confidentiality including conversations, observations, and reporting
- Responsibility for maintaining the confidentiality

- Importance of confidentiality as it pertains to personal and medical information
- Guidelines for protecting the information of the home care recipients (national and international guidelines can be described in this part).

Core Skills:

- Understands his/her responsibilities and commitments as a home care worker.
- Applying all home care activities by laws, regulations, policies, confidentiality issues, and ethical codes.
- Acting professionally and how to serve as a role model for peers, particularly relating to timeliness, attendance, accountability, and appropriate appearance for the work environment.
- Promoting overall independence. Supports independent and consumer-directed living.
- Promoting an individual's rights to privacy, respect, and dignity. Informs the individual of his/her rights.
- Respects the confidentiality of the individual's information in all verbal and written communication, including email and text messages.
- Interacts with individuals, coworkers, supervisors, and all others professionally.
- Working by work environment boundaries and scope of work.
- Using emotional intelligence to better communicate and empathize with others, and overcomes challenges

Stage 3-Safety:

Safety refers to providing care and services that promote and maintain the health and well-being of the home care recipient. It also refers to preventing harm to the home care worker and/or members of the home care team.

Step 1-In this step following issues are recommended to be discussed with home care workers, trainer's role is to be a facilitator in the discussion:

- Common factors that contribute to accidents in the home
- Home Care Worker's role in injury prevention and fire safety
- Methods of ensuring own safety in the field
- Basic home fire prevention and response actions
- Basic first aid techniques for common emergencies
- Agency policies that relate to safety issues
- Situations that require immediate attention by self or emergency services

Core Skills:

- Ensures that the environment promotes personal safety for individuals. Prevent, recognize, and respond to emergencies, safety hazards, and unsafe situations that may endanger the home care recipient. Adheres to procedures necessary to maintain a safe environment and minimize risks.
- Practices actions to take in response to emergencies.

- Recognize and report signs of abuse and/or neglect.
- Report and document incidents, adverse events, and/or near misses according to practice setting guidelines and policies.
- Demonstrate infection prevention and control principles, and adhere to practice setting guidelines and policies.
- Demonstrate the ability to operate health equipment safely.
- Demonstrate safe use of body mechanics and patient handling techniques.
- Demonstrate the principles of safe food handling and safe mealtime assistance.

Stage 4-Applying Personal Care

In this stage following issues are recommended to be discussed with home care workers, trainer's role is to be a facilitator in the discussion:

Step 1-Definition of Main Tasks

- Bathing
- Toileting
- Teeth and mouth care
- Ambulation
- Dressing/grooming
- Eating
- Transferring

Step 2-When and Who Needs Personal Care

- Recovering from an illness/accident
- Long-term chronic condition
- Frail advanced age
- Permanently disabled
- The dying home care recipients

Core Skills:

- Definition of personal needs of home care recipients
- Respecting, valuing, and showing acceptance for cultural, religious, and socioeconomic differences in terms of applying the care
- Recognition and acknowledgment of past accomplishments and setting new goals
- Handling special problems
- Encourage and support the client's efforts to maintain and/or enhance their health, wellness, independence, and quality of life.
- Promote the client's ability to guide and participate in their care to the greatest degree possible.

- Provide individualized, age-appropriate, person-centered care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support.
- Recognize and respect the client's uniqueness, diversity, rights, and concerns and their ability to make choices, take risks, and have control over their life.
- Provide medication assistance as assigned by a regulated health care professional.
- Demonstrate the ability to provide basic palliative and end-of-life care.
- Applying the care below correctly and according to the guidelines:
 - Bathing
 - Toileting
 - Teeth and mouth care
 - Ambulation
 - Dressing/grooming
 - Eating
 - Transferring

Stage - Household Care

Step 1-In this step following issues are recommended to be discussed with home care workers, trainer's role is to be a facilitator in the discussion:

Purposes of housekeeping in-home care

- a. Enhances quality of life
- b. Promotes independence and self-sufficiency
- c. Maintains the home during a family crisis

2. Importance of maintaining a clean home

- a. Infection control – keeps bacteria, and fungus under control
- b. Safety and security – fewer accidents likely to occur
- c. Basic needs are met – comfort, belonging, pride, higher self-esteem, self-fulfillment

Core Skills

- Performing housekeeping by the national and international guidelines
- Recognition of the ways to be safe and save energy and time
- Understanding how to get the job done
- Proper hand washing before and after each task
- Rubber or housekeeping gloves used for cleaning
- Reading directions when using cleaning products; do not mix products
- Avoiding electrical equipment near water, sink/bathtub
- Keeping equipment clean and dry
- Observing all safety precautions
- Wearing gloves when handling clothes/linens soiled with body fluids
- Storing food properly



- Notifying supervisor/family of needed screen windows, repairs, or exterminator

UNIT 3 – ASSESSMENT TOOLS

Activity 1-Template A-Basic Information (Annex 1)

Stage 1-General Profile of Care Recipient and Care Worker

Basic information about Home Care workers is required.

Expected Outcome: By using Template-A for the trainers, they learn about the background of Home Care Workers and basic information they have related to target groups.

Stage 2-Experiences in the Home Care Sector

Step 1-Tasks according to the needs and demands of the Home Care Recipient

Based on different target groups (Acute Chronically ill, Elderly People, and Physically and Mentally Challenged Children), caregiving tasks are subdivided into three groups Personal/Nursing Care, Household Care, Supervising Care, Coordination, and listed. Home Care workers are requested to explain if they have any experience in these fields.

Expected Outcome: Assessment of the correlation and assessment of workers' competencies of home care with the target groups. As a result, the trainer can specify if the worker needs training and in which fields. A trainer can also recommend supervision of specific tasks.

Step 2-Health Conditions of the Care Worker

To identify the physical and emotional health, any illnesses, and habits such as smoking, or drinking alcohol. etc. are requested.

If a home care worker is experienced, then asked about the effects of home care workers on their emotional/psychological health.

Expected Outcome: Trainers assess the base of the information given and fill in the checklist of the necessary/compulsory competencies of the home care worker.

Overall Evaluation puts forward the potential of the workers and their employability for the target groups.

Activity 2- Template B-Questionnaire (Annex2)

The questionnaire is applicable for the candidate home care workers without any/less experience in home care or with target groups. To assess the i. Reaction ii. Learning iii.Behavior. Competence-based on the home care of the target groups.

Home Care Workers are requested to answer the questions. Trainers can grasp the willingness, intention, preferences, concerns, financial demands, competencies, information level, deficiencies, and need for support of the Home Care worker.

The Work Ability Index (WAI) is applied to 19- to 62-year-old female home care workers. It is stated that the first significant decrease in workability occurs between the ages of 40 and 44 years, and a second, sharper decrease occurs after 55 years of age. The subjects' physical workability deteriorates



as early as 35 years of age. In addition, current workability, number of diagnosed diseases, and work impairment due to diseases proved to be the most age-sensitive measures of workability. The subjects who perceived their health status as poor had the highest risk for poor workability. ¹ The trainer should also take into consideration the effect of the age of home care workers on workability.

After all, the trainer can make an overall assessment of employability and level of competence for the target groups. People select those actions or activities that they feel they are capable of. People may feel self-confident regarding specific tasks, which is the typical task-related conceptualization of self-efficacy. The level of competence, workability, and and and and and and experience is a benchmark for evaluation.

Finally, impact evaluation is performed through pre-test and pro-test to Trainers. It measures the effectiveness of the training that has been conducted.

¹ T. Pohjonen, *Occupational Medicine*, Volume 51, Issue 3, 1 May 2001, Pages 209–217, <https://doi.org/10.1093/occmed/51.3.209>



Module 2 - Questionnaire

TEMPLATE A - BASIC INFORMATION

A.

Caregiver Profile

Address:

City: _____

Phone: _____

Sex: F M

Age: _____

Marital Status: _____

Number of Children/Ages : _____

Ethnic Origin: _____

Mother Language: _____

Language Proficiency: Are you bilingual? Yes No

Languages: _____

Driving License: Yes No

First Aid Certificate: _____

Other Professional Licenses Held: _____

Education:

Institution	Dates	Major	Academic Status
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Criminal Registration, if any: _____

Care Recipient (CR) Profile

Sex: F M Age: _____ Marital Status: _____ Children: _____

Ethnic Origin: _____ Language Spoken _____

Illness/Disability: _____

Is CR receiving any formal home care service (Public, Private, Municipality) Yes No

If yes, what type of service (s) _____

B- EXPERIENCES IN THE HOME CARE SECTOR (IF ANY)

1. Have you ever worked in home care service? How long?

2. What type of home care service did you give? (24 Hours/Day, Part-Time, Occasional)

3. Do you have any experience in following fields?

Acute and Chronically ill (Elder, Adult and/or Children), _____

Elderly people, _____

Physically and Mentally Challenged Elder/Adult/Children

Children _____



4. Do you have any information/experience/training on dementia, frail care, geriatric care, palliative care?

5. Do you have any information/experience/training on elder with disabilities?

6. Do you have any information/experience/training on home care giving for physically and mentally challenged children?

7. Do you have any information/experience/pedagogical training on developmental processes of childhood and approach?

8. Description of Care Giving Tasks and Support Received

In which fields you give home care service?

List of Care Giving Tasks

Personal/Nursing Care (Acute Chronically ill Elderly people Physically and mentally challenged children) please explain in details;

Feeding: _____

Dressing: _____

Bathing/Showering: _____

Grooming(Haircare,Mouth care,Shaving, Hand and Nail Care, Footcare etc)

Incontinence Care: _____

Mobility of CR: _____

Transfers, Ambulation, Range of Motion: _____

Physical Therapy / Occupational Therapy _____

Yes	No



Assisting with Self-administration of Medications: _____

Pain Management _____

Personal Care for the Well Baby _____

Other _____

Are you having difficulty in any of these areas?

To be filled by Trainer;

If the Caregiver needs training, specify in which areas?(Trainer)

Is supervision for the Caregiver needed?(Trainer)

Other to be specified

Household Care (Acute Chronically ill Elderly people Physically and Mentally Challenged Children), please explain in details;

Preparing Meals _____

Shopping _____

Laundry _____

Housecleaning _____

Yard Work/Light and Heavy Maintenance _____

Banking/Finances/Legal Help _____

Other _____

Are you having difficulty in any of these areas? _____

Yes	No



To be filled by Trainer;

If the Caregiver needs training, specify in which areas?(Trainer)

Is supervision for the Caregiver needed?(Trainer)

Any other issues that the Trainer wants to add?

Supervising Care (Acute Chronically ill Elderly people Physically and Mentally Challenged Children) please explain in details;

Stay in house with the CR so that CR feels safe

Correct and change dangerous, unwanted or difficult behaviours of the CR

Encourage CR for different activities

Ensure prevention of injuries, accidents or wandering

Remain vigilant at night

Other

Are you having difficulty in any of these areas?

Yes	No

❖ To be filled by Trainer;

If the Caregiver needs training, specify in which areas?(Trainer)



Is supervision for the Caregiver needed?(Trainer)

Any other issues that the Trainer wants to add?

Coordination Acute Chronically ill Elderly people Physically and Mentally Challenged Children) please explain in details;

Arrange/Organize/Set up services

Make/Accompany CR to Appointments

Interpret for CR

Arrange/Provide Transportation

Advocate for CR

Other

Yes	No

❖ *To be filled by Trainer;*

If the Caregiver needs training, specify in which areas?(Trainer)

Is supervision for the Caregiver needed?(Trainer)

Any other issues that the Trainer wants to add?

C- HEALTH CONDITIONS OF THE CAREGIVER:

2.1. Physical Health

2.1.1. Please specify any physical illnesses, if any?

2.1.2. Habits (Smoking/Drinking alcohol/Drugs etc.)

2.1.3. Since you have involved in home care work with targeted home care receivers such as acute and chronically ill (elder and/or children),Elderly people, Physically and mentally challenged children, did you experience any negative changes in the following areas?

- Sleeping General Nutrition Headaches Backaches Tiredness
Previous Medical Condition Seeing Doctor/Dentist Medication/Drugs Alcohol
Consumption Cigarette Smoking Weight Exercise
-

2.2. Emotional Health

2.2.1. Has your emotional/intimate life changed?

2.2.2. Please specify any mental illnesses, if any?

2.2.3. Have you experienced any of these feelings during home care giving to those targeted grup such as acute and chronically ill (elder and/or children),Elderly people, Physically and mentally challenged children?

- Exhaustion Boredom Nervousness Worry Isolation/Loneliness Sadness
Guilt Helplessness Anger Frustration/Discouragement Depression

2.2.4. Which of these feelings are related with your home care work?

2.2.5. Are you able to come through these feelings?

2.2.6. Have you recently had any major stress such as death, job loss, divorce or illness?

2.2.7. Have you dropped or do you intend to drop any of your commitments/responsibilities due to your caring work? Yes No

2.2.8. How did this change affect you and your caring work?

2.2.9. Since you started home care work, have you experienced any positive change/tension in your relationship with Acute and Chronically ill (elder and/or children),Elderly people,Physically and Mentally Challenged Children that you give home care?

2.2.10. Did you experience difficulties due to certain behaviors or needs of CR like:

Shouting/Sexual Gestures or any other inappropriate behaviours

Being Uncooperative

Memory Problem or Troubles Understanding People



Wandering Off

Repeating Self

In Need of Much Attention

Verbally Aggressive

Physically Aggressive

Sexually Aggressive

2.2.11. Did you need assistance dealing with these behaviors?

2.2.12. Did you experience tension with your family (spouse, siblings, children) due to your homecare work?

EVALUATION OF THE TRAINER

Competent for Acute and Chronically ill (elder and/or children)

Elderly people

Physically and Mentally Challenged Children Other

Experience in Home Care

Training on Home Care

Sufficient Education

Required Language Skills

Effective Communication Skills

Physical Endurance

Emotional Strength

Travelling Capability

Critical thinking

Yes	No



Empathy		
Responsiveness		
Courage		
Ability in Emergency/Crisis Management		
Confidentiality		
Householding Capability		
Understanding of CR profile and characteristics		
Knowledge of First Aid		
Capability of applying first aid		
Independent working style		
Commitment		
Willingness to work on weekends and in the evening		
Friendliness		
Frustration tolerance		

	Yes	No
Helpfulness		
Social engagement/skills		
Sense of Responsibility		
Patience		
Organizational Skills		
Working under pressure		
Kindness		
Compassion		
Honesty		

Other to specify:

TEMPLATE B -QUESTIONNAIRE

1. How and why did you choose to be Home Care Worker?

2. With whom would you prefer and think that you could be able to do home care work?
(Working with elder people, children, adults, who are acute and chronically ill, physically ill, mentally ill, having disability etc.)

3. What would you apply for?

24 Hours/Day Full-Time Part-Time Occasional

4. From 1 to 4, where would you put your need for support/training in your care giving service?

1=No Need 2=Less 3=High 4=Very High

5. Do you feel that Care workers can get enough information from health professionals about home care recipients' acute and chronically illnesses, mental illnesses, disabilities?

6. In your relationships with Care Recipient (CR) do you encounter/face with any problems or worry about such a possibility due to your language, culture, lifestyle choices, values, etc. Yes No

7. Does the distance between your residence and the Care Recipient make a problem?

8. Do you have any concern about transportation?

9. Do you prefer to provide home care depending on the Care Recipients' age, existing illnesses and disabilities?

10. Do you adapt any changes in your living arrangements because of the care you provide to CR?

11. Do you have children? Yes No

If yes, what are their ages?

How many of them do you provide care for?

12. What other responsibilities or commitments do you have? (e.g. employment, child care, education, volunteer employment, leisure etc.)

13. What kind of priorities should be in home caring for the groups below (please list at least 3 priorities):

Acute and Chronically ill (Elderly, Adult and/or Children)_____

Elderly
people _____

Physically _____ and _____ Mentally _____ Challenged
Elder/Adult/Children _____

Children

14. What do you think about the payment for your home care?

If CR is acute and chronically ill,

Physically and Mentally Challenged Children,

—

Having disability

—

15. What is your preference for social security insurance while applying for home care work?

—

16. How is your physical health?

Excellent Good Fair Poor

17. How do you feel about your mood, emotional health?

Excellent Good Fair Poor

18. Do you feel appreciated for the home care work you do?

19. What is the most rewarding thing for you about home caring?

20. What qualities and personal strengths do you bring to your caring role for;

Acute and Chronically ill (elder, adult and/or children) _____

Elderly _____ people,

Physically and Mentally Challenged Elderly/Adult/Children _____

Children

21. How do you manage a crisis with those targeted groups? Do you have an emergency plan for the following crises?

i. Sudden Deterioration of the Situation/Sudden Increase in CRs' Needs Yes No

ii. Being Suddenly Unable to Provide Care Yes No

iii. CR Wanders or Gets Lost Yes No

iv. CR attempts Suicide Yes No

v. Need for Sudden Evacuation Yes No

23. What do you think that you need support to improve your home care competences for Acute and Chronically ill (elder and/or children), Elderly people, Physically and Mentally Challenged Children?

	Acute and Chronically ill (elder and/or children)	Elderly people	Physically and Mentally Challenged Children
Information			
Training for specialized tasks			
Nutritional Services			
Prescription Assistance			
Support for Emergencies			
Legal Services/Notary			
Housework Services			
Financial Aid			
Transportation Services			
OT/PT/Rehabilitation Services			
Professional Assistance with arranging services			
Adult Daycare			
Other, Specify			



Other issues to be mentioned:

Evaluation of the Trainer:



Module 2 – Overall evaluation

MODULE II - Assessment Of The Skills And Competences Based On Target Groups

Evaluation Tools Overall – Pre and Post Tests

UNIT 1 – Home Care Recipients in Focus

	Yes	No
Old people will probably be the greatest users of home care.	<input type="checkbox"/>	<input type="checkbox"/>
The 2nd relatively large group, which needs home care, consists of adults ages 18 to 49, often with mental illness.	<input type="checkbox"/>	<input type="checkbox"/>
The most common disabilities occurring in children are learning disabilities.	<input type="checkbox"/>	<input type="checkbox"/>
Speech problems are not common early in life.	<input type="checkbox"/>	<input type="checkbox"/>
Learning disabilities are more likely to arise later in childhood.	<input type="checkbox"/>	<input type="checkbox"/>
Among the adult recipients of care, approximately 80 % are age 50 or older and have mostly age-related disabilities	<input type="checkbox"/>	<input type="checkbox"/>
Chronic illnesses don't affect mental health	<input type="checkbox"/>	<input type="checkbox"/>

UNIT 2 – Skills and Competences Based On Target Group

	Yes	No
Active listening skills are important to communicate with the client, family, and other members of the health care team.	<input type="checkbox"/>	<input type="checkbox"/>

Communication barriers could include vision, hearing, speech, and language disorders.

Using tone, verbal, and non-verbal communication that demonstrates respect, promotes the home care recipient's dignity, and is culturally appropriate.

Proficiency incomprehension of the language, including verbal and written communication is not of great importance in the home care sector.

Applying all home care activities in accordance with laws, regulations, policies is not a great deal of importance.

Applying all home care activities in accordance with confidentiality issues, and ethical codes is a great deal of importance.

If possible, independence of home care recipients should be promoted

The individual's rights to privacy respect and dignity must not be considered in every practice.

The procedures necessary to maintain a safe environment and minimize risks should be identified.

It is not important for home care applications to adhere to infection prevention and control principles.

Home care workers must possess first aid knowledge.

Age-appropriate care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must be

provided.

Individualized care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must not be provided.

Person-centered care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must be provided.

Safety and security should be provided for household works.

HOW WOULD YOU RATE YOUR CURRENT ABILITY?

Awareness of importance of ethic rules and confidentiality

Good Adequate Needs refresh New to me

Working in an inclusive way

Good Adequate Needs refresh New to me

Importance of diversity, equality and inclusion

Good Adequate Needs refresh New to me

Understanding person centred values

Good Adequate Needs refresh New to me

Working in a person centred way

Good

Adequate

Needs refresh

New to me

Awareness of the environment and ability to manage the factors that may be causing discomfort or distress for home care receiver

Good

Adequate

Needs refresh

New to me

Supporting individuals to minimise pain or discomfort

Good

Adequate

Needs refresh

New to me

Active listening and barriers to effective communication

Good

Adequate

Needs refresh

New to me

Communication techniques to use with individuals having special needs (e.g. Vision, hearing, aphasia, and cognitive impairment)

Good

Adequate

Needs refresh

New to me

Awareness of the importance of communication and its importance in home care

Good

Adequate

Needs refresh

New to me

Principles of effective communication

Good

Adequate

Needs refresh

New to me

Physical and emotional barriers to effective communication.

Good

Adequate

Needs refresh

New to me

Communication techniques to use with individuals having special needs (e.g. vision, hearing, aphasia, and cognitive impairment)

Good

Adequate

Needs refresh

New to me

Importance of confidentiality including conversations, observations, and reporting

Good

Adequate

Needs refresh

New to me

Importance of confidentiality as it pertains to personal and medical information

Good

Adequate

Needs refresh

New to me

Guidelines for protecting information of the home care recipients

Good

Adequate

Needs refresh

New to me

Common factors that contribute to accidents in the home

Good

Adequate

Needs refresh

New to me

Home Care Worker's role in injury prevention and fire safety

Good

Adequate

Needs refresh

New to me

Methods of ensuring own safety while working

Good

Adequate

Needs refresh

New to me

Basic home fire prevention and response actions

Good

Adequate

Needs refresh

New to me

Basic first aid techniques for common emergencies

Good

Adequate

Needs refresh

New to me

National policies that relate to safety issues

Good

Adequate

Needs refresh

New to me

Situations that require immediate attention by self or emergency services

Good

Adequate

Needs refresh

New to me

Awareness of the content of main tasks while applying personal care

Good

Adequate

Needs refresh

New to me

Infection control – role of the home care worker

Good

Adequate

Needs refresh

New to me

Safety and security – less accidents likely to occur

Good

Adequate

Needs refresh

New to me

Maintaining the home during family crisis

Good

Adequate

Needs refresh

New to me

Promoting independence and self-sufficiency

Good

Adequate

Needs refresh

New to me

Importance of maintaining a clean home

Good

Adequate

Needs refresh

New to me

UNIT 3 – Assessment Tools

I have an opinion about home care worker's ability through skill/competence testing questions

Yes

No

Not Sure

Home Care knowledge determines the preferences of the Home Care Employer

Yes

No

Not Sure

The willingness of Home Care Worker to give service is possible to detect

Yes

No

Not Sure

Experience ease the job matching benchmarks between Home Care Worker and Recipient

Yes

No

Not Sure

I grasp optimal Care Giving Tasks of Home Care Service needed with due respect to the privileges/preferences of Care Recipient at the end of interview.

Yes

No

Not Sure

Training need of Home Care Worker is taken into consideration during assessment

Yes

No

Not Sure

Supervision need for Home Care Worker is taken into consideration during assessment

Yes

No

Not Sure

I totally trust in the statement of Home Care Worker

Yes

No

Not Sure

Competence Checklist is sufficient to determine the employability of Home Care Worker

Yes

No

Not Sure

I choose the appropriate question to identify and clarify all the conditions for Home Care Recipient

Yes

No

Not Sure

Assessment can be spread over days in order to build up trust with the Care Worker

Yes

No

Not Sure

I prefer assessment tool to be shared and filled out together with Care Worker

Yes

No

Not Sure

I accept the right of Care Worker to refuse to answer a question



Yes

No

Not Sure

Questionnaire is effective and correlated with the expected outcome of the Home Care Service

Yes

No

Not Sure

Module 3 - Differences of the sector providers - Unit

MODULE III:	
Differences and needs of the sector fund providers (7 hours)	
Main contents	<p>Home care services are provided both by public and private sectors. In most of the countries, public home care is directly provided by governments – with the supervision of their related ministries – within their own national healthcare systems. Besides, private home care services are provided through private institutions, centers and self-employed professionals.</p> <p>Practices for homecare services have different opportunities and standards among public and private sectors. According to some researches, private sector homecare services in low and middle income countries are more efficient and sustainable than public ones. On the other hand, the public sector is also regarded to provide a certain standard based on its services which can be obtained by all the population equally.</p> <p>Regarding their structure both public and private sector homecare services have a mixed picture. Most of the studies point out that public sector homecare services are accessible for all the citizens; but the organizations themselves do not have a full freedom of choices in decision-making process as they are controlled by central governments. On the other hand, private sector homecare organizations are more flexible and can provide their services more extended framework in terms of working hours; but their services are not accessible for all people especially with low income.</p> <p>This module will focus on the difference among private and public homecare sectors needs in terms of opportunities for home care workers.</p>
A short description of the objectives to be reached	<p>The purpose of this module is to compare and evaluate the difference among public and private home care services in order to enhance the perspective of the homecare workers and show them the both sides of homecare services and their opportunities.</p> <p>Module III will be consisted of 2 Units. Following objectives will be reached at the end of the module:</p> <ul style="list-style-type: none"> - understanding the difference between public and private homecare sectors. - understanding the advantages and disadvantages in both public and private homecare sectors.

	<ul style="list-style-type: none"> - providing a clear perspective to the homecare sector workers to set up their future career. - recognizing the needs of public and private homecare sector providers and difference of the working conditions.
	3.3 Unit 1 – THE NEEDS OF THE HOME CARE SERVICE IN THE PUBLIC SECTOR
Topic	Understanding the characteristics of public home care sector
Aims	It is aimed to determine the needs of the public home care sector in terms of human resources qualifications. Learners will be able to identify the different needs of the public home care services at the end of the module
<p>The main activities – program flow process, its stages, description of activities, tasks;</p>	<p>Definitions:</p> <p>Public Home Care Sector</p> <p>Public Home Care Workers</p> <p>Home Care recipients</p> <p>Introduction: Problems such as physical inadequacies, chronic diseases, cognitive disorders, pain, cancer and social isolation due to aging are among the most common health problems. These problems are related to the care of the elderly and should be a state policy. Increasing activities for elderly individuals, who constitute a significant part of the population, is essential for public health.</p> <p>Activity 1- Definition of the different bodies of the public home care sector: (90 min)</p> <p>Stage 1- Introduction and definitions</p> <p>Previous learning and knowledge of the group will be checked about definitions and the dynamics between public home care sector, the workers and the home care recipients in the sector.</p> <ul style="list-style-type: none"> • What are the public bodies that provide home care sector? • Who can become a public home care worker? <p>Stage 2-Understanding the different public institutions that provide home care</p> <p>Learners will define the various public institutions providing home care services to home care recipients that are active under the Ministries of Health such as:</p>

- Education and research hospitals
- General or special branch hospital
- Community health centers
- Family health centers
- Family practitioner centers
- Nursing homes

Activity 2- Understanding the needs and problems of the public home care sector: (90 min)

Stage 1: The problems that are faced in public home care sector:

- Supervision of the service provided at home,
- Security problem in the home environment of the caregiver and the elderly person,
- Difficulties brought by healthcare professionals to provide services outside the institution,
- Qualification and competence of the personnel who will provide care, **(will be evaluated at stage 2)**
- Inadequate personnel and equipment to provide service to everyone in need,
- The service is not provided outside of working hours,
- Disruption of treatment due to the elderly person or their relatives not maintaining the necessary care,
- Failure to establish effective communication between healthcare professionals and elderly individuals/relatives,
- Experiencing intervention problems in emergency situations due to the team members not being with the patient all the time,
- Ethical issues

Stage 2: Qualification and competence of the personnel who will provide care

- Certification
- Experience
- Preferably high school graduate
- Basic security and health knowledge
- Ability to solve unforeseen problems
- Ability to work individually
- Effective communication skills
- Tolerance
- Patience

3.4Unit 2 – Title THE NEEDS OF THE HOME CARE

SERVICE IN THE PRIVATE SECTOR	
Topic	Understanding the characteristics of private home care sector
Aims	It is aimed to determine the needs of the private home care sector in terms of human resources qualifications. Learners will be able to identify the different needs of the private home care services at the end of the module
The main activities – program flow process, its stages, description of activities, tasks;	<p>Definitions:</p> <p>Private Home Care Sector</p> <p>Private Home Care Workers</p> <p>Introduction: In the public home care industry, although the caregivers may be compassionate, they are required to tend to as many clients as possible and therefore their time is restricted, their ability to build relationships with each client is hindered and therefore the impact that they may have on a client’s life is minimal. In the private home care sector, caregivers are encouraged to get to know the client, find out what they love to do and help them to do those things again.</p> <p>Activity 1- Definition of the different bodies of the private home care sector: (120 min)</p> <p>Stage 1- Introduction and definitions</p> <p>Previous learning and knowledge of the group will be checked about definitions and the dynamics between private home care sector, the workers and the home care recipients in the sector.</p> <p>What are the private institutions/companies that provide home care sector?</p> <p>Who can become a private home care worker?</p> <p>Stage 2-Understanding the different private institutions/companies that provide home care</p> <p>Learners will define the various private institutions providing home care services to home care recipients.</p> <ul style="list-style-type: none"> • Private hospitals • Private rehabilitation centers • Private homecare companies <p>Activity 2- Understanding the needs and problems of the private home care sector: (120 min)</p>

Introduction:

The proliferation of uncontrolled and unlicensed companies that employ uneducated illegal workers without health checks is one of the most important reasons that negatively affect private home care sector. However, in order to provide this service in better standards, the necessary technological infrastructure, physician and nurse staff should be created.

Stage 1: The problems that are faced in private home care sector:

Introduction: The negative aspect encountered from the point of view of health workers is that this sector is perceived as a second additional job. Organizations that provide this service professionally can prevent this negativity with a policy of continuous in-service training and remuneration.

Problems and needs to be met in the private home care companies are:

- Inexperienced and untrained companies,
- Unlicensed companies that employ illegal workers,
- Lack of audition,
- Unplanned-unreliable by inexperienced teams,
- Insufficient teams (lack of physicians, nurses, physiotherapists, psychologists, dietitians, social workers and care support personnel)

Stage 2: Qualification and competence of the personnel who will provide care in the private homecare sector

Introduction: In general, the needs of the private home care sector in terms of the qualification and competence of the caregivers are alike.

Besides:

- The healthcare professional providing home care services should respect the privacy of the individual and strictly comply with the principles of confidentiality.
- Requirements should be checked so that individuals who want to receive home care can receive the right care that supports their rights and is safe.
- It is important that the home health and care services team act together with a common understanding.
- Home care worker should provide a safe environment to the recipients.
- Home care worker should provide correct equipments.
- Home care worker/nurse must have the right skills to provide the best service.



Duration of the module	7 hours for total 3 hours for Unit 1 4 hours for Unit 2
Learner requirements	Learners are educators, mentors and trainers working in home care sector who are good at communication and empathic skills, and working directly with home care workers.
Learning outcomes to be reached after completion	Learner will be informed about the needs of the private and public sectors in the homecare sector. And the learner/trainer will be able to give a framework to the homecare workers about the definition and necessities to be employed
Resources required	Flipchart, notes, chairs, papers, pens, markers, PC, internet connection
Learning methodologies used	<ul style="list-style-type: none"> • Lecture • Multimedia presentation • E-learning
Assessment methods	Pre-test Post-test
References	<p>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3378609/</p> <p>https://www.nursenextdoorfranchise.com/senior-home-health-franchise-blog/private-duty-home-care-medicare-medicaid/</p> <p>https://careathomeservices.ca/the-difference-between-private-and-public-home-care/</p> <p>https://lup.lub.lu.se/luur/download?func=downloadFile&recordId=3458880&fileId=3459081</p> <p>Comparison of Public and Private Home Care Services for Elderly in Gothenburg Region, Sweden 2013</p> <p>https://cdn-acikogretim.istanbul.edu.tr/auzefcontent/20_21_Guz/evde_yasli_bakim_hizmetleri/4/index.html#konu-7</p> <p>http://evdebakim.org.tr/downloads/kongre-sunum/yirmidortkasim/evde-saglik-ve-bakim-hizmetlerinde-kalite-aynur-dik.pdf</p>

Module 3 - Differences of the sector providers - Description

Differences and needs of the sector fund providers

UNIT 1 - THE NEEDS OF THE HOME CARE SERVICE IN THE PUBLIC SECTOR

Definitions:

Public Home Care Sector: Home care is defined as the provision of health services and service equipment to patients in the home environment in order to improve and raise the level of health. The provision of the said service through state institutions constitutes the public health sector. As a result of the reduction of hospital bed capacities, home care services have gained popularity and have become an important element of health services. In this framework, the service in question has also started to be offered by the public. With home care services, it provides patients and individuals in need of care with the opportunity to live more freely in their own environment, allowing the patient or individual to be with their family and in their own home environment.

Public Home Care Workers: They are qualified health personnel who go to the home of disabled, elderly and paralyzed patients who need care at home and perform their duties within the scope of care service. He is the person who provides services in order to assist the recovery processes of patients who need home care and to improve their quality of life as much as possible. It focuses on the care of the person in cooperation with the patient's family.

Home Care recipients: Who receive the home care services (target groups).

Introduction:

Problems such as physical inadequacies, chronic diseases, cognitive disorders, pain, cancer and social isolation due to aging are among the most common health problems. These problems are related to the care of the elderly and should be a state policy. Increasing activities for elderly individuals, who constitute a significant part of the population, is essential for public health. Public home care services include examination, analysis, treatment, medical care and rehabilitation, providing social and psychological support services to patients and family members of home care recipients.

The main objective of the public policies for home care of elderly people is to determine policies and strategies at the national level for the elderly to participate in social life without discrimination, to determine the principles, procedures and standards regarding the social service and social assistance activities carried out for the elderly, and to cooperate with the relevant public institutions and organizations in this field. It is shaped within the framework of ensuring cooperation and coordination among non-governmental organizations. In this context, it is important to make policies and strategies more effective in order to ensure the participation of the elderly in all areas of social life as dignified individuals.

Activity Flow Process:

Activity 1- Definition of the different bodies of the public home care sector:

While the world population is increasing, the proportion of the elderly is increasing too. In line with the aging of the world population, especially in developed countries, depending on this trend, service provision for the elderly is also diversified.

In care services, the effectiveness of local administrations, non-governmental practices and private sector services has increased in recent years, besides the central administration. Therefore, while alternative care services are being created in this field, a great diversity also manifests itself in institutional applications. Local governments are based on long years of experience in providing services for the elderly from past to present. The efforts of the local administrations for the elderly to fully adapt to social life and use the urban space are of vital importance.

Stage 1- Introduction and definitions

Previous learning and knowledge of the group will be checked about definitions and the dynamics between public home care sector, the workers and the home care recipients in the sector.

What are the public bodies that provide home care sector?

- Educational institutions
- Relevant ministries
- Hospitals
- Municipalities
- Health professional organizations and other professional organizations
- Voluntary organizations
- Insurance companies
- Private institutions/organizations providing care services
- Pharmaceutical and medical equipment companies
- Institutions/organizations providing social support
- Social Welfare Center

Who can become a public home care worker?

People who have; basic education level, good communication skills can become a professional personal care worker after 2-year schools for careworkers Those people should have the capability to consider the rights of patients and their relatives, improve the quality of life of the patient, recognize the characteristics of the patient, perform daily care, physiotherapy and occupational therapy, organize the patient's room, do in-bed and out-of-bed exercises, relax the patient, get the patient out of bed, give medicine to the patient.

Those people should;

- Apply the treatments given by the doctor in accordance with the determined principles.

- In cases where it foresees that the medical diagnosis and treatment procedures will harm the beneficiary of the service, it records the situation with the relevant doctor.
- Monitors the effects of medical diagnosis and treatment interventions on the patient, keeps the necessary records in case of undesirable situations, notifies the doctor and takes the necessary precautions.
- Evaluates the patient's environment in terms of suitability and ensures that the necessary arrangements (heat, light, ventilation, hygiene, textiles, floors, walls, etc.)
- Provides mobilization of the patient.
- Meets and records all kinds of care and treatment needs of the patient.
- Performs first aid practices for patients.
- Provides occupational therapy to patients.
- Examines and checks all kinds of equipment related to home care services and reports the deficiencies to the relevant units.
- Suggests the person who will act as a substitute in case of leave, report and similar situations.
- Implements activities related to occupational health and safety.

Stage 2-Understanding the different public institutions that provide home care

Home health care is the provision of health services needed by bedridden and chronically ill patients in the home environment and with an expert staff. With this service, instead of diagnosing the patient, it is ensured that the treatment given to the diagnosed patient is followed up and applied. With the home health services project, patients in need are provided with quality, effective, accessible, continuous and safe health services in their own home environment, and these patients can now be treated at their own home without going to the hospital.

The aim of home health services is to minimize the effects of the disease and disability, and at the same time to increase the quality of life of the patient, by minimizing the effects of daily living conditions and reaching the most accurate treatment. This service is required for patients who are treated at home and whose care continues.

With this service;

- Follow-up of the treatment
- Conducting the assays
- Renewal of delegation reports
- Implementation of medical care and rehabilitation services at the patient's home
- It is aimed to provide social and psychological support.

Trainers will define the various public institutions providing home care services to home care recipients that are active under the Ministries of Health such as:

- Education and research hospitals: These are general and special branch health institutions where specialists and sub-branches are trained, trained and researched.
- General or special branch hospitals: Hospitals related to certain diseases, for certain age groups or specializing in organs and transplants are called private branch hospitals. Heart and chest diseases hospitals, kidney hospitals and bone hospitals can be given as examples of private branch hospitals.
- Community health centers: By prioritizing the development and protection of the health of the community living in its region, it determines the risks and problems related to health, plans to eliminate these problems, and implements these plans; It is the health institution that organizes the primary preventive, rehabilitative and rehabilitative health services under the management of the directorate, monitors, evaluates and supports the efficient delivery of these services, and ensures the coordination between the health institutions in its region and other institutions and organizations.
- Family health centers: It provides personal preventive health services (such as pregnant, maternity, infant, child follow-ups, vaccination services) and primary diagnosis, treatment, rehabilitation and consultancy services, health promotion and preventive services, mother-child health and family planning services.
- Family practition centers: Family physicians not only treat their patients, they also try to protect them before they get sick. For this purpose, it offers vaccination, counseling for lifestyle changes, baby and child follow-up, pregnant follow-up, and family planning services among personal protective services.
- Nursing homes: It is a boarding social service institution that protects and cares for elderly individuals aged 60 and over, meets their social and psychological needs, and provides an environment of trust for elderly individuals. The purpose/reason of the organization was established to ensure the continuation of a peaceful home environment, to protect their physical and mental health, to construct social relations positively, to support the elderly in need of care due to social and economic deprivation, socially and economically.

Activity 2- Understanding the needs and problems of the public home care sector:

Stage 1: The problems that are faced in public home care sector:

- Supervision of the service provided at home: Since the home of care recipients is a personal space and there is no supervision function inside the houses, there might occur some problems which can not be under control of the public bodies.
- Security problem in the home environment of the caregiver and the elderly person: the public bodies in the home care sector are not capable of solving possible security problems in the home environment of the care recipients.
- Difficulties brought by healthcare professionals to provide services outside the institution: caregivers are supposed to go out of their institutions to recipient's houses. This might raise some problems including lack of materials, lack of hygiene etc.

- Qualification and competence of the personnel who will provide care, (will be evaluated at stage 2)
- Inadequate personnel and equipment to provide service to everyone in need: Public bodies are providing healthcare to the people in need at their homes however there might not be enough personnel or equipment for all citizens who need care at home.
- The service is not provided outside of working hours: recipients might need care after the working hours.
- Disruption of treatment due to the elderly person or their relatives not maintaining the necessary care: Even the public care worker is still on duty, the work might be disrupted because of the recipient or recipients not following certain rules of care.
- Failure to establish effective communication between healthcare professionals and elderly individuals/relatives: the communication between caregiver and the recipient is a very crucial phase of the relationship.
- Experiencing intervention problems in emergency situations due to the team members not being with the patient all the time: due to the caregivers working hours, he/she might not be with the recipient 24/7 and their intervention to emergency situations might not be realized apart from working hours.
- Ethical issues: the level of ethical standards is crucially important between the public caregiver and the recipient to maintain and establish a good communication.

Stage 2: Qualification and competence of the personnel who will provide care

- Certification
- Experience
- Preferably high school graduate
- Basic security and health knowledge
- Ability to solve unforeseen problems
- Ability to work individually
- Effective communication skills with Tolerance and Patience

Certification

In order to certify the trainings, the Certificate plays an important role in terms of competence. Documentation of the trainings is important both to advance in the career and to facilitate the process of finding a job. Documentation of the trainings you have is an important reference for the service recipients.

Experience

Experience is of great importance when it comes to the home care industry. In addition to the theoretical knowledge about the approach to patients, practical studies are of great importance.

Preferably high school graduate

High school education forms the basis for the knowledge to be acquired within the framework of the field in which to work professionally. In this context, it is of great importance to receive high school education in order to obtain information about the home care sector and to develop communication skills.

Basic security and health knowledge

Ensuring the safety of the person in need and having basic health information is of great importance for the situations encountered in daily life.

Ability to solve unforeseen problems

Working with people in need leads to the creation of practical solutions for unexpected situations. In this context, it is important to have a practical approach, especially in times of crisis.

Ability to work individually

As the employee will have to work alone, both to ensure patient privacy and due to the nature of home care service, one should be prepared for this.

Effective communication skills with Tolerance and Patience

It is important to be tolerant towards the person in need. It is very important to establish empathy with the other party and to show patience at the highest level possible in this context. For this, it is necessary to establish a special communication between two people and to establish this communication on trust.

UNIT 2 – THE NEEDS OF THE HOME CARE SERVICE IN THE PRIVATE SECTOR

Definitions:

Private Home Care Sector: provision of health care services by the private institutions to those in need in their own environment, both in the diagnosis and post-treatment care process, in the follow-up of a chronic diseases and in the processes of providing preventive health and examination services without any health problems.

Private Home Care Workers: Doctor, nurse, physiotherapist, social worker, assistant, occupational therapist, speech therapist, dietitian, patient, family members, volunteers, helpers that work in the private home care sector.

Home Care recipients: Who receive the home care services (target groups).

Introduction: Along with the aging population, health expenditures and the need for care are increasing rapidly and this increase is a serious threat to the future for all countries, including

countries with extremely strong social security systems. With increasing old age, the burden of chronic diseases in total health expenditures is increasing. Problems such as physical inadequacies, chronic diseases, cognitive disorders, pain, cancer and social isolation due to aging are among the most common health problems.

In the public home care industry, although the caregivers may be compassionate, they are required to tend to as many clients as possible and therefore their time is restricted, their ability to build relationships with each client is hindered and therefore the impact that they may have on a client's life is minimal. In the private home care sector, caregivers are encouraged to get to know the client, find out what they love to do and help them to do those things again.

Activity Flow Process:

Activity 1 - Definition of the different bodies of the private home care sector

Stage 1 - Introduction and definitions

Stage 2- Understanding the different private institutions/companies that provide home care

Activity 2 - Understanding the needs and problems of the private home care sector

Stage 1 - The problems that are faced in private home care sector

Stage 2: Qualification and competence of the personnel who will provide care in the private homecare sector

Activity 1 - Definition of the different bodies of the private home care sector

Stage 1: Previous learning and knowledge of the group will be checked about definitions and the dynamics between private home care sector, the workers and the home care recipients in the sector will be defined.

- What are the private institutions/companies that provide home care sector?
- Who can become a private home care worker?

Step 1 - Introduction and Definitions: Health institutions can be operated as a center or unit, depending on their fields of activity, infrastructure features according to the scope of the service provided, and the quality of the personnel serving. Centers are institutions that are operated independently to provide only home care services under the responsibility of a physician and with the necessary minimum standard equipment and personnel support. Units are institutions that provide home care services with the necessary minimum standard equipment and personnel support as a unit, within the body of private health institutions licensed in accordance with the relevant legislation as a hospital, medical center, private branch center or polyclinic. Centers can be opened and operated independently by private law legal entities and real persons. Units, on the other hand, can be opened in outpatient diagnosis and treatment centres, polyclinics and private hospitals. Continuity is essential in home care service. This continuity should be such that 24-hour uninterrupted service can be provided when necessary, including day and night, weekends and

holidays, according to the patient's request and the requirements of the service. In case of need, home care can be provided at certain hours.

Activities for trainers' use in this stage:

Learner (trainer) should;

- Under what conditions and by whom the institutions providing home care services can be opened.
- What equipment should be available to institutions providing home care services?
- Minimum personell requirements of the centers or units.
- Services that should be provided within the centers or units.

Stage 2-Understanding the different private institutions/companies that provide home care: Trainers will define the various private institutions providing home care services to home care recipients.

- Private hospitals: In private hospitals there are a full range of home health care services a patient can receive. The range of services depends on the patient's situation, from nursing care to specialized medical services, such as laboratory workups. The patient can determine her-his care plan and services with the doctors in the private hospitals. At-home care services of private hospitals may include: Doctor care, nursing care, physical, occupational, and/or speech therapy, medical social services, care from home health aides and homemaker or basic assistance care.
- Private rehabilitation centers: Rehab facilities offer an intense therapy to those in need to improve their mobility, balance, endurance, and strength so they can resume their life at home. These rehabilitation centers provide specialized medical care and/or rehabilitation services to injured, sick or disabled patients. People in these facilities are typically referred by a hospital for follow up care after a stay in the hospital for surgery as an example.
- Private homecare companies: There are different ways of accessing and employing private home carers. There are also private care agencies and companies that provide independent carers depending on people's budget and the level of control and ongoing responsibility they want. Private homecare companies services are very flexible and can be tailored to individual needs. It can be provided on an hourly basis or around-the-clock. Many people may need a carer to provide home help or personal assistance for an hour or two a week, others may benefit from people popping in several times a day to oversee medication, help with getting in and out of bed and preparing meals. If a loved one is unable to live safely without support and supervision, they might need a carer to help them day and night. Live-in carers can offer care and supervision to maintain safety twenty-four hours a day. Private home care can be temporary, while someone recovers from an operation, accident or illness. Home care can also be a long-term alternative to moving to a residential facility like a care home. Specialist carers can support people with complex health needs including incontinence, stomas, catheters and tube feeding.

Activity 2 - Understanding the needs and problems of the private home care sector

Introduction: The negative aspect encountered from the point of view of health workers is that this sector is perceived as a second additional job. Organizations that provide this service professionally can prevent this negativity with a policy of continuous in-service training and remuneration. The fact that home care services are a new sector for many countries brings new risks and control problems. Home care services are difficult arrangements that are open to many external factors, require a detailed training program and a close control mechanism. While providing home care services, there are complex and intertwined applications. The moral principles and professional discipline rules of home care should be determined and the application should be made within this framework.

Stage 1 - The problems that are faced in private home care sector

Problems and needs to be met in the private home care companies are:

- Inexperienced and untrained companies,
- Unlicensed companies that employ illegal workers,
- Lack of audition,
- Unplanned-unreliable by inexperienced teams,
- Insufficient teams (lack of physicians, nurses, physiotherapists, psychologists, dietitians, social workers and care support personnel)

Providing health services at home can be defined as a solution that offers medical and sociological benefits in many cultures of the world. It is possible to receive home care services in many countries such as Ireland, Japan, Saudi Arabia, America, Taiwan, Portugal and Belgium. Although it mostly accommodates elderly patients, all patients, adults or children, can be cared for at home when needed. Home patient care procedures, which have advantages such as protecting the family from breaking up, improving the living conditions of individuals, and providing rest to the relatives of the patients, bring many difficulties. If the pros and cons are not properly evaluated, the process can have quite abrasive factors.

The problems mentioned above can be solved by properly formulated terms of the service contract. The criteria should be clear and to the point, confirmed by the concept of service delivery. For example, if the context of the contract will be more clear and includes the specificity of care services of the services in question, if the activities of the care service is specified in terms of the contract less problems will be faced in private home care sector.

The contractors should present the organizational structure of the team, which ensures that the roles and responsibilities have been properly assigned to the individuals. The contract implementation must also be evaluated by the contractor in order to monitor the quality of the services. Furthermore a proper method of contact should be proposed to ensure a healthy flow of information.

Stage 2: Qualification and competence of the personnel who will provide care in the private homecare sector

Introduction: In general, the needs of the private home care sector in terms of the qualification and competence of the caregivers are alike.

The person who will provide Home Care service should be equipped with health and patient/elderly care. It is important to increase the living standard of the person benefiting from this service with on-site interventions. It will increase the quality of the service recipients will obtain if the worker is patient, calm, smiling, positive, with high empathy, honest, responsible, able to keep their cool in the face of emergencies, open to communication, paying attention to personal care and hygiene, and clean and orderly. For this reason, it will be comforting for people to have the relevant qualifications and professional expertise in the person that will provide home care service.

Besides:

- The healthcare professional providing home care services should respect the privacy of the individual and strictly comply with the principles of confidentiality.
- Requirements should be checked so that individuals who want to receive home care can receive the right care that supports their rights and is safe.
- It is important that the home health and care services team act together with a common understanding.
- Home care worker should provide a safe environment to the recipients.
- Home care worker should provide correct equipments.
- Home care worker/nurse must have the right skills to provide the best service.

What are companies are looking for when they are hiring the caregivers?

It is expected the caregiver to be professional and equipped in this regard, to meet recipients needs and expectations.

Caregivers must also be:

- guiding recipients and facilitating the process,
- providing quality health and care services,
- suitable for this profession in terms of their personal characteristics,
- communicatively strong
- available to work for a long time.

Module 3 – Pre-test-Post test Questionnaire

Which statements are true, which are false?

	True	False
Home care services are provided only in public sector		
Practices for homecare services have different standards among public and private sectors		
Community health centers are private home care institutions		
Security risk in the home environment of the caregiver is a problem faced in public home care sector		
Qualification and competence of the personnel of a public home care worker is more important than a private home care worker		
To be compassionate and patient is enough to become a caregiver		
Effective communication skills is the most important feature of a caregiver		
Private home care companies might have insufficient teams		
Social Welfare centers are an option to work as a caregiver in public sector		
In private hospitals there are a full range of home health care services a patient can receive		
Basic security and health knowledge is enough to become a caregiver		
Unlicensed companies that employ illegal workers is a risk factor in the private home care sector		
Continuity is an essential element in home care service		
In care services, the effectiveness of local administrations, non-governmental practices and private sector services has decreased in recent years		

Module 4 - Preparing the low-skilled and low-qualified adults for home care sector – Unit

3.5 Preparing the low-skilled and low-qualified adults for home care sector	
Main contents	In this module, learners will learn the basics of home care, as well as the essential knowledge to take care of someone. Furthermore, basic knowledge and tips and tricks in the areas of nursery, care sector and home care essential.
A short description of the objectives to be reached	<p>In this module learners will learn the following:</p> <p><u>Unit 1</u></p> <ul style="list-style-type: none"> You can identify low-skilled adults You can engage low skilled adults You can define the key challenges You can identify the barrier for learning engagement You can identify solutions for these barriers You can identify some policies taken place in OCDE countries <p><u>Unit 2</u></p> <ul style="list-style-type: none"> You can explain the term home care. You know the main goal of home care You can define the term “patient” You know the different types of adult home care For each condition there is a different list of tasks You know the basic from the different field it is required for home care: kitchen, cleaning, nursery etc; <p><u>Unit 3</u></p> <ul style="list-style-type: none"> You know what a person should know to take care of someone You know the different type of conditions to require help from someone else

	<p>You know the different type of needs for each condition</p> <p>You know the different tasks you need to help as a home care worker</p> <p>You know the different training and skills you need to develop</p> <p>You can explain your everyday tasks</p> <p>You know are able to develop a full training of home care</p> <p>You know the steps to follow to improve as a home care worker</p> <p>You know the priorities in home care</p> <p>You know the abilities and skills a person has to have in home care</p> <p>You know the challenges faced in home care</p>
	Unit 1
Topic	Identify low-skilled adults
Aims	Upon completion of the unit, participants will have built basic knowledge about the situation of low skilled adults; knowledge of how to engage them and to find solutions for the barriers of learning incentives;
The main activities – program flow process, its stages, description of activities, tasks;	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer using a presentation.</p> <p><u>2. Practice questions:</u></p> <p>After completing the unit, learners can answer the practice questions.</p>
	Unit 2
Topic	Basics of Home Care
Aims	Upon completion of the unit, learners will know about the specifics the skills and abilities necessary to develop a role in home care;
The main activities – program flow process, its stages, description of activities, tasks	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer using a presentation.</p> <p><u>2. Practice questions:</u></p>

	After completing the unit, learners can answer the practice questions.
	Unit 3
Topic	Core competencies for successful home care training
Aims	Upon completion of the unit, learners will know the basics of the tasks as a home care worker. Learners will also know about the training and the fields necessary to work in this area.
The main activities – program flow process, its stages, description of activities, tasks;	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer using a presentation.</p> <p><u>2. Practice questions:</u></p> <p>After completing the unit, learners can answer the practice questions.</p>



Duration of the module	7 hours
Learner requirements	<ol style="list-style-type: none"> 1. KNOWLEDGE – Basic knowledge of everyday life. 2. SKILLS – The ability to learn and read with understanding. 3. SOCIAL COMPETENCES – Providing and receiving feedback, as well as demonstrating the readiness to accumulate practical experience. 4. PREDISPOSITIONS – empathy, patience, communication skills, adaptability, respect for people, caring for patients’ health and appearance, lack of prejudice, mental resilience, physical prowess.
Learning outcomes to be reached after completion	Upon completion of the module, learners should have achieved all learning objectives and be able to answer the questions from the questionnaire.
Resources required	<p>Self-learning: computer/laptop/tablet Optional – printer, if printed version is needed</p> <p>Classroom Learning: Computer/laptop Projector</p>
Learning methodologies used	<ul style="list-style-type: none"> • Lecture • Multimedia presentation • Questionnaire



Assessment methods	<ul style="list-style-type: none">• Practical Activities• Reflection exercises
References	<p>Literature:</p> <p>https://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---migrant/documents/publication/wcms_674622.pdf</p> <p>https://independent-age-assets.s3.eu-west-1.amazonaws.com/s3fs-public/2016-05/IA_Moved_to_care_report_12_11_15.pdf</p> <p>https://www.oecd.org/els/emp/engaging-low-skilled-adults-2019.pdf</p> <p>https://www.oecd-ilibrary.org/sites/9cb80d6e-en/index.html?itemId=/content/component/9cb80d6e-en</p> <p>https://www.oecd-ilibrary.org/sites/caaf1553-en/index.html?itemId=/content/component/caaf1553-en</p>

Module 4 - Preparing the low-skilled and low-qualified adults for home care sector – Description

How to identify low-skilled adults and to engage them

Introduction

The topic

Have you ever needed help in home care and didn't know where to look for people? There is a need to start looking for people who are eager to learn and to work.

Home care is a growing field due to the demographic pyramid. The population is getting older and more and more help is needed to take care of the elderly. Apart from this, there is also the problem of low skilled adults, with low qualification that have difficulties in finding a path for their career. To this we find the solution to engage this group and give them a training in fields that need help and are looking for workers. The proportion of older people in the general population is increasing steadily in many European countries and is predicted to rise still further in the coming decades. This will mean increasing rates of caredependent older people. The ratio between the number of people aged 65 and over and those aged 15-64 is projected to increase from 28.8 % in 2015 to 35.1 % in 2025 and to over 50 % in 2050. This has important implications for future economic growth and distribution of resources

In here we will present the key reasons behind low participation, challenges for engaging the group in learning and outlines possible policy responses. In order to deliver a good set of training to become a quality home care worker.

Low-skilled adults

There is an emergency subject related to fit low-skilled adults in the field where they need people. As said before, home care has a tendency to need more and more workers. With the suitable training and a good orientation these adults who need work are able to become and important source of trust to the old population.

Employment opportunities for this group have shrunk over the past decades, highlighting the need to upskill for an increasingly knowledge-driven economy. There is an urgent need to review where the current adult learning system falls short in engaging low-skilled adults and find targeted solutions for this group.

Definition

Adults with low qualification and/or low skills

There are many ways to define adults with low skills. In this course, adults with low basic skills refer to individuals with low proficiency in literacy, numeracy or both. Adults with low qualification levels (aged 25-64) are those whose highest educational attainment level is at most lower secondary education. The group of adults with low basic skills and those with low qualifications are not identical, but overlap. Irrespective, both low-qualified and low-skilled adults are strongly exposed to the consequences of changing demand for skills in the labour market, increasing the need for them to upskill or reskill to stay in employment.

CET

CET mean Center for Employment Training. These are center public or private that provide different courses/trainings for people who would like to explore and learn about a new field to develop their skills and be able to start a new career.

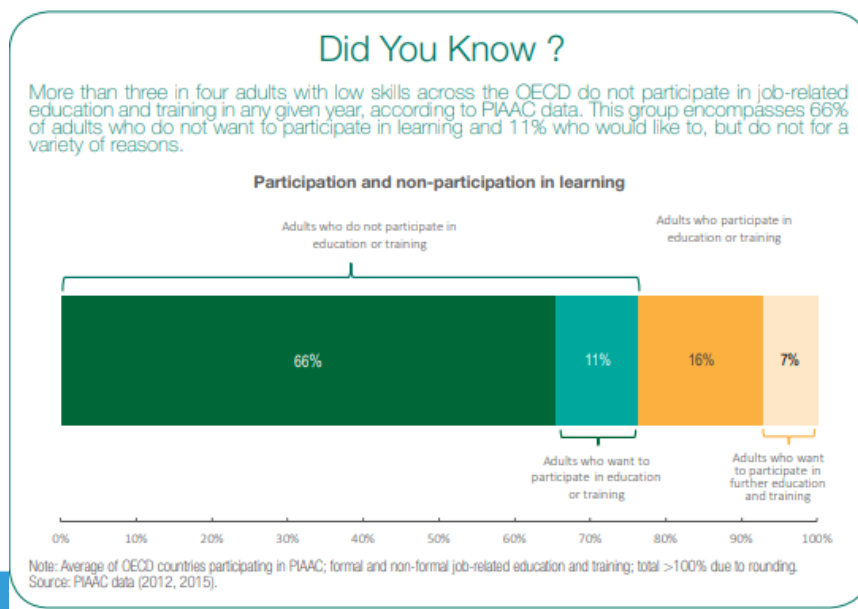
But how can we engage this group? What are the key challenges to overcome?

Well - let's try to answer these questions.

Barriers for Learning Engagement

The main aim of the project is to empower the employability of low qualified and low skilled adults. This will be achieved through defining and assessing the required skills, competences, and developing tools. Through the use of methods, handbook, portal and curriculum this will provide those with low skills and qualifications the support needed to find and match a position with the right skills and competences in the home care sector.

Participation in adult education and training helps people find, keep and further develop in their job. However, adults with low skills are less than half as likely to participate in adult learning as those with higher skills. According to PIAAC data, only 20% of adults with low skills participate in job-related adult learning. Adults with low skill levels find it more difficult to find opportunity to develop themselves and recognise their learning needs.



Supporting adults with low qualifications is imperative for future of work that is both more productive and inclusive.

For this to work we have to understand the challenges and set a plan to overcome these barrier.

What have been the biggest challenges to engage this group?

Key Challenges

A booklet developed by OECD highlights actions that can create more and better opportunities to overcome the key challenges for this lack of participation of low skilled adults. We will develop these actions further more in the course. Each action draws on research evidence and provides insights on how it can been translated into practice by highlights pratical policies in OECD and emerging countries.

The globalization came with an economy driven by more intense competition and a wide use of information and technologies. This reflects in the labor market's changes and skill requirements for employees. There are options of training and formations for these group to develop themselves, however it is seen as a challenge to engage them. There is a wide range of barriers to adults in general to improve their literacy. To design effective policies that engage more.low-skillde adults in learning, it is key to inderstand what their barriers to articipate are. Some of these barriers are explicit, such as the lack of time and interconnected barriers to participation.

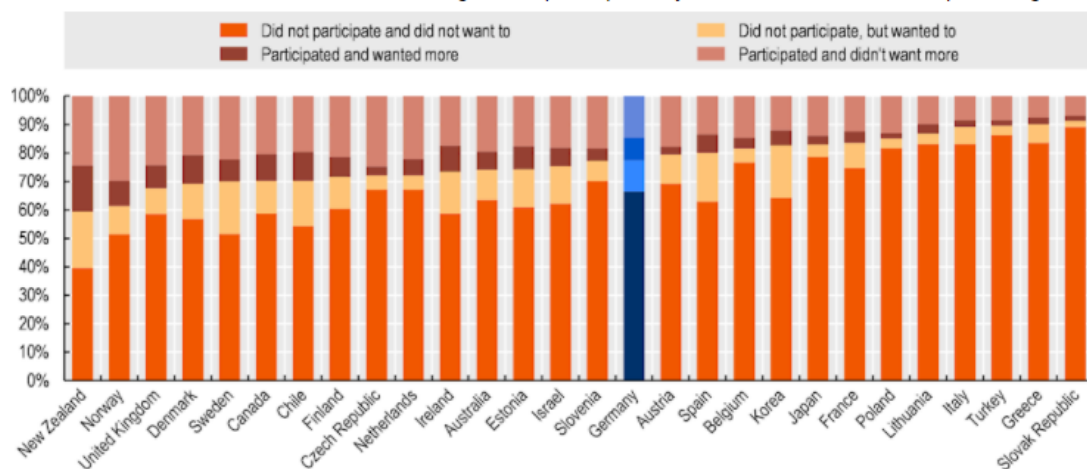
The three main areas refered by the European Union are:

1. **Cultural factors:** for example can be expressed with beliefs and attittdes that literacy is not so important and that your individual experience in more relevant in the adult world;
2. **Individual factors:** relating to possible prior negative experiences, mental issues that can lead to nervousness and lack of confidence;
3. **Structural factors:** difficulties to access learning opportunities, possible regarding local provision or lack of subsidy/affordability to take courses;

This is a complex matter with no easy solution. Each individual has its problems so a personified treatment/ learning process is the best ssolution. But not always the resources are enough to give this type of teaching method. While structural considerations will vary, and relate to the capacity and political will of Member States to address them, cultural and individual factors are perhaps more universal and easier to consider in this context.

According to PIAAC data (fig.2) the vast majority of adults with low qualifications does not want to participate in trainings, and there were no opportunities that they would want to participate. On the other hand, a much smaller per centation does not participate but would like to. In most OECD

Adults with low basic skills and their willingness to participate in job-related CET, 2012/2015, percentage



Note: Participation in formal and non-formal job-related CET; low basic skills refers to adults aged 25-64 scoring at level 1 or below in literacy and/or numeracy in PIAAC; Belgium refers to Flanders, the United Kingdom refers to England and Northern Ireland.

Source: PIAAC, 2012, 2015.

countries, more than 50% of adults with low basic skills are not interested in CET participation.

A 2017 survey by the IAB found that employees with low qualification levels are more likely than their higher-qualified peers to think that they are sufficiently qualified and that they have learnt enough (Osiander and Stephan, 2018[13]). This lack of interest in participating in trainings is closely connected to the characteristics of this group and their life situation/background. The real issue is not the lack of interest, but due to the discouragement for not being able to find a suitable course/training for them, to suit their interests.

Important

Actions that can be taken in order to engage low skilled adults:

- Find creative ways to reach out to potential learners;
- Offer personalised advice and guidance;
- Create interesting learning opportunities;
- Recognise existing skills;
- Provide modular learning skills;
- Give people time off to participate in learning;
- Provide financial support for the costs of training;

We will now go over each of these actions, providing a short explication of what each of them is about and show some practical example in order to be easier to implement them.

1. Creative ways

The first method would be outreach them in the workplace. The workplace is one of the keyplaces where individuals identify their training needs and try to engage with these opportunities. There is also the reference that trade unions can also be a good player to incite the workers in improving their skills. We have also the example of some unions to provide their own training program. For example Unionlearn (UK) supports workers in acquiring skills and qualifications to improve their employability.

Another way is to provide family skill programs, approaching adults in their role as parents. One way can be to reach kindergartens and link learning to their lived experience. It is true that kindergartens and schools are places that low-skilled adults are in contact with. One example for this method is the program in Austria, in Vienna. *Mama lernt Deutsch! – Mum is learning German!* provides basic courses for mothers with low qualifications and for people who don't speak German.

Community-based approaches can also be a good bridge for the target group. The community leaders can disseminate the information about the programs available. This way is particularly important for those who have not so easy access to digitalization and internet connectivity. The example provided comes from Argentina. The Hacemos Futuro program supports early school leavers in gaining primary and secondary level qualifications.

At last, the mobile outreach methods are also examples of ways to reach and engage low-skilled adults, who have very limited links to workplaces or the community. In 2017 was the first year of the Brussels-based project „Formtruck“. It is a walk-in mobile information centre on training opportunities. It aims to engage low-qualified jobseekers and young people not in employment, education or training in locations where they usually spend time, e.g. at events, parks and public squares

The main three key insights to keep in mind from existing practices are:

- Reach out adults in the places they frequent, including workplaces, community institutions and/or public spaces;
- Identify actors that have established links with the target group;
- Build the capacity of these actors to inform adults with low skills and encourage them to take up learning opportunities;

2. Personal advice

It is a challenge to navigate in a jungle of opportunities. There is a range of options from programs to acquire formal basic education to certified short-courses to gain specific skills. In this way there is a need to support and identify their needs and understand what type of training they are looking for. Advice and guidance with low-skills is most successful when it is holistic.

Some examples of implementing these in practices are:

- In Austria, Bildungsberatung Österreich offers independent and free counselling for adults on education and training opportunities. This project is particular target for adults with disadvantages in the labor market, including the low-skilled, older adult etc. Past editions from the program shows that these groups are not reached if they are not targeted specifically. The guidance can be received face-to-face, on the phone or online.
- GOAL (Guidance and Orientation Interventions for Low-Educated Adults) was held between 2015 and 2018 and was funded by the Erasmus+ programme. It was developed and expanded to educational guidance services to increase their participation. The main points taken out of the program was that there is no one-size-fits-all approach. The type of guidance provided should be tailored to each individual needs

The main three key insights to keep in mind from existing practices are:

- Provide holistic advice and guidance services;
- Set-up one-stop shops and establish partnerships with organizations that have link with low-skilled adults;
- Ensure that guidance services are provided by qualified staff, who are able to answer to the needs of each individual;

3. Interesting opportunities

The training developers should take in mind that adults learn in a different way than kids. There are adult learning courses that still take place in the classroom. It often mimics the teaching and learning styles we know from school. The learning opportunities available do not always equip with the skills they need of that fit with the labour market. There is a need to innovate adult learning more interesting and relevant. This means that it is a must be hands-on, problem-oriented and closely linked to the context of the learner. See how others implement this practice:

- Norway provides a program called „Skills Plus Work“. Private and public companies can apply for grants for the training of their employees. Training must be combine work and basic skills, aiming to strenght workers motivations to learn. The main fields of this program is reading, writing, numeracy and digital skills. Guidance for the design of programmes is provided in the form of profiles of basic jobrelated skills for different professions, learning materials and national standards for basic skills for adults.
- *eVideoTransfer* is a German project, based in story-based learning. This project develops industry-specific training, which combine learning content on basic skills and professional knowledge. The project offer digital learning opportunities for workers with limited time.

The main three key insights to keep in mind from existing practices are:

- Keeping in mind how adults learn when designing learning opportunities – practicality, problem-oriented and closely linked to work;
- Offer blended learning opportunities – flexible schedules;

- Make sure the learning mode is appropriate for the target group, provide additional support where needed;

4. Recognise existing skills

Many adults defined as low-skilled may have low literacy, but at the same time they possess a range of other valuable skills. These skills are obtained from years of work-experience. In this sense, recognising these skills can benefit individuals. For individual, it recognises their informal learning effort, which can increase motivation and become a starting point for further learning. For these positive effects to materialise, it is important that employers and society at large value certificates that are obtained through skill recognition and see them as equivalent to those acquired through formal learning.

Putting in place advice and guidance services that support individuals prior, during and after the recognition procedures are crucial to ensuring that these procedures are effective. See how others are doing this in practice:

- In Portugal, Qualifica Centres are comprehensive one-stop shops for guidance on lifelong learning. One of the main competences is the recognitions of skills already acquired in work-experience. Any adult seeking advice at one of the 303 Qualifica Centres undergoes a standardised four-step process: i) information and enrolment, ii) analysis and development of a skill profile, iii) discussion and definition of appropriate education and training path, iv) referral to recognition procedures or appropriate education and training provision.
- France also has a long-standing tradition of recognising and certifying existing skills (Validation des acquis de l'expérience – VAE). Adults can gain recognition for around 1 300 qualifications by demonstrating that they have the relevant skills through work experience.

The main three key insights to keep in mind from existing practices are:

- Give access to recognition procedures;
- Offer advices and guidance to prepare for these procedures and services;
- Use employers to raise awareness of recognition procedure;

5. Modular teaching method

For lack of time and motivation taking part in lengthy courses can be a reason for not so many adults to take part in training opportunities. There is some evidence that adults with low-skills are less willing to participate in time-intensive courses. Modular training is a easy solution to start to implement. Adults can adapts to their own tiem and shape their own learning path. Each module has its own distinct learning outcomes, which are certified as credits or part-qualifications once completed. Learners can work towards a full qualification over time by successively adding modules to their learning portfolio. The opportunities for modular learning have been increasing in the last years. What is clear is that modular learning opportunities work best when embedded in an already

well-integrated adult learning system (OECD, 2003). See how others are implementing this in practice:

- Switzerland is a good example in terms of adult modular training. After pilot experiences and collecting practical experiences the potential was showed. Adults can take part in individual modules or combine different modules to form a full training programme.
- Denmark is another similar example, with a long tradition of modular training. Adults are able to combine modules from different types of adult learning to obtain a formal qualification.

The main three key insights to keep in mind from existing practices are:

- Structure adult learning to consist of a number of self-contained learning modules;
- Provide adults with micro-credentials for successfully completing individual modules and combine them to a full qualification;
- Give the opportunity to choose modules and creating their own learning path;

6. Time off

As we know, most adults with low-skills lead busy lives, managing their house and their family. Unfortunately, they can't afford to take unpaid leave to pursue training. In this way, giving the opportunity to take leave to educational purposes can increase their participation.

Education and training leave gives adults time away from work to take part in learning. Education and training leaves are typically regulated by either legislation or collective agreements, but some employers may have their own bi-laterally agreed leave arrangements. See how others implement this in practice:

- In Austria, employees can apply for training leave for 2-12 month duration (Bildungskarenz). The leave itself is typically unpaid, but those eligible for unemployment benefits can receive a training benefit from the public employment services. The training paid is equivalent to the unemployment benefit.
- In Luxembourg, self-employed people and people with liberal professions have access to paid training leave of up to 80 days. During the leave, employees are paid their average salary, up to a cap of four times the social minimum wage for unskilled workers.
- In Belgium, a generous paid educational leave is available for employees. Employees continue to receive their wages during the leave period, up to a limit of EUR 2 871 per month. Employers can receive compensation from the regional government at EUR 21.30 per hour

The main three key insights to keep in mind from existing practices are:

- Give individuals the right to education and training leave;
- Compensate learners and employers during the time of leave;
- Make provisions for adults in non-standard employment relationships.

7. Financial Support

Financial resources is a big challenge for low-skilled adults to participate in trainings. Adults with low-skills often dip in and out of unemployment or have low-level, low-paid positions with limited opportunities for employer-paid professional development. Consequently, there is a large participation gap between adults with low and those with medium-high wages. Financial incentives to encourage training exist in many countries. Here are some examples:

- Estonia offers a Degree Study Allowance to employed and unemployed adults with insufficient or outdated skills. Individuals can receive a monthly allowance when studying towards a vocational, higher professional or bachelor-degree qualification. According to data from the public employment services, between January and September 2018, 381 people received the degree study allowance every month.
- In Slovakia, REPAS+ is a program that offers professional retraining courses in line with labour market demands. It is mainly to develop soft skills, such as communication and computer skills. Participants receive a subsidy to cover the course fee and travel allowances. The programme is co-funded by the European Social Fund. Public Employment Services administer both programmes.

The main three key insights to keep in mind from existing practices are:

- Provide financial incentives;
- Consider all costs of training and try to cover them;
- Set-up mechanisms to inform adults about the financial support;

SWOT ANALYSIS

A SWOT analysis is intended to help you take a practical, fact-based, and data-driven look at the advantages and disadvantages of a company/plan, its efforts, or its sector. The organization must avoid preconceived notions or gray regions and concentrate on real-life settings in order to maintain the analyses' accuracy.

KEY LESSONS

- SWOT analysis is a method of strategic planning that offers evaluation tools.
- Fact-based analysis, new viewpoints, and innovative ideas result from the identification of fundamental strengths, weaknesses, opportunities, and threats.
- A SWOT analysis gathers data from internal sources (the company's strengths and weaknesses) as well as from outside factors that might have an uncontrolled influence on choices (opportunities and threats).
- When different groups or voices inside an organization are allowed to offer true data points rather than predetermined message, SWOT analysis performs at its best.

- The results of a SWOT analysis are frequently used to support a single goal or choice that a business is making.

Components of SWOT Analysis

The following four categories will be included in every SWOT analysis. Even though the components and findings under these categories will differ from business to business, the following components are necessary for a SWOT analysis to be complete:

→ Strengths

Strengths include things like a strong brand, a devoted client base, a solid balance sheet, innovative technology, etc. that indicate what a firm excels at and what sets it apart from the competitors. For instance, a hedge fund could have created a proprietary trading method that outperforms the market. The next step is for it to determine how to exploit the results to draw in additional investors.

→ Weaknesses

An organization's weaknesses prevent it from operating at its highest potential. A bad brand, higher-than-average turnover, high levels of debt, an insufficient supply chain, or a lack of cash are examples of areas where the company has to improve in order to stay competitive.

→ Opportunities

Opportunities are advantageous outside variables that could provide a company a competitive edge. If a nation lowers its tariffs, for instance, a car manufacturer may export its vehicles into a new market, boosting sales and market share.

→ Threats

Threats are things that could do something bad to an organization. A corporation that produces wheat, for instance, is at risk from a drought since it might ruin or diminish crop production. Other frequent dangers include things like escalating material costs, fiercer competition, a shortage of workers, and so forth.

SWOT Table

The SWOT Analysis table should look like this.

<p style="text-align: center;">Strengths</p> <ul style="list-style-type: none"> - What are the advantages? - What resources are available? - What are the positive aspects? 	<p style="text-align: center;">Weaknesses</p> <ul style="list-style-type: none"> - Where can it be improved? - Which items are doing poorly? - In which areas do we need resources?
<p style="text-align: center;">Opportunities</p> <ul style="list-style-type: none"> - What modern technologies can we employ? - Can we grow our business? - What other portions can we test? 	<p style="text-align: center;">Threats</p> <ul style="list-style-type: none"> - What regulations are changing? - What are competitors doing? - How are consumer trends changing?

In each square there is space for each one of the components and the exercise is to answer to various possible questions in each section. In the table there are just some examples that can be applied. In the SWOT analysis it is important to set the objective of the analysis. In this case it can be helpful if we reflect on the possibilities of the house care market. Armed with the ranked list of strengths, weaknesses, opportunities, and threats, it is time to convert the SWOT analysis into a strategic plan.

In this way, the next exercise we suggest is to reflect on the possibilities of the health care market and to design a strategic plan. Below you can find a empty table and brainstorming with your own ideas.

Strengths	Weaknesses
Opportunities	Threats

Overcome these challenges

To address this issue there are several awareness campaigns and ways to motivate them to go back to training or to school. Unfortunately, this campaigns are proven to not be very successful. For example, an evaluation of the campaigns for the Portuguese New Opportuneis Initiative showed that while it raised the general population's awareness of the issue of litaracy, it was less successful in reaching those with low skills themselves.

Solutions to engage low skilled adults

Important

Three key insights from existing practice:

Actively reach out to adults in the places they freqeunt, including workplaces, community institutions and public places;

Identify actos that have established links with adults with low skills;

Build the capacity of these actors to inform adults with low skills and encourage them to take up learning opportunities;

Existing policies

Across OECD countries, this subject is of particular concern and policy makers are determined to find ways to engage more adults with low skills in learning. In the short-term, the economic suffered a big fallout of the pandemic crisis. The labor market is likely to worsen the opportunities for this group.

Incentives for most actors to invest in CET for low skilled adults are limited. The potential returns to this investment for employers are low, since, among others, they do have a demand for low-skilled workers and the economic benefit of training high-skilled adults is significantly higher. For the individuals themselves, there are limited financial returns to be gained from upskilling.

To encourage greater participation in addressing numeracy issues, people need to see a clear value in this or a need for them to do it. Encouraging engagement also needs to focus in each individual's needs and break down some barriers highlighted before, building confidence.

Important

Possible solutions:

Developing initiatives on upskilling adults: These initiatives should provide free or low-cost access to learning opportunities across the territory, following a common approach and quality framework;

Improving the financial incentives: to engage this group a good solution would be to include a financial incentive, it would be more attractive;

Financing outreach activities to activate the target group: engage the group and organising activities outside from their day-to-day routine could also be a good incentive. To go to communities, companies etc;

Following we will give some examples of policies in practice related with the solutions already referred.

1. Support for initiatives to upskill adults

In Austria we have the example of **Austrian Initiative for Adult Education**. This initiative aims to give access to be able to gain basic skills in order to participate in the social, cultural and economic life in Austria. The initiative has two different activities that the participants have to take part

- Basic course of 100 to 400 hours
- Second-chance education course to obtain lower secondary qualifications (*Hauptschulabschluss*).

The initiative already engaged around 50 000 individuals.

2. Financial incentives

As said before, financial incentives are a good bet to improve a number of participation in training adults. There are many programs already being implemented in many countries. Apart from those programs there is still a lack of investment in communication/dissemination plans. Sometimes these funds exist and people can't reach them. Researchers suggest that a 300€ top-up may significantly change participation. There is a need to re-design the financial incentives.

3. Finance outreach activities

Reaching the groups in their daily-life place like workplace, community centers is proved to be a positive way to catch their attention. Some of these approaches are already being pilot in many countries. The contact with trade unions is also positive and brings motivation to the workers.

What has been missing?

As we seen in this unit there are already many activities taken place in adult learning. There are many projects with many years of execution already and many ideas to be implemented yet. In this sense we can see that adult learning is a field that have been getting a lot of attention from policy-makers and leaders.

There are still some gaps that need work on. The engagement of the target group and the scalation of new opportunities is a big step still to be made in the next years.

We talked about the improvements and the next steps to be made in the learning method for adults. There are new plans to be developed and new changes coming out every year, trying to answer to the necessities and the challenges that appear.

As an overall reflection, the developments are positive and we can see a change in the participation of adults in these trainings. The improvements can't stop and there are still a lot of changes that need to be working on.

The question here is what is missing. From what we saw in the unit, a lot of offer of the training are around the same subjects. Mainly soft skills, communication, digital methods among other. The diversity is still lacking in what people are looking for. In this course we are talking about the necessity of geriatric, nursery courses. Sometimes people are looking for them and there are not so many opportunities, and when there are they are centralized in the big urban center.

In this sense, the challenges and improvements that can be made in other courses in the other fields can also be adapt in the home care area.

The main outputs is that we need to design the courses linked to the practical activity. Apart from that, the different and creative methods of learning should be included. Going to the places and get the work done as a more practical course is normally taken with a positive respond. And to finish, make sure the instructors are qualified and deliver quality learning content.



Summary

In this content unit, you learned the basics of the situation of low skilled adults and how to engage them in a training with the possibility to continue to a career. In this unit you were able to identify a low skilled adult and a low qualified adult. Apart from that we were able to identify and understand the major challenges for this group to have access to CET's. With this understanding we selected actions delivered by OECD to overcome these challenges and to reach solutions.

To settled the main concerns in this problem we were able to create a path and seek for possible future solutions. As a practical example, real policies were showed. This unit gives a critical view to what has been done in this field and what is still missing. The training for home care are still rare, in this way we can take the opportunity to learn from other mistakes and try to adapt this changes in this field.

1. 1x1 of Home Care

1.1. Introduction

The topic

Have you ever design a course for adults? Have you ever had the opportunity to teach others what you know?

In this unit we will go over all the basic knowledge you need to know to create a course in home care field. Home care is an intense area and people who are about to start working in this field should know what to expect. We will go over subject like the different conditions we can expect in home care, how should we treat the different conditions. The main tasks we should do, how to behave in a patient's house, among other topics.

The main goal of this unit is to at the end of it we will be able to collect enough information to build a step-by-step guide to new-comers in home care.

We can look to these tasks and responsibilities and we have to ask: how to make a low-skilled adult to perform these activities?

1.2. The general conditions in the field of home care

In this first chapter we will go over in what does a person need to have and to develop along the career to be a perfect home care worker, able to deliver the tasks and to answer to the needs of the patient. We will go over the personal requirements, what you should do, what you should avoid doing, the basic needs and the most common questions to do about the subject.

We have to keep in mind that people who request home care are also opening their doors to a stranger. An important key for a good home care provider is to respect the patient's space. The primary benefit of home care for the elderly is that comes directly to their home. Family members are encouraged to be active participants in the process to help set and meet goals for the recovery and the life of the patient.

Quality management is currently a key element of any organisation, whether in the private or public both in the private and public sector, involving all employees in the organisation regardless of their hierarchical level. In a scenario of growing global competitiveness, rapid technological innovation, process and constant changes in the economic and social panoramas, organisations tend to seek the implementation of to seek the implementation of quality management systems, with the main objective of permanent improvement of the quality of the service provided and the sustainability of the organisation itself. A quality management system creates the right framework for continuous improvement, in order to increase the probability of achieving customer and stakeholder satisfaction It also provides confidence to the organisation and its customers in its ability to deliver.

Definition

If you have the possibility to start a home care career you will encounter new and unfamiliar lingo.

Home care: Home care is skilled care delivered directly to the patient's home. This type of care is provided by licensed medical professional including nurses, therapists, and aides for the purposes of treating or managing an illness, injury, or medical condition.

Patient: a person receiving or registered to receive medical or any kind of treatment.

Care coordinator: assists with home care planning and facilitates communication between home care agencies.

Nursing home: residential facility that provides personal and medical care for people who are unable to care for themselves

Required Qualifications

Are you scared to not be ready for this task? We will let you know how you can provide a basic training for future home care workers.

As we said, home care workers provide in-home support to clients including elderly, or people with disabilities/special needs. There are rules for how to qualify for home care, especially regarding the right training acquired. In order to fulfill this position there are some qualifications to take care of, personal and professional. To become a home care worker you are generally required to complete a qualification in individual support. These qualifications provide a blend of theory and practical work experience. Specific home care agencies may have additional requirements of their own, or even a mandatory training you need to take part in before starting the position. You have to make sure you are familiar with the requirements and make sure you try to incorporate them into the course when designing it.

Some important skills for an employee in home care to have are:

- Emotional Intelligence: to deal with some situations the worker has to make sure to be emotionally stable and capable;
- Community services: being social and good with people is important to make the patient being comfortable around the worker;
- Conceptual thinking: being practical is a strong feature in order to act fast in certain emergencies;
- Creative thinking: being creative to find solutions and problem-solving capacities is really important, especially when you work alone;
- Hygienic: to be able to treat the hygiene from another person the worker has to know how to take care of himself/herself;

In this sense, before a new worker start with this task there is a need to guarantee if these skills are present. This can be done by providing psychological tests and to do a training before the start of the job. Every home care agency has to guarantee that the worker will not leave the elderly when difficult situations appear.

Additional benefits of home health care for seniors include:

- Faster recuperation and recovery from illness or injury
- Improved independence (over time)
- Maintaining or improving of current condition or level of function
- Regaining of self-sufficiency in the home
- Slowing of the decline of serious conditions
- Better symptom management

Pros of Home care:

- Care is delivered directly to the patient's residence (either a home or facility)
- Medical services are provided by skilled professionals
- Home health care staff follow the physician-prescribed plan
- Patients regain independence and self-sufficiency at home
- Care is typically less expensive than hospitalization or a long-term nursing home

Cons of Home care:

- Home care services like cooking and cleaning may not be included
- Patients must meet the "homebound" requirements to qualify for Medicare
- May not be adequate for patients who require 24-hour monitoring
- Can be expensive if not covered by insurance or Medicare
- Number of home health care providers may be limited depending on location

From different opinion, home care staff agree that the career and what they are willing to do changed in the last years. Before it was to provide social care and social context to the patient, apart from personal care. Nowadays, it is a lot more professional and it requires a lot more training beforehand. A lot of the tasks that the home care workers do are related with the tasks from nurses, geriatric, treat wounds etc. This puts a lot of pressure in the company to select the right staff and invest in training, that has huge costs.

1.3. Different condition in home care

As we already said before not all patients need the same level of services from home care. Some patients need deep help to move from their bed to a chair, others just some assistance in their daily-routine, with managing the pills and the meals. For the implementation of a quality service, there is a

list of plans that need to be settled with the patient about its condition and needs. The first step is the admission of the patient, passing to the individual plan.

To identify this help there is a starting point that we can call the individual plan, where the individual's need are evaluated. In this plan the patient's needs are evaluated, with this there is a design of the individual plan for the patient's situation.

In this way, it is possible to identify the areas:

- that require a response/intervention to remedy, compensate or maintain a certain aspect - their needs;
- that may benefit from intervention, in order to develop the client to his client to their fullest potential - their needs

In order to identify needs and potentials, the Model of Quality of Life for the Elderly Population is used as an analysis matrix. Model of Quality of Life for the Elderly Population is used as an analysis matrix. In this way, the comprehensiveness of the diagnosis is guaranteed, from a holistic perspective of the individual. After the assessment and identification of the client's needs, an Individual Plan (IP) is prepared.

The model of Quality of Life for Eldersly people is based in six key areas:

1. **Sensory skills:** refers to the person's state of sensory functioning, also taking into consideration the impact of the loss of sensory skills on the quality of life;
2. **Autonomy:** refers to independence, the ability or freedom to live independently and make decisions. Therefore, besides the collection, analysis and interpretation of information, in order to to lead to conscious decisions, it includes the areas of mobility and performance of daily living activities;
3. **Past, present and future activities:** refers to satisfaction about achievements in life and things to be longed for, this domain refers to the narrative integration of the individual's life cycle, with particular emphasis on the roles and activities performed;
4. **Social participation:** based on participation in daily activities, especially in the community, this domain implies presence in experiential contexts and involvement in roles and activities of the same nature;

After this, based on this plan there is a need to settle the activities that the home care worker should do. This activities will be explained in the next sub-chapter – personal care.

Different behavior in each condition

All of our carers receive thorough theoretical and practical training to equip them with the knowledge and understanding of a number of different health conditions that they may be required to support with.

Many of the patient's a home care worker assists live with difficult conditions to deal with. It can be in an advance stage of dementia, or any other desease that require a certain level of patient and empathy. The employees have to understand and support these conditions. A home care worker have the duty to support them by understanding their routine and ensuring they have appropriately placed visual prompts to help them distinguish the time of day and make sure they feel comfortable and safe.

There are different levels of support that our home carers can assist with, starting with running errands and taking you to appointments, to visits throughout the day and sometimes [overnight](#) if you become anxious or need support turning over in your bed. There should be an extra support from the agency if the worker starts in difficult tasks like in [palliative](#) or [end-of-life care](#). The work developed with the patient should include all the parts, a fluent communication is important for a quality service. The elderly should be able to be in contact with all professionals involved in his/hers care plan and the family, to ensure you feel comfortable and safe at home in your final weeks and days.

There are some of these skills that are impossible to teach about. It is impossible to teach compaccion and empathy, but we can teach people how to be an exceptional home care worker. As well as going through rigorous background checks that includes a Disclosure Barring Service (DBS) screening. As we said before, all home care careers should go through a comprehensive [assessment process](#) before they begin caring with the patients. Training modules include manual handling, dementia, medication, health & safety, first aid and safeguarding.

Some professionals explains that it can be exhausting sometimes when the patients have dementia. They fight against what they should do and they do not wat to be taken care off. Just to have a simple shower is problematic. In this sense, workers say that we should put in the patient's place and think how we would want to be treated.

1.4. Step by step guide of a home care worker routine

The first step to start with home care is for the patient to understand that has a condition that makes it difficult to live their dayle-rotine by himself/herself. From there the patient contact an home care agency or a self-employee to start witht the home care service.

When the services begin the patient/patien's family and the worker will settle together the frequency of their help and how bad is the situation of the elderly. The frequency and type of home visits will vary depending on the patient's needs. Some patient's require daily care while other require only short visits once or twice a week.

Home care is design to answer the patient's needs, to help him recover, receive treatment in the comfort of their own house.

The services a home care worker should provide are:

- Nursering care;
- Medication management;
- Nutrition services;
- Pain management;
- Social work;
- Therapy;
- Hygienic work;
- Emergency situation;

Services provided by home care professionals are tailored to the patient's individual needs. For example it can include vital signs checking, assessing pain, monitoring food intake, mnaging medications, helping with basic hygiene and mainly ensuring safety at home.

A home health nurse provides skilled services in keeping with a physician's plan of care for a home health care patient. These services may include the following:

- Taking the patient's vitals
- Administering pain medication
- Completing medical treatments
- Recording symptoms in a journal

In addition to these simple tasks, a home health nurse helps facilitate communication between the patient's physician and caregivers. Continuity of care is extremely important, and a home health nurse helps keep the lines of communication open, helping teach all involved parties how to properly manage the patient's condition.

As a low-skilled adult they are open to learn and to work.

Here you can check some videos available on YouTube about the different daily-lives of home care workers:

- <https://youtu.be/4C8KRMjhnB8>
- <https://youtu.be/ITv53IhSwKk>

1.5. Summary

In this unit you should be able to differentiate the different tasks a home care worker has ahead. In the first part we define some concepts home care related and we select requirements a home care must know before entering in this career. The training to become a home care worker is very costly to the agencies, to guarantee their employees have all the information they need to feel comfortable to take care of someone who is not able to be independent in their own house.

We also elaborate the pros and cons in taking part in this career. It is important for the workers at the beginning to have a clear view of what they need to develop in themselves to be a capable home care worker.

All this information is clear and organize for the understanding of the home care fields and what should be included in the training for a low-skilled adult.

2. Core competencies for successful home care training

2.1 Introduction

The topic

Have you ever wondered if you were able to do a job position? Do you think you have what is necessary to be a home care worker?

In the previous unit we had a clear basic knowledge of the different fields in home care. In this unit we will have a look on what competencies should be working on in home care. There are some skills

that should be settled and the worker should make himself/herself available to develop. First we will go over the different conditions we can find in home care and how should we treat each situation. Then we will go over to a plan to settle priorities and having in mind the short time of each home care visit. We will guide you in some tools of time management and schemes to set priorities. This tools will be important to use in trainings to be a strong helper in organising the workers time and activities.

2.2 Guide for each condition of adult home care

In home care we will find a lot of patients with different needs and different levels of care. The care can go from tidying the house to help the patient to have a shower and give in food. There are some patients that are still able to be more independent than others. Each patient has their own needs and their own customized plan.

We will have a look to the most common conditions and what are the requirements for each of them.

1. Dementia

Dementia is not a specific disease, it is a term used to describe a set of symptoms. Some of them are memory loss, personality changes, and impaired reasoning. As the symptoms increase it can impact a lot of the abilities in the patient's life, to safely perform activities of daily living. The care workers can help the patient with dementia to live at home as independently as possible. Some of the tasks and responsibilities of maintaining the patient calm and oriented. The patient should feel secure, by having someone who talks with them and manage their behavior. Having a positive interaction it is important for a person with dementia. Some of the qualities that a home care should have in this condition is patient, ability to communicate and to calm a person and, most important to understand signals.

2. Chronic conditions

Chronic diseases are defined broadly as conditions that last 1 year or more and require ongoing medical attention or limit activities of daily living. Some examples of chronic diseases are heart diseases, cancer, diabetes etc. In this situation we have to show compassion and empathy to the patient's condition. For each condition the worker should do their own research about the patient's condition, show interest and support the patient's journey.

3. Recovery after a hospital stay, illness, or injury

Sometimes after an hospital stay patients need an extra care at home. Patients who need continued after hospital stay need someone who take care of them with nursing skills, therapy services and can provide a continuous care to their recovery. As home workers you have to keep them comfortable and be aware of any change in their recovery. It is also important to research about their condition and about the evolution of the recovery. Some patients after leaving the hospital for several months are diagnosed with post-hospital syndrome. This syndrome brings an extra vulnerability to the person. To recover from this time there is a need to keep things moving, try to get the patient to spend time out of bed, sitting upright in a chair, watching TV. It is also important to stick to a routine and to have little

tasks everyday, to have a sense of accomplishment and challenge. We have to show discipline and awareness to the patient's condition as well as, good adaptation to any change in the process.

4. Stroke

A stroke is a serious life-threatening medical condition that happens when the blood supply to part of the brain is cut off. Strokes are medical emergencies and urgent treatment is essential. The way to treat a person after a stroke depends on the type of stroke the person has, including which part of the brain was affected and what caused it. People who survive a stroke are often left with long-term problems. Some people need a long term period of rehabilitation before they can become independent again. If the mobility was affected motor-skill exercises are important to do everyday. Rehab exercises are essential to any recovery and keep a positive mind around the patient. The patient has to be eager to be independent again and get through the recovery as fast as possible. Being able to cheer up and communicate with him/her is an important task.

5. Difficulties in mobility

Mobility problems mean that a person is having difficulty walking and moving as they normally would. This can have a big impact on a person's independence at any age. To help patients in this condition we should do different tasks like keep the house organized and adapt it for their accessibility. Encourage the patient to recover to prevent further loss of mobility. Apart from this it is also important to help in the exercise routine. Normally these people have recommended exercises to keep the body moving. A lot of communication with family about these exercises and entertain the patient to keep the spark in life.

As we see all these conditions require the same skills and personal features in the home worker. It is important to train the empathy, patience and mental strength to deal with these situations and many others that will appear in the life of home care worker. To train and to encourage low-skilled adults in starting this career the best way apart from a direct entry in the job market, it is to contact them with the patients. A practical training is what gives them access to the tasks they will do in the future and gives the security that they are ready to take this challenge.

2.3 Priorities and skills to develop in home care

Sometimes in home care we have too much to do in such a little time in each visit. The visit plan is set at the beginning of the process with the patient. It can change with time with the development of the patient.

Know how to set priorities and to organize our time is a skill that is useful for different tasks in our daily routine. In every job we have to be organized and collaborate with priorities settled. People often read articles and methods of how to set priorities but then they do not adapt them to their life. We need to know how to clarify our goals, and to create a prioritized to-do list. There is also a lack of practical knowledge and efficient methods to create an action plan. This chapter is not only useful for when a home worker is in the patient's house but also in creating the care plan previously.

Definition

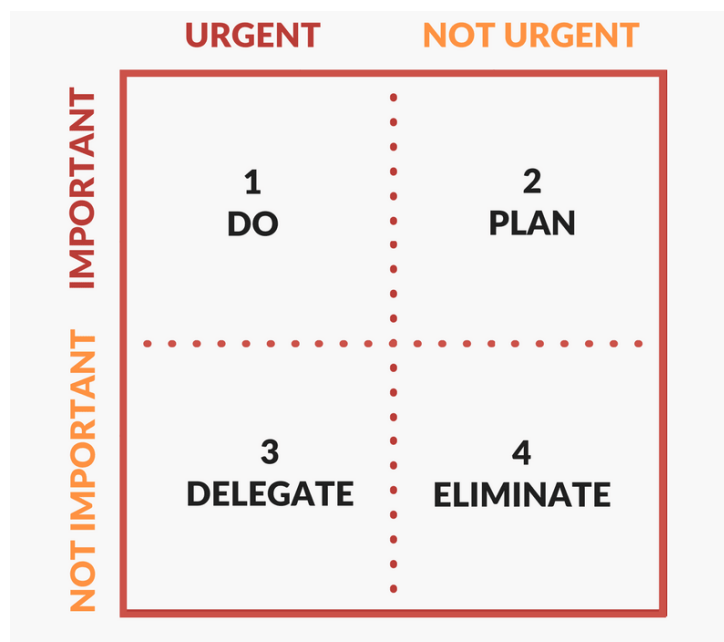
Priority: something that is more important than other things and that need to be done or dealt with first;

Time management: the process of planning and exercising conscious control of time spent on specific activities, especially to increase effectiveness, efficiency and productivity;

Priorities can serve a significant purpose in our lives. Prioritizing helps keep things organized and being able to do more things in less time. This is essential in a life of home care worker. From giving food in the right hours to keep track of the medicine, everything has to be done in the right timing.

The key to sorting out our priorities is figuring how to prioritize in the first place. Having priorities that we are more able to accomplish and stick to it will lead to more success overall.

In here we have a scheme that can help us to understand what should be in the top of the list.



- 1. Create a list:** composing a list of priorities helps to keep things in perspective. The list can be the traditional pen and paper but it can also be digital, there are several good tools available in our phones: notes, notion, tasks, bullet journal, calendar, microsoft lists. The list should show a routine and be consistent. Sometimes it also helps to have different color for each topic. For example for each patient you could have a different color.
- 2. Determine necessary over non-necessary tasks:** Distinguish between necessary and non-necessary tasks can be tricky. We have to consider the weight of all the options. An easy way to detect the more urgents is to understand the deadlines or to see if without one options can I do the others. The most urgent and important tasks should be at the top of the list, you can also color the more urgent or put a mark to highlight it.

3. **Don't overwhelm yourself:** Keeping the list realistic to the time you have it is also really important to keep in mind. The list shouldn't be overly long. A longer list may imply a more demanding process of prioritization. Part of being honest about the list is to consider tasks you know you can complete. It can be helpful to put time slots for each task.
4. **Tackle the hardest task first:** when deciding how to make the list or figure out where to start on priorities, tackling the hardest task is always best. Usually, this task will be something that takes an extended period of time to complete. Getting started in this task will relieve the rest of the day and it will give an extra boost of motivation for the rest of the day, a feeling of accomplishment.

Priorities are something we all need to handle in our daily life, in work or personal. This is a process and while the time passes it will become more and more instinctive to know the top-list tasks.

Also regarding this topic, time management is also really important for a home care worker. The visits have a time counting and a lot of things to do. Knowing how to divide the lists in time slots and how much time to dedicate in each task is really important. Time management is also a process and the more you repeat the tasks the less time you will take in each one. For the first visit everything is experimental.

A good time management enables you to work smarter – not harder – so you can do more in less time, even when the time is tight and pressures are high. This requires a lot of focus in order to get the work done. One of the biggest advantages of time management is that it allows us to be more efficient by being in control of how we spend our time.

In this way we can select 5 time management strategies:

1. Be intentional: keep to-do lists in order to keep track of what you must do and can't fail;
2. Be prioritized: as we said before ranking your tasking is also a life-changing in a life of home workers – put the urgent tasks on top of the list;
3. Be focused: manage distraction and be ambitious for your work time be all about work – keep the phone away from you;
4. Be structured: time block your work;
5. Be self-aware: track your time;

What are the 4 D's of time management?

The 4D's of productivity is a popular strategy for discerning whether or not a task is worth your time. The purpose is similar to the previous table of important/unimportant tasks. It involves making a quick decision about what to act on now either by doing it yourself or what to drop it from your to-do list.

The 4D's are: Do, Defer (Delay), Delegate and Delete. Placing a task into one of these categories helps you manage your limited time more effectively stay focus on urgent tasks.

To get started with this strategy, look at your to-do list at the beginning of a week or a day and assess which tasks can be done quickly, by someone else on your team, which ones to drop altogether and which essential tasks to defer now.

In home care the space to delegate to someone else is probably not possible, just if you work in team and if it is a subject that is not required in your job description.

The 4 Ds of Time Management

Category	Action	Examples
Do	Work on tasks that only take a few minutes to complete. Quickly accomplishing a series of smaller tasks builds momentum for working on larger projects.	<ul style="list-style-type: none"> • Answering an email • Returning a phone call • Printing a report
Defer (Delay)	Temporarily pause a task that doesn't need to be handled right away, and schedule when you have the availability.	<ul style="list-style-type: none"> • New request from a colleague • New project idea
Delegate	Reassign an essential task to someone else.	<ul style="list-style-type: none"> • Weigh tasks that benefit from your specific expertise vs. those tasks that deliver the same outcome regardless of who is doing it
Delete (Drop)	Remove unnecessary tasks from your schedule and move on.	<ul style="list-style-type: none"> • Unproductive meetings • Unnecessary email

 ProductPlan

Time management tools

As previously said, time management and having a settled plan makes the tasks simpler to organize and facilitates the home care worker in the patient's house. If someone is constantly juggling between tasks and deadlines there is a high chance that there is an extra help needed.

In this sub-chapter we provide the best time management digital tools that are easy and simple to use in a smartphone or a computer.

1. Scoro or Google Calendar

Scoro and **Google Calendar** are pretty similar. It works as a digital agenda efficient to time management, including time tracking, work reporting. It sends you reminder of tasks and Scoro even emails invoices to clients based on the hours you worked;

Link: <https://www.scoro.com/time-management-software/>

2. ActiveCollab

ActiveCollab is a more specific tools for temas. Combines time billing with project managements, makint it easier to track projects. It features for team collaboration. Sometimes it can be beneficial when you knwo where your coworkers are at that time or with who are you working in each shift. It able to create tasks for other workers and set deadlines. People can also comment in tasks and mentioning colleagues.

Link: <https://www.activecollab.com/>

3. Harvest

Harvest is one of the best-known time and billing tools on the market. It makes it easy to track time on each task and bill the clients accordingly. This tools can also be helpful for the home care agencies to keep track on the hours of work of their employees. It generates automatically invoices based on the time worked. The employees can also share real-time reports on time spent

Link: <https://www.getharvest.com/>

4. Trello

Trello is known for its good visuales. It shows every current task on a cardboard-like dashboard and makes it easier to manage short and quick everyday assignment. It has a simple and instictive use for new users.

Link: <https://trello.com/>

These four tools are just a small exmaple of what the digital world can provide us in making our daily-tasks simpler. It is important to emphasized that nowadays, more and more hame care agencies use this digital tools to keep track of the employees tasks and to keep t simple in the division of the schedules and clients. This also requires an extra training to use the tools that are choose. It is important that the employess know how to work with them, in order to be a facilitating tools and not to make their lives more difficult.

2.4 Summary

In this last unit we went over to the main conditions we can find in a patient and the most important skills to develop. We conclude that there are some feature that are vital for a home cre worker to adapt with time. Patient, responsability, empathy are just some of them. We agreed that

for some people it is easier to develop them than others. But with the time passing it becomes intrinsic in a worker that is in contact with patients with difficult conditions.

After that we design the most common training a home care worker needs to have or keep in mind. These trainings are provided by the agencies and are responsible to provide these knowledges to the new employer.

Also in this unit, we provided different strategies to become better at time management and prioritizing tasks. This is an everyday struggle in a home care worker life. There are a lot of tasks to do in little time. In this way there are different strategies and tools to facilitate this step. The necessity of creating a set of priorities for our tasks increase the focusing in each task and the dedication. In this way we are not wondering if we will miss anything because we have an organized plan that covers all we need to do in that time.

„What is important is seldom urgent and what is urgent is seldom important“

Dwight D. Eisenhower

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Module 4 – Questionnaire

Which statements are true, which are false?

	true	false
Home care is however hires someone to take care of their home	<input type="checkbox"/>	<input type="checkbox"/>
To take care of someone I don't need to have any prior training	<input type="checkbox"/>	<input type="checkbox"/>
There are different types of adult care	<input type="checkbox"/>	<input type="checkbox"/>
As a low skilled adult it is easier to start as a self-employer	<input type="checkbox"/>	<input type="checkbox"/>
It is important to have a good team work behind the first experience as a home care worker	<input type="checkbox"/>	<input type="checkbox"/>
Home care sector has tendency to disappear	<input type="checkbox"/>	<input type="checkbox"/>
As a home care worker I don't need to clean the patient's house	<input type="checkbox"/>	<input type="checkbox"/>
Patient, courage and responsibility are three important characteristics to have in this job	<input type="checkbox"/>	<input type="checkbox"/>
Is geriatric care training an essential to take care of someone	<input type="checkbox"/>	<input type="checkbox"/>
Nursery is a strong training needed for home care	<input type="checkbox"/>	<input type="checkbox"/>
In home care I just have to take care of elderly	<input type="checkbox"/>	<input type="checkbox"/>
I can work as a self-employer in home care	<input type="checkbox"/>	<input type="checkbox"/>
I have to set priorities to organize the tasks to do	<input type="checkbox"/>	<input type="checkbox"/>
Cleaning dishes and the toilet can be tasks included in my job	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility and being able to adapt is essential in this field	<input type="checkbox"/>	<input type="checkbox"/>



The family is able to call you whenever they want, and you have the responsibility to answer.

Communicating with the patient's family is an important task

There are different tasks that must be done. Keeping track of the patient's behavior is one of them.

As a home care worker, you will face different tasks everyday

Home care workers have to be able to prioritize their mental health to take care of a third person

Module 5 - Developing skills for self-employment - Unit

3.6 Successfully into self-employment	
Main contents	In this module, learners will learn the basics of self-employment and starting a business in general, as well as the basics of self-employment in home care. Furthermore, basic knowledge and tips and tricks in the areas of accounting, cost accounting, marketing and organizational skills are taught.
A short description of the objectives to be reached	<p>In this module learners will learn the following:</p> <p><u>Unit 1</u></p> <p>You can explain the term entrepreneurship.</p> <p>You know what a person should bring to start a business.</p> <p>You know some of the basic legal requirements for incorporation and where to go for information about the requirements that apply to you.</p> <p>You know the pros and cons of being an entrepreneur.</p> <p>You know which insurances, taxes and contributions may be due for self-employed entrepreneurs.</p> <p>You know what a business plan is and why it should be written.</p> <p>You know the components of a business plan.</p> <p><u>Unit 2</u></p> <p>You know the personal requirements to be a self-employed caregiver in home care.</p> <p>You know the professional qualifications needed in addition to the nursing-related qualifications to be self-employed.</p> <p>You know what steps are gone through on the way to independence.</p> <p><u>Unit 3</u></p> <p>You know the main goal of accounting.</p> <p>You can explain a simple income-expense statement using an example.</p> <p>You know the tasks of cost accounting.</p>

	<p>You can define the term "cost".</p> <p>You know the different types of costs.</p> <p>You can define marketing and explain the main goal in marketing.</p> <p>You can define the term marketing mix and name the 4P's.</p> <p>You can define the terms product and assortment policy using an example.</p> <p>They know which factors to include in the price calculation.</p> <p>You can define the terms distribution and distribution policy.</p> <p>You can define the term communication policy.</p> <p>You can enumerate the measures of communication policy.</p> <p>You will be able to explain the stages of the sales conversation using an example.</p> <p>They know what time management is and know the basics of goal-oriented time management.</p> <p>You know two tools of time management, the ABC analysis, and the Eisenhower principle.</p> <p>You know the basics of scheduling and what fixed or flexible dates are. You know the tools of efficient scheduling</p> <p>You can explain the term documents.</p> <p>Know filing types and record keeping options.</p>
	3.7 Unit 1
Topic	The little 1x1 of starting a business and self-employment
Aims	Upon completion of the unit, participants will have built basic knowledge of professional self-employment, know the advantages and disadvantages of self-employment, know about the responsibilities of entrepreneurship, and know the components of a business plan.
The main activities – program flow process, its stages, description of activities, tasks;	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer using a presentation.</p> <p><u>2. Practice questions:</u></p> <p>After completing the unit, learners can answer the practice questions.</p>

	Unit 2
Topic	Self-employment in the field of home care
Aims	Upon completion of the unit, learners will know about the specifics of becoming self-employed in the home care field and will be aware of the steps involved in becoming self-employed.
The main activities – program flow process, its stages, description of activities, tasks	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer using a presentation.</p> <p><u>2. Practice questions:</u></p> <p>After completing the unit, learners can answer the practice questions.</p>
	3.8Unit 3
Topic	Core competencies for successful self-employment
Aims	Upon completion of the unit, learners will know the basics of simple income and expense accounting, cost accounting, and marketing. Learners will also know about efficient time management, scheduling, and well-organized document management and filing.
The main activities – program flow process, its stages, description of activities, tasks;	<p><u>1. Completing the content unit:</u></p> <p>Learners can read through the content unit on their own. In a supervised setting, the content can be presented beforehand by a lecturer.</p> <p><u>2. Practice questions:</u></p> <p>After completing the unit, learners can answer the practice questions.</p>

Duration of the module	6 hours
Learner requirements	<ol style="list-style-type: none"> 1. KNOWLEDGE – Basic knowledge of everyday life. 2. SKILLS – The ability to learn and read with understanding. 3. SOCIAL COMPETENCES – Providing and receiving feedback, as well as demonstrating the readiness to accumulate practical experience. 4. PREDISPOSITIONS – empathy, patience, communication skills, adaptability, respect for people, caring for patients’ health and appearance, lack of prejudice, mental resilience, physical prowess.
Learning outcomes to be reached after completion	Upon completion of the module, learners should have achieved all learning objectives and be able to answer the questions from the questionnaire.
Resources required	<p>Self-learning: computer/laptop/tablet</p> <p>Optional – printer, if printed version is needed</p> <p>Classroom Learning: Computer/laptop Projector</p>
Learning methodologies used	<ul style="list-style-type: none"> - Lecture - Questionnaire
Assessment methods	<ul style="list-style-type: none"> - Pre-Test - Post-Test
References	<p>Literature:</p> <p>Maturawissen Rechnungswesen, Haberl; Mayr; Bauer; Veidl; Nitschinger; Pack; Hölzel Verlag</p> <p>Maturawissen Betriebswirtschaft, Nitschinger Hannes, Hölzel Verlag</p> <p>Praxisblicke – Betriebswirtschaft I-V, Najand-Ellmer; Austerhuber; Dauterive; Hasiweder; Jarosch-Frötscher; Krumhuber; Maier; Neuböck; Plienegger;</p>

Rammer; Schaur; Schlager-Hahn; Schörghuber; Springsits; Strunz-Maireder; u.a., Trauner Verlag

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Organisation und Management, Pecher; Streif; Tyszak; Vierlinger; Winkler; Trauner Verlag

Büroprozesse; Pecher; Streif; Tyszak; Verlinger; Winkler, Trauner Verlag

Netzwerk kompakt - Organisation und Management, Schlosser; Tonninger; Kaiser-Mühlecker, hpt Verlag

Netzwerk – Angewandte Wirtschaftslehre, Büroprozesse und Betriebswirtschaftliches Projektpraktikum für Bürokaufleute, Hacker; Kahn; Reisinger; Simböck; Unterholzer; Unterholzer-Kiedl, Band 1 & 2, hpt Verlag

Buchführung aktuell Büro- und Industriekaufleute, Pertl; Kugler; Schlosser, Band 1 & 2, htp Verlag

Das Büro heute - Wirtschaftskunde mit Schriftverkehr, Eisl, Hacker, Kahn, Kusché, Band 2, htp Verlag

Der Handel aktuell – Rechnungswesen, Bartz, Kramer, Pertl, Tonninger, htp Verlag

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Module 5 - Developing skills for self-employment – Description

Intruduction

4. The little 1x1 of starting a business and self-employment

The topic

4.1 Introduction

Have you ever had the feeling that a certain product is simply missing on the market? Or have you wondered why a certain service is not offered in your area?

Most people have had an excellent business idea at one time or another! There is a potential entrepreneur in every one of us. The road from an idea to a viable concept and implementation in your own business is long and rocky.

If the business idea is interesting and feasible, various things, such as the legal framework, need to be clarified and initial calculations should show whether the realization of the business start-up is financially feasible or whether one will be able to live from self-employment.

In this content unit, you will learn the basics of self-employment and also learn about the advantages and disadvantages of entrepreneurship compared to being employed.

4.2 The basics of self-employment

Regardless of the field in which someone wants to become self-employed, setting up a business needs to be well prepared. Only then do entrepreneurial personalities have a chance of success.

In practice, you may have heard the term "entrepreneur" in connection with start-up and self-employment. You are probably asking yourself what this acutally means?

Definition

Entrepreneurship actually means nothing other than company management, the entrepreneur is a business person. What is much more important is what is meant by this term in practice.

Entrepreneurship describes an entrepreneurial spirit.

The entrepreneur is ascribed qualities such as a need for achievement, innovative spirit, organizational talent and a willingness to take risks.

But what do you need to become successfully self-employed? What does an entrepreneur need and what personal requirements should be met?

Well - let's try to answer these questions.

Personal requirements

Let's start with the personal requirements. To get off to a successful start, you need three basic ingredients - similar to a cooking recipe:

1. A good idea
2. Professional and personal qualifications
3. Founding intention

These 3 points are the key to success.

A sparkling business idea is usually the starting point for founding a company.

However, it is rarely an absolute world novelty with which a founder takes off. In many cases, the idea is to improve tried-and-tested business models, pick up outsourced tasks, take over an existing company, or simply offer a service in a place where it was not previously available. It is difficult to predict whether the idea will be successful. However, a lot of personal and often also financial commitment is necessary for a start-up. Therefore, the business idea should be well thought out. The following pointers will help:

- **Customer benefits:** The clientele has benefits from buying their product or service. For example, something is faster, easier, less expensive, or more reliable.
- **USP:** The service or product clearly stands out from the competition. This is called a "unique selling proposition" (USP). The clientele should therefore be able to recognize the advantage of your idea.
- **Clarity:** The business idea must be clear and well thought out. It is usually better to focus on a few things and then build up than to pursue too many good ideas and get lost in the details.
- **Profitability:** Very important - self-employment must be able to finance a living. Therefore, the question is whether there is enough clientele for the product or service and whether this clientele is willing to pay a reasonable price.
- **Feasibility:** The best idea is just smoke and mirrors as long as it cannot be realized. A great concept for an event restaurant without the right location is just as useless as a plan for a car repair shop without start-up capital. Therefore, feasibility must be checked and, if necessary, appropriate partners such as banks, other companies or investors must be found.

The professional and personal qualification must also be given. In the process, the entrepreneur should deal with the following things:

- **Expertise:** Is the expertise available? Has one learned a profession in this area or has sufficient practice? Do you know the industry and do you have at least a basic commercial knowledge? The links to the legal requirements are also particularly important here and must not be neglected under any circumstances.
- **Personality:** An entrepreneurial personality has a certain profile, such as a willingness to take risks and apply oneself, the ability to motivate, the ability to make contacts and enjoy thinking and creating independently. People who appreciate a regular daily routine and like to fulfill precisely defined tasks are more suitable for an employment relationship.
- **Environment:** This point should not be underestimated - support from the personal environment is very important, especially in the early days. Therefore, ask yourself whether family and friends support the decision to start up and whether the timing of the start-up is suitable for personal life planning.

Legal requirements

But not only the personal requirements are important. There are also legal requirements for setting up a business or for self-employment. These legal requirements clearly differ from country to country and are sometimes subject to constant change. The desired activity, the industry and the desired legal form of the newly founded company also require different legal requirements.

Important

No matter in which country or in which industry someone would like to become self-employed, it is always advisable to contact the chamber of commerce and clarify whether one actually fulfills all the requirements for setting up a business.

At these information centers, founders also receive numerous tips and information to help them find their way through the start-up jungle.

Here we list just a few of the possible requirements that must be met in various countries to start a business and become self-employed:

- **Capacity to act:** In many countries, capacity to act goes hand in hand with age. Persons who have reached the age of majority are generally considered to have the capacity to act. If persons are subject to a guardian, they cannot act independently without further assistance.
- **Citizenship:** Many countries require citizenship of one's own country, or of another specific country, such as an EU country or a state party to the EEA. A valid residence permit may also be sufficient.
- **Residence in the country or in a country where service and enforcement of administrative penalties are ensured.** This point is about legal certainty. If an entrepreneur is not available, no business can be conducted.

- No reasons for exclusion: If, for example, there are criminal court convictions, financial offenses with a high fine, a rejected bankruptcy or a withdrawal of business licenses that has already taken place, a business start-up can be excluded.
- Certificates of competence: For some industries and fields of activity, certificates of competence are required to show that the founder also has the necessary professional qualifications for self-employment.
- Depending on the area in which a self-employed activity is to be carried out, it may also be necessary to obtain a trade license in order to actually be able to carry out the activity.
- Insurances: Self-employment in certain industries and fields often requires insurance, such as liability insurance.

As already mentioned, this list is not exhaustive and it is essential to deal intensively with the legal requirements before starting a business. Founders can get help either from the responsible chamber of commerce or from special institutions that support founders on their way to self-employment.

The following websites will help with initial orientation:

Austria	https://www.gruenderservice.at/
Portugal	https://eportugal.gov.pt/en/inicio/espaco-empresa/guia-a-a-z
Poland	https://www.biznes.gov.pl/en/firma/doing-business-in-poland
Turkey	https://www.kosgeb.gov.tr/

4.3 Advantages and disadvantages of entrepreneurship

A clear will to set up a business is a prerequisite for getting started. But future entrepreneurs must also be aware of what a step into self-employment actually means. Being self-employed has both advantages and disadvantages - a good decision requires an examination of these.

Advantages of self-employment

Advantages of self-employment include:

- Ideas can be realized
- Working hours can be chosen by yourself
- Working environment can be chosen by yourself
- in case of success and good earnings, this remains with the entrepreneur herself/himself

Disadvantages of self-employment

Disadvantages, on the other hand, are:

- Uncertainty
- High time expenditure for administrative and organizational things
- Liability with private assets
- the burden of much responsibility

4.3 The duties of entrepreneurship - insurances, contributions, taxes and duties.

After starting their own business, self-employed entrepreneurs have a number of things to consider that one would not actually pay attention to in the case of normal employment. Four things whose importance and impact on the company's success are often underestimated, since they do have a considerable financial impact, are the insurances, various contributions, taxes and various duties that one has to pay as an independent entrepreneur.

Here, too, there are differences depending on the country in which a company is founded.

- **Insurances**
Whether health insurance, retirement insurance, accident insurance or liability insurance - if you are not employed by a company, but are self-employed as an entrepreneur, you have to take care of the various insurances you need personally or for your company. Many insurances are compulsory by law and must therefore be taken into account in the financial planning.
- **Contributions and duties**
In many countries, contributions must also be paid to various institutions, such as the Chamber of Commerce or the Chamber of Industry and Commerce. If membership of a chamber is an obligation, the costs for this must definitely be taken into account in the financial plan.
- **Taxes**
Entrepreneurs have to deal with many different taxes in the course of everyday business. In addition to sales tax and input tax, which are due on the purchase and sale of products and services, self-employed entrepreneurs also have to pay income tax or corporate income tax, depending on the type of business.

Important

It is not uncommon for entrepreneurs to fail because they have not sufficiently included the costs of insurance, contributions or taxes in the prices of services or products, or have not taken them into account at all in the financial plan. In order not to experience any surprises in this area, it is worthwhile to contact a consulting office, the chamber of commerce or industry, or a tax advisor.

4.4 The Business Plan - The Basis for a Successful Launch

Almost all founders and foundresses or people who have once toyed with the idea of self-employment know the following situation:

Many good ideas accumulate. Some things are thought of further, others are discarded. Then suddenly you have THE idea par excellence and you are convinced of it – you are sure that you won't forget it!

Some time later, you might be asked about it or want to finish the idea and then it happened . . . how exactly had one imagined it?

You can't remember some details very well and at the latest when a conversation with potential customers or investors is about to start, it can become embarrassing.

Keeping an entire business concept in mind and being able to call it up at any time is almost impossible. Firstly, because it is very extensive and secondly, because it changes very often, especially in the initial phase! Writing a business plan helps to deal with all relevant points in detail and is highly recommended for every business start-up!

Definition

A business plan is a written business concept.

In it, a business idea is described and all measures are presented that serve to realize this idea.

A business plan is especially important when starting a business.

However, it also serves existing companies to keep developing and to look at how the plans could be realized so far.

A business plan is therefore used to record the ideas and develop them further.

The business concept also helps to deal precisely with all relevant points. In written form, entrepreneurs cannot easily get past difficult points. A discussion of the strengths and weaknesses of the company is virtually forced.

So for whom is the business plan important?

A business plan is not only important for the entrepreneur himself or herself, but is also important for a number of other people who are on the path to self-employment. Thus, it can be stated that a business plan is important for the following groups of people and institutions:

- First and foremost for the entrepreneur himself or herself.
- Banks always require a business plan for business loans. The better the plan, the easier it is to obtain a loan.
- Funding institutions also want to see a business plan for grants.

- Potential investors are also more likely to agree to an investment if the business plan is coherent.

But should founders really share every idea and piece of information with people outside the company?

Of course not. Business plans are usually "adapted" accordingly for different addressees. In a plan for a bank meeting, for example, the focus is more on the calculation.

This approach is quite common and also legitimate - as long as one generally sticks to the truth.

What exactly is in a business plan?

There are no precise formal requirements for this. A business plan can be as individual as the founder himself or herself. Nevertheless, some points should be included in any case:

- Executive summary

It contains a brief overview of the company and its objectives. The interest of readers of the business plan must be aroused. For many people, this short introduction is the most difficult part of the business plan - and is often written at the end.

- Product or service

The core of the company - i.e. the product or service - is described. The strengths and weaknesses of the offer are worked out in detail. It is particularly important to look at the customer benefits and the unique selling proposition. Why should consumers buy this particular product or service?

- Company organization

Who belongs to the team, what experience and knowledge do these people have and who is responsible for what? This point is about the legal form, ownership, the distribution of tasks within the organization and the location.

- Targets

Where should the company or the entrepreneur be in a few years and how can this goal be achieved? This section of the business plan includes both short-term achievable goals and long-term visions. A comparison of this objective with the reality in a few years is then particularly interesting.

- Marketing and sales

This point in the business plan is usually extensive. It includes a detailed description of the products and services offered, pricing, marketing measures and distribution channels. Often there is a lack of money for expensive advertising measures in the first step of the foundation. Here, founders have to compensate for the lack of capital with creativity.

- **Timing**
Which steps are planned and when? Are there events of particular importance (so-called milestones)? A realistic schedule is also important for planning finances.
- **Financial planning**
This point is about the capital requirements, the financing, the running costs of the company and, above all, the planned turnover. Here in particular, things can sometimes develop differently than planned. Therefore, it is best to calculate with a certain reserve.

That all sounds very extensive and complicated? Don't worry - there is plenty of help for creating business plans! Founders and foundresses can get support from numerous institutions and programs in creating a business plan.

4.5 Summary

In this content unit, you learned the basics of self-employment.

Self-employed entrepreneurs must meet a number of personal and professional requirements in order to be successful. In addition to a bright idea and the will to start up a business, professional competence and certain personality traits such as a willingness to take risks are particularly important.

The various insurances, contributions and taxes represent a major financial burden for the self-employed. These burdens must be taken into account in the financial plan to a sufficient extent in order to avoid unpleasant surprises.

The business plan is one of the most important planning tools and highly recommended for all entrepreneurs. The written discussion of the product or service, the goals, the finances and the organization helps to put the company on a solid foundation. A well thought-out business plan is also important for banks, investors or funding bodies.

5. Self-employment in the field of home care

5.1 Introduction

The topic

In the first content unit you have learned the basics of self-employment. You already know which basic personal and legal requirements have to be met in order to start a business and embark on the path to self-employment. In this Content Unit, we will look at the topic of self-employment in a specific industry - namely, home care.

In this content unit you will learn which special aspects have to be considered if someone wants to become self-employed in the field of home care. A special focus will be placed on self-employment in this field in Austria, Portugal, Poland and Turkey.

Finally, you'll find a step-by-step guide for aspiring independent home care entrepreneurs.

5.2 The general conditions for self-employment in the field of home care

If someone wants to become self-employed in the field of home care, the prospective self-employed person should, of course, deal intensively with the points already mentioned in the previous content unit.

Personal requirements

Let's start with the personal requirements. Assuming the idea and the will to found a company is available, in a sensitive area such as care, it is above all the personal and professional qualifications that determine whether a self-employed activity can be pursued.

Personal qualifications

As already mentioned in the first unit, self-employed persons are characterized by their willingness to take risks and to work hard, their ability to motivate, their ability to make contacts, their entrepreneurial thinking and their pleasure in thinking and creating independently.

When it comes to self-employment in the field of home care, of course, the personal qualities that are generally needed to work in this field are also of extraordinary importance. At this point, qualities such as empathy, communication skills, the ability to make decisions, mental and physical endurance and resilience can be mentioned.

When it comes to self-employment in home care, skills such as organizational ability and assertiveness are also extremely important.

Professional qualifications

In addition to personal qualifications, professional qualifications are, of course, essential to becoming self-employed in home care.

Here it is clear that on the one hand the professional qualifications for the care activities themselves are needed (which in turn depend on which activities are carried out), but on the other hand of course also the professional qualifications for the independence itself.

At this point, basic business knowledge in the areas of accounting, cost accounting and marketing can be mentioned. Particularly if a prospective entrepreneur has no or insufficient knowledge of business management, he or she can make sense to outsource these areas and seek help from an accountant or tax consultant. You can find more in-depth information on accounting, cost accounting and marketing in the following content unit.

Legal requirements

In the first content unit you have already been introduced to a few basic legal requirements. These are - as already mentioned - always dependent on the country and the industry in which someone wants to start a business or wants to be self-employed.

In order to illustrate that it is really important to inform yourself about the legal situation in advance, we will take a detailed look at the legal situation for self-employment in the care sector in Austria. Afterwards, you will also get a brief overview of the possibilities of self-employment in the care sector in Poland, Portugal or Turkey.

Legal requirements for self-employment in the care sector in Austria

Imagine you live in Austria, have completed training as a nursing specialist assistant, have already been working successfully as such for 15 years at a nursing organization and have now decided to realize your dream and become self-employed. At first glance, it seems that nothing will stand in your way. After all, you have the will to found a company, the necessary motivation and, above all, the necessary professional qualifications. But unfortunately we have to disappoint you at this point - it is not that simple.

In Austria, the possibilities to become self-employed in the nursing sector are very limited. In the higher service, certified nurses can work as such on a freelance basis. Employees in the fields of nursing specialist assistance and nursing assistance cannot become self-employed as nursing (specialist) assistants per se. If someone with training in this field wants to work independently, this is only possible via the free trade "personal care". In this case, however, the person is then also active as a personal care worker and not as a nursing (specialist) assistant. In the field of home help, personal care or 24-hour care, it is also possible to work as a freelancer via the free trade "personal care". As you can see, there are actually different job descriptions behind the same designation, which also require different qualifications in case of an employment relationship.

So, if you do not have any training in the field of certified health care and nursing, the free trade "personal care" is the basis for self-employment in home care and nursing. Let us now take a closer look at this.

The following special legal requirements apply to the registration of a free trade in Austria:

- Completion of the 18th year of life
- Full capacity to act

- Citizenship of an EU/EEA member state/Switzerland or existence of a residence title under alien's law (right of residence) for exercising the trade

- absence of reasons for exclusion (various previous convictions)

For nationals from EU/EEA member states or Switzerland who are only temporarily active in Austria, it is sufficient to present the authorization to carry out these activities independently in the home country (EU/EEA member states or Switzerland). In this case, a notification must also be made to the Federal Ministry for Digitalization and Economic Location and an entry in the service register is also

compulsory prior to commencing the activity. This must be renewed annually. If the stay in Austria is longer than 3 months, a separate free trade "personal care" must be registered in any case. Third-country nationals who want to pursue self-employment in Austria for more than 6 months need a residence title according to the Settlement and Residence Act, which covers the pursuit of self-employment. If the activity is pursued for less than 6 months, a residence travel visa must be applied for.

If a trade is registered in Austria, there is compulsory insurance for health, retirement, accident and unemployment. Likewise, there is a mandatory notification of the commercial activity to the competent tax office and, if necessary, also a notification and payment of income tax and / or VAT.

For self-employed personal care workers, there are a number of other obligations and requirements that exist after the registration of the trade and regulate the daily work of personal care workers. For example, there is an obligation to draw up a guideline for action, which regulates the daily routine with the person being cared for and the procedure to be followed in the event of an emergency.

The permitted areas of activity and tasks are also clearly defined and regulated for personal care. Care in the sense of the free trade of personal care includes household-related services (e.g. cooking and cleaning), assistance in living (organizing the daily routine) and a shareholder function (providing companionship). Certain activities from the medical care sector (e.g. applying bandages, administering medicines) may only be carried out on the basis of an appropriate order by a doctor or nurse. If these activities are not instructed by persons authorized to do so, they may not be performed by personal care workers.

- Detailed information on the freelance business "personal care", as well as further information on contract design, the daily work in personal care, tax aspects, rights, obligations, etc. can be found at:
- https://www.wko.at/service/wirtschaftsrecht-gewerberecht/Leitfaden_Personenbetreuer.html?_gl=1*165nplo*_ga*MTI3NjM1NjlyNy4xNjIwOTg1NTYz*_ga_4YHGVSNS4*MTYyMDk4NTU2Mi4xLjEuMTYyMDk4NTY0My41OQ..&_ga=2.91836569.2097043667.1620985563-1276356227.1620985563

Important

As you can see, it is unfortunately not always possible to become self-employed in the professional field in which you have actually completed training and worked up to now. Activities that you may have performed constantly up to now and that you enjoyed, you may not be legally allowed to perform afterwards. Another point, why it is so important to inform yourself exactly about the framework conditions before you actually become self-employed.

Self-employment in the care sector in Poland, Portugal and Turkey

Now that you have already read about the restrictions that exist regarding self-employment in the care sector in Austria, you can probably imagine that there are rules regulating activities in other countries as well.

It would go beyond the scope of this learning unit to list all regulations and legal framework conditions here, which is why we will only provide a brief overview of the basic possibilities of self-employment. For detailed information on the applicable rules in your country, please contact the relevant chamber of commerce or industry, where they will be able to provide you with the appropriate information.

Occupation	Self-employment allowed
Portugal	
Family support	In principle, self-employment is allowed in these areas, but under a different professional title
Geriatrics Agent/Agent	
Geriatric technician /Geriatric technician	
Family and community support assistance	No
Family and community support technology	No
Poland	
Care for the elderly	Yes
Care in social welfare homes	Yes
medical care	Yes
personal assistance of disabled people	Yes
Turkey	
24 hours care assistance	Yes
Home care/assistance	Yes
Nursing staff	Yes

Nursing Assistants

Yes

5.3 Step by step guide to become an independent caregiver in the home care sector

If someone is faced with the decision to become self-employed in home care, there are - as already mentioned several times - some things to consider and clarify.

At this point, we will try to create a small step-by-step guide that can be seen as a rough guide to becoming independent in home care.

Important

Since the path to self-employment in home care really depends heavily on the country in which someone wants to work, we would like to point out once again at this point that it is imperative to contact the relevant authorities to ensure that nothing stands in the way of self-employment in home care legally!

Step 1: Think wisely about why you want to be self-employed or why you prefer self-employment to employment.

Take the time and think really hard about why you want to work as a self-employed home carer. It is best to write down on a piece of paper all the points that speak for and against self-employment. Also consider whether you have the necessary prerequisites for self-employment.

Step 2: Discuss your plan with your private environment

Starting a business and taking the path to self-employment should also be discussed with your closer private environment, so that you know that you also have someone to back you up in difficult times. The decision itself, whether you want to become self-employed or not, should of course still be made by you personally and if you yourself are convinced of it, you should not let yourself be dissuaded.

Step 3: Concretize your plans

What do you actually want your independence to look like at the end of the day? How do you envision your everyday life? What activities do you want to do and can you do? How do you want to carry them out? Before you can start planning further, you need to take another close look at your idea and think carefully about how you envision your self-employment.

Step 4: Clarify the legal requirements and seek advice

- In any case, the next path should be the one to the competent chamber of commerce or authority or to a consulting institution that will also help you clarify all legal issues that arise

in connection with self-employment as a home carer. Even if this path seems tedious, a consultation pays off in any case!

- The following points need to be clarified:
 - Do you meet the legal requirements to be able to work independently as a caregiver at all?
 - Are you allowed to do all the activities you would like to do?
 - Do you still need additional qualifications?
 - How can you start your own business? Do you have to register a trade? Do you have to set up a company in a certain legal form?
 - What are the costs of incorporation?
 - What obligations regarding social security, taxes, duties, etc. arise from self-employment?

Step 5: Create a business plan

If nothing legally stands in the way of self-employment and you also know how you can and want to work in the future, you can now back up your plans with figures, data and facts - the business plan can be drawn up!

Note

You may now be wondering whether it is really necessary to create a business plan - after all, you don't want to open a large company with 20 more employees.

But the answer to this is definitely YES! A business plan will help you to get clarity about how you can best go about becoming self-employed and how you can subsequently make a good living from your activity.

You have already learned how a business plan is basically structured in the first content unit. At this point, we will pay special attention to 3 areas of the business plan.

- What exactly are the services you offer?

Home care is a broad term. What activities that arise in this area, you want and can take over? Simple care activities, support in the household, cleaning, laundry, cooking? Do clients get additional benefits when they hire you? Do you stand out from other caregivers? Precisely because this area is so extensive, you really need to think about what you really want to offer.

- Marketing and sales

This section of the business plan contains a number of key points that are subsequently also included in the time plan and, above all, the financial plan.

- Product and pricing: In this section of the business plan, you can once again describe in detail the services you will offer in the future and then also price them. How should your services be compensated? Do you charge a price per hour, regardless of

what activity you perform at the client's site? Or are there fixed prices for individual activities? An important cost item that should not be forgotten in pricing, especially in home care, is the cost of travel. The time you spend traveling to the customer must be taken into account in the pricing!

- Marketing and sales: Before starting your own business, you also need to think about how you will get in touch with your future customers. How do you reach the people who need care? Don't just think of the traditional ways, such as newspaper ads or folders that might be displayed at doctors' offices. Also use existing public networks, social media and also your personal contacts to draw attention to yourself. This way is often the cheaper and also more effective.

- Financial planning

Let's move on to probably the most important part of the business plan - the financial plan. It is essential that the following points are included in it:

- Turnover: How many customers can you serve? What services will these customers use? How much turnover do you generate?
- Capital requirements: Do you need start-up capital? This could be necessary, for example, if you do not yet own a vehicle and need to buy a car right at the start. Also, if you need work equipment or work clothes and you need to invest in these right at the beginning, this item must be planned accordingly.
- Running costs: What running costs will incur when you start your business? Think here, for example, of working materials, gasoline, repairs, fees, duties, insurance, taxes, etc.

In the following content unit, you will dive even deeper into the world of numbers and receive further information on the topics of accounting and cost accounting. The topic of marketing will also be explained in detail once again.

Step 6: Get help from experts if needed

If you are not sure whether you have covered all eventualities in your financial plan, it is advisable at this point to seek external advice once again and subject the financial plan to an external evaluation. After all, this plan will be one of the most important decision-making tools for pursuing or stopping your dreams.

Step 7: Make a decision

If, according to your financial plan, there is enough money left over at the end of the day for you to make a living, then there is really nothing standing in the way of a clear decision to become self-employed - congratulations on taking the courageous step of becoming self-employed!

Step 8: Complete all formalities

Don't despair - now you probably have to deal with a few authorities on your daily schedule. Before you can start your work as a self-employed caregiver in home care, you must of course complete all the formalities. This includes - of course depending on the country you are working in -

e.g. the registration of a trade, obtaining the official permit, the registration of the activity with the tax office, the registration with the social insurance, etc.

Even though it can be quite tedious, there is unfortunately no way around these formalities. But hang in there - after that you've made it!

Step 9: Start full speed and keep the overview

Once you are officially self-employed and allowed to pursue your activities, you can hit the ground running. Your business plan will help you not to lose sight of your goal.

We would like to share the following tips with you at this point:

- Be sure to keep accurate records. Keep all invoices and keep detailed records of your income and expenses from the beginning. If you do not have the necessary accounting skills yourself, it is advisable to get help or outsource the accounting.
- Always keep an eye on your financial plan. If there are major deviations from the previously prepared plan, analyze exactly what the reason is. If necessary, get help from experts. This is the only way you can react to deviations and steer everything back in the right direction.

Step 10: Stay on the ball and don't let small hurdles throw you off track!

Even if things don't always look as rosy and go as easily as you would have liked and imagined - keep your eye on the ball and use the small hurdles as an opportunity to grow even further in your self-employment!

5.4 Summary

In addition to the personal qualities they need for a job in the care sector per se, self-employed carers must also have qualities such as a willingness to take risks and work hard, the ability to motivate, the ability to make contacts, the pleasure of thinking and creating independently, entrepreneurial thinking, organizational talent and assertiveness.

In the area of professional qualifications, basic business knowledge in the areas of accounting, cost accounting and marketing is particularly important in addition to professional qualifications in the caring field. If you do not have sufficient knowledge in these specialist areas yourself, it is worthwhile to draw on the knowledge and help of an external consultant.

The following step-by-step guide can be followed by aspiring independent caregivers:

Step 1: Think hard about why you want to be self-employed or why you prefer self-employment to employment.

Step 2: Discuss your plan with your private environment

Step 3: Concretize your plans

Step 4: Clarify the legal requirements and seek advice

Step 5: Create a business plan



Step 6: Get help from experts if needed

Step 7: Make a decision

Step 8: Complete all formalities

Step 9: Start full speed and keep the overview.

Step 10: Stay on the ball and don't let small hurdles throw you off track!

6. Core competencies for successful self-employment

6.1 Introduction

The topic

In the first two units, you received basic information about self-employment and self-employment in nursing. You will have noticed that both the first and second unit talked about competencies, skills, prerequisites and knowledge that are essential for self-employment.

Some of these characteristics, skills and competencies are difficult to learn, much of it lies in a person's personality and requires a lot of work in the area of personality development. Other competencies and skills, on the other hand, can be easily acquired with a few small tips and tricks in order to be prepared for self-employment.

In this content unit, we will focus on three of these areas, giving you the basics in accounting and costing, marketing, and organizational skills.

6.2 Numbers, Data, Facts - Basics of Accounting and Cost Accounting

Even before you start your own business, when you draw up your business plan, you have to deal intensively with figures and finances for the first time. But the preparation of the business plan is not the end of the story. Even after you have set up your business, you need to keep an overview of all the figures. And even if you are "only" self-employed on your own and not running a large company, you still have to be accountable to outsiders. For example, to the tax office, or if you have taken out a loan for self-employment, also to the bank.

For this reason, it is important that you ensure systematic recording of all cash and activity flows and that you know and also perform basic accounting and cost accounting activities.

Accounting

In accounting, business transactions (purchases, sales, etc.) are recorded with the help of documents.

Note

Please note that there are country-specific differences in the way businesses have to keep record of their activities.

In any case, please inform yourself about the regulations that apply to you in your country!

There are different ways of keeping accounts. The simplest way is a very simple income-expenses account, in which the income is compared with the expenses. Much more complex is, for example, double-entry bookkeeping, in which every purchase, sale, etc. is recorded in at least two accounts. The law defines exactly who may or must use which accounting system. Correct bookkeeping is extremely important, because at the end of the day it is also used to calculate the tax liability incurred!

If you are obliged to do bookkeeping at all as a self-employed caregiver, it will normally be sufficient if you keep an income-expense statement for your activities. Even if you are not required by law to keep an income-expense statement, it is advisable to do so in order to keep an overview of your finances. For this reason, we will now take a closer look at this way of keeping books.

The income-expenses statement is based on the inflow/outflow principle. This means that, in principle, only payment flows (income and expenses) are used to determine profit.

The whole thing still sounds a bit complicated? Just think of it as follows. The income-expense statement works like keeping a record of your wallet: everything that comes in and everything that is spent is recorded. In the same way, all inflows and outflows are recorded in the bank account.

The inflows and outflows represent the business cases. These are recorded by you on an ongoing basis and arranged systematically and chronologically. This process is also called current accounting. The basis for this are the receipts and expenses.

Important

It is particularly important to check the receipts to ensure that they meet the legal requirements so that they can actually be included in the accounting. Be sure to inform yourself about country-specific requirements in this area as well!

Examples of your business cases:

- Payments from customers
- Purchase of work clothes and materials
- Purchase of office supplies
- Vehicle expenses (refueling, repairs, tires, etc.)
- Payments for external consulting (accounting, tax consulting, etc.)
- Payments for loans

etc.

Example

Mrs. Doe can hardly believe it. Another month has passed and the accounting for the past May has to be done.

So Mrs. Doe fetches her accounting folder, in which she has filed all the receipts for the past month, and opens the Excel spreadsheet on her laptop.

She ended April with EUR 2,850. Work-related expenses in May were thankfully limited. In her records, she finds a fuel bill of 43 EUR, a bill of 125 EUR for the new shoes and T-shirts she needs for work, and a small bill of 12 EUR for the office supplies she needs for bookkeeping. In addition to these bills, she also finds standing orders for health insurance and her car insurance in her bank account. Fortunately, the income side looks very good. This month, she was able to gain 2 new customers, which has increased her customer base to a total of 4 customers. In total, she earned 1,500 EUR.

The income-expenses account for May is thus as follows:

Opening value	+ EUR 2,850	
Health insurance	- 120 EUR	03.05.2021
Car insurance	- 50 EUR	03.05.2021
Office supplies	- EUR 12	05.05.2021
Customer 1	+ 200 EUR	10.05.2021
Customer 2	+ 250 EUR	10.05.2021
Customer 3	+ 800 EUR	12.05.2021
Gasoline	- 43 EUR	13.05.2021
Customer 4	+ 250 EUR	28.05.2021
Work clothes	- 125 EUR	30.05.2021
Balance at 31.5.2021	+ EUR 4,000	

Thus, Mrs. Doe has a profit of 1,150 EUR on her account in the month of May. However, Mrs. Doe cannot spend this money yet without further ado! Finally this profit must be also still taxed! In order to experience no bad surprises Mrs. Doe informed herself naturally with your responsible tax office sufficiently and puts the part of the money away, which must be transferred with the next tax return to the tax office.

Important

If you are subject to VAT, you must also take into account the country-specific regulations regarding sales and input taxes in the income statement! For more information, please contact your local tax office.

Cost accounting

Cost accounting provides important information for managing a business. Sales prices are calculated and company costs are determined so that company decisions can be derived and planning can be carried out for the next financial years.

You may be wondering if this is actually necessary for you as an independent home caregiver? Yes!

You will already have to deal with costs and sales when preparing your business plan - this is actually your first contact with cost accounting. As you might already imagine, however, this will not be the only time you have to deal with these figures. Important decisions in day-to-day operations should not be made on gut instinct, but on the basis of facts and figures.

Cost accounting enables entrepreneurs to make decisions about pricing, the range and services offered, and also production.

The goal of a business or entrepreneur is to break even in the long run.

This means that all costs incurred must be covered by revenues. And, of course, a profit should also be made in the process so that it is worth running a business.

Cost accounting tasks:

- Pricing and price assessment
- Information for business decisions
- Determination of success, control of profitability
- Planning the next periods

But what actually are "costs"?

Definition

Costs are incurred when products and services are created. Costs are the value of all goods and services in an accounting period that are consumed to produce the operating output.

But not all costs are the same. To be able to perform your calculations correctly, you need to distinguish between direct costs, overheads, fixed costs and variable costs.

Direct costs

Direct costs can be directly allocated to an individual product or service. In the area of home care, for example, this would be the directly attributable time and the associated costs per working hour and

customer, or working materials that you need for one customer (e.g. bandages, diapers, etc.), but not for other ones.

Overheads

Overhead costs are not directly related to the individual products and services and can only be indirectly allocated to them. This includes, for example, your work clothes, costs for office supplies, costs for external consulting services, costs for car repairs, etc.

Fixed costs

Fixed costs are those costs that are incurred irrespective of the production and sales volume or the services provided. If, for example, you have to take care of your health insurance yourself or pay membership fees to the Chamber of Commerce for your business, these costs are incurred regardless of whether you currently serve many customers or only very few. Certain maintenance costs for a car are also fixed costs that incur regardless of how many customers you drive to.

Variable costs

Variable costs are volume-dependent costs that change as a result of the production and sales volume or the service offered. These clearly include your working time, material costs for the activities you perform, or, for example, the cost of the gasoline you consume when you drive to your customers.

Example

As an independent caregiver in home care, Mrs. Doe encounters many different costs. Some of these are attributable to specific customers, while others are not. Some costs also incur independently of the customers.

Here are a few examples:

- **Variable direct costs** - The special dressing material for Mr. John must be purchased by Mrs. Doe only for Mr. John, otherwise she does not use this dressing material on anyone else. These costs can therefore be allocated directly to Mr. John. However, since the costs are also consumption-dependent, they are also variable costs.
- **Fixed overhead costs** - Contributions to the Chamber of Commerce - Ms. Doe always has to pay the membership fee to the Chamber of Commerce, regardless of the number of customers she serves. However, these costs cannot be allocated to a specific customer, which is why these costs are overheads.
- **Variable overheads** - The cost of new car tires - These costs are variable. The more customers Mrs. Doe has, the more kilometers she drives with the car and the faster wear parts, such as the car tires, have to be replaced. At the end of the day, however, Mrs. Doe cannot say with certainty that the new tires are to be allocated 10% to Mr. John, 40% to Mrs. Becker and 50% to Mrs. Jones. The costs for the new tires are therefore overhead costs.

Don't be afraid if the whole thing sounds confusing and complicated. Take your time and take a close look at your costs and consider when the costs occur and how they arise. You will see, a classification into fixed or variable costs and direct or overhead costs will soon no longer be difficult for you and you will know your cost structure. Only if you have a clear overview of your costs, you can subsequently decide how much to charge for your services.

6.3 Marketing basics for your business(plan)

As a self-employed home carer, you don't have to be a marketing genius, of course. Nevertheless, it's important that you get to know a few basics that will make both the start of your self-employment and your day-to-day work easier.

When you hear the question "What is marketing?", very often the first thought that comes to mind is: That's advertising, isn't it? Of course, that's what each of us perceives through the media. But advertising is only one part of marketing.

The word marketing originally comes from the English word "market". The term market refers to the place where sellers and buyers meet. This does not always have to be a geographically designated place - nowadays sellers and buyers also "meet" on the Internet, in virtual space. Thus, it is already clear what the prerequisite for economic success to occur at all is - an offer and, of course, the demand for the product or service. If this is not the case, it becomes difficult.

The questions that every company must address in order to operate successfully are:

- Who is my target group?
- How do I advertise?
- What should be the price?
- How do the goods/services reach the customers?

Marketing is therefore both a mindset of the entire company and the taking of measures to promote sales. The main goal is the firm positioning on the market and thus in the memory of customers.

If we apply the concept of the market to home care, the basic prerequisite for you to be successful as an independent caregiver is that there are people who need care and support and who want to get help or support in their own homes. These people, who would make use of your services, represent your target group. Of course, this demand must also match your offer in terms of location - supply and demand meet on the market, as already described above. If someone needs help 300km away from your home, this demand will probably not coincide with your offer.

Example

Mrs. Doe already works as a self-employed personal care worker in her home district. Since she still has time resources left, she is considering expanding her market and possibly targeting clients and customers from the neighboring district.

She knows from various sources that there is a great need for home care in the neighboring county and little supply of home care and support.

Since the travel time to the neighboring district is also only between 15 and 25 minutes, Ms. Doe decides to work in this area as well.

After you have sufficiently defined your target group and your market, you can ask yourself the next important question: What must be done so that the potential customers and clients actually use my services?

In theory, we speak of the "sales policy instruments" or "marketing tools" that a company has at its disposal to present its product or service to customers as effectively as possible. From the various marketing instruments, the optimum mixture is now to be created: the so-called "marketing mix" - a cocktail of marketing measures with the help of which the customers are motivated to buy. The prettier and tastier the cocktail, the greater the desire for it.

There are 4 basic ingredients for this cocktail - the "4 P's of the marketing mix": Product, Price, Place and Promotion.

Definition

The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas must be carefully coordinated with each other.

Let's take a quick look at the 4 P's in more detail and then apply the concept to you, as a self-employed home caregiver.

- Product or assortment policy
Product policy concerns all decisions that affect the product or service itself: Product design, quality, packaging, brand, size and also services and guarantees, etc. The assortment policy concerns the company's decision on how the overall range of goods, material and services is designed. The decision includes whether to add new products or whole groups of products to the assortment and which products to remove.
So, simply put, the first P is about looking at the services you want and are able to provide as a home carer.

Example

Mrs. Doe has so far offered the following services as a personal care giver:

- Cooking
- Cleaning
- Laundry wash
- Keeping company, everyday care, etc.

Until now, she has not wanted to take on medical care activities. Recently, she has received an increasing number of requests to take on simple medical care tasks, such as administering medication or simply changing dressings, under the guidance of a doctor.

The expansion of the range of services with these additional services would bring her more customers and thus also more income. For this reason, Mrs. Doe decides that, in addition to the services she has offered so far, she will in future also offer the simple nursing activities that she is allowed and able to undertake.

- **Pricing policy**

The decision about the price is one of the most difficult and momentous decisions in a company. After all, the price is not only important for marketing, but the sales price is the basis for the turnover and survival of a company. Companies must not only set the level according to economic criteria, but also take psychology into account. These pricing decisions are made within the framework of pricing policy - the next P.

Price plays a particularly important role in the purchasing decision. The features and benefits of the product or service are no longer the sole deciding factor; the customer's assessment of the price is also decisive. You know the term "price-performance ratio". Customers are only satisfied if the "price-performance ratio" is right, i.e., if the purchase price and the benefits of the product match.

In order to set the price correctly, a holistic view of the topic of price is required: From a purely economic point of view, one gets the data from cost accounting. In addition, however, the psychological effect of prices on demand must also be taken into account. And then there are the competitors or rivals.

The fusion of all three perspectives then results in the price that is to ensure economic survival, is accepted by customers (= perceived as appropriate) and is customary and possible on the market.

Example

Mrs. Doe has already received inquiries from customers who only want to use one of her new services. Specifically, it's about dressing changes.

Up to now, Mrs. Doe has always billed her care activities per hour, since she normally always spends a few hours with her customers.

However, in the event that someone only needs a quick dressing change, she now has to come up with an own price for this individual service. She doesn't want to price the time here, but the activity itself.

When setting the price, Mrs. Doe must consider the following points:

- **Cost-effectiveness:** Even if Mrs. Doe does not need a whole hour for a dressing change, she does spend time with the customer. This time, as well as the time to get there, must therefore be taken into account when setting the price. In the event that Ms. Doe also has to bring the required dressing material, she must also reflect these material costs accordingly in the price in order to be able to act economically.
- **Psychological aspects:** Of course, the psychological component must also be included in the price calculation. Mrs. Doe must think carefully about what it will be worth to her

customers if she offers a quick dressing change without any other additional care services. The price must correspond to the benefit perceived by the customers.

- **Competition: Of course**, a price calculation cannot be made without considering the competition. Mrs. Doe therefore inquires about the prices of other carers who offer dressing changes. If the price she has in mind is higher than that of the competition, the exact service may have to be adapted again and made more attractive in order to justify the higher price. If the price is lower than that of the competition, Mrs. Doe has a good chance of standing out from the competition through the price.

- Place – distribution policy

When and where can customers buy a product? The place has a great influence, because most of the time customers are not very actively looking for a product.

What is most likely to be purchased is that which is readily available. Distribution policy is about "How does the product get to the consumer?" Distribution means allocation. It is about all the measures that are set to overcome space and time between the consumer and the manufacturer. The distribution policy of the company decides on which ways the product or service will be distributed. The main tasks are the organization of the distribution channels, the choice of the location of the company and the means of transport.

As you can already imagine, there are great differences between a company that manufactures products and distributes them via wholesale and retail and uses its own trucks for deliveries, and you as an independent carer in home care when it comes to this P.

Example

As a self-employed home care provider, Mrs. Doe is clearly very limited in terms of the place where customers can use her services. The activity itself suggests that the services can only be used at the customer's home in their own four walls.

- Promotion – communication policy

Do you remember? At the very beginning, the question was "What is marketing?" and maybe you thought to yourself, "Marketing - that's advertising". By now you are informed and know that advertising, or rather communication is only one part of the whole marketing mix.

Communication policy is one of the components of the marketing mix. Communication policy encompasses all communication processes, both internal and external. It is the "mouthpiece of marketing". Communication policy comprises various individual measures, such as advertising, sales promotion, public relations, personal selling, or trade fairs or events.

For you as an independent caregiver in home care, two aspects are of particular importance:

- Advertising: In order to attract potential clients and customers to you, you need to advertise your services. It is important to think carefully about how and where you can best reach your target group and what message you want to send to them. Folders, flyers or advertisements in print media are possible ways to reach new customers. Social networks and the Internet can also be used for advertising purposes.



- Personal selling: If you have attracted the attention of a customer and a personal meeting takes place, you must sell yourself well in this meeting - you are virtually selling yourself and your services in this meeting. After a brief greeting, you should conduct a needs analysis together with your counterpart to find out exactly what the customer expects and needs from you. Only in this way can you present in a next step exactly which services you can offer to satisfy these needs. In the best case, a contract will be signed and you will be engaged.

Example

Now that Mrs. Doe offers light nursing activities in addition to general care activities, she also wants to advertise these new services in her service portfolio to get the attention of potential new clients and customers.

Mrs. Doe doesn't actually have much advertising budget left in her financial plan for this year, which is why she decides to advertise the new service cost-effectively via social media and her existing network.

Mrs. Doe prepares a nice advertising text with the information about the new service offer and then posts it on various social media channels in the groups she already knows, which deal with the topic of home care. Through her many years of activity, Ms. Doe has also already built up a large network consisting of doctors and nurses, as well as communities. She also uses this network now and calls her well-known doctors and contacts from municipalities, informs these about the new service offer and asks whether she may put out new information materials in the doctors offices and at the municipality office. She then takes the information material in the form of a small folder she made on her own, which she prints out and folds at home, to the appropriate places and thus comes into contact with potential new customers.

With only a small budget, Mrs. Doe can thus advertise her services.

After only a few days, a lady who is interested in care contacts her and asked Mrs. Doe to come to her home to discuss further details and to get to know each other personally. A sales meeting is imminent! So Mrs. Doe prepares well for the meeting and goes to the lady's home the next day to discuss all the details. Together with the lady, Mrs. Doe analyzes the lady's care and nursing needs, how and to what extent Mrs. Doe can meet these needs, and what services are available at what price. The lady in need of care is so impressed by Mrs. Doe's friendly and professional appearance that she immediately hires Mrs. Doe and becomes a new customer.

6.4 Become an organizational talent

In self-employment, one competence is particularly important - the ability to organize. Only if you organize your daily work routine well and keep track of your appointments, customers and activities will you be able to be successful. Organizational skills still sound very vague at this point. Let's look at three specific areas that will help you work in an organized manner.

Time management

Successful time management is a very important factor for a balanced and successful life - professionally and privately. And yet we often fail to plan and use time sensibly. You are not alone in this.

Time is limited, runs out inexorably and cannot be increased. That is why the sensible use of this resource is so important. But what exactly does time management mean?

Definition

Time management encompasses all measures to use the limited resource of time in the most structured and goal-oriented way possible.

Time management is part of self-management. If you are mindful and sensible with your own time, you can gain quality of life, reduce stress and improve the achievement of goals. Especially as a self-employed caregiver in home care, good time management is enormously important. After all, in addition to the nursing work itself, you also have to allow enough time for administrative activities in your daily work routine. And at the end of the day, there should also be time for private things.

Surely you are asking yourself now: Are there guidelines and principles for successful time management?

Yes! Here are the most important rules:

- Set goals and priorities:

Set realistic goals, break them down into subgoals or smaller steps, and plan time for them. Adjust goals as changes occur. Think about what is really important - and what is not.

- Recognize and eliminate time traps:

An example of this is the constant checking of the e-mail inbox. Ask yourself which activities are really necessary and how often.

- Use tools for scheduling:

There are many very useful programs for scheduling, a smart calendar that warns of time overlaps for example is very helpful.

- Plan according to performance:

Schedule difficult tasks when you are most efficient. Regular breaks promote concentration and improve personal performance.

- Reserve time for the unexpected:

"Unexpected things often happen" - this saying holds a lot of truth. Plan time for unexpected tasks.

- Active planning and time control:

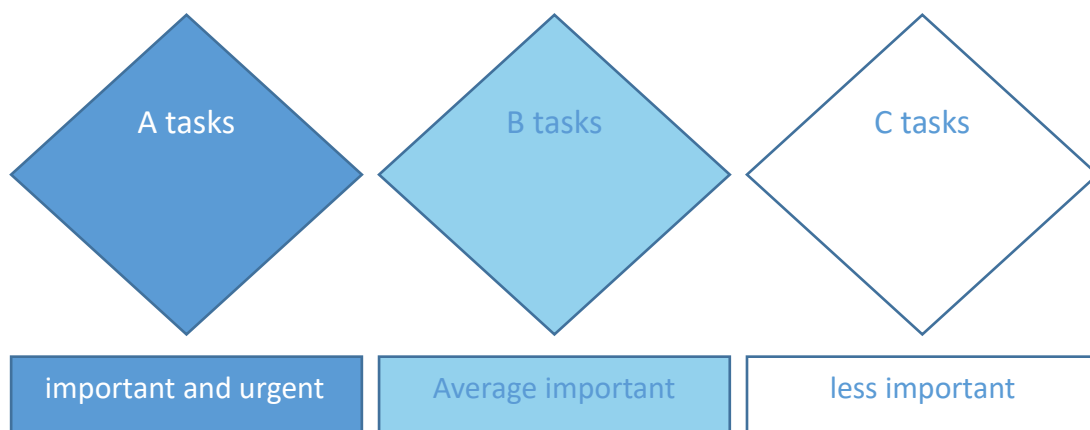
Do you always have too little time despite planning? Then something is wrong. Write down what you are doing, how much time you have planned and check yourself. Some people are basically too optimistic in their assessment and expect too much of themselves.

Besides the basic rules of time management, there are also some useful methods for effective time management.

Let's take a closer look at two of them – the ABC analysis and the Eisenhower principle.

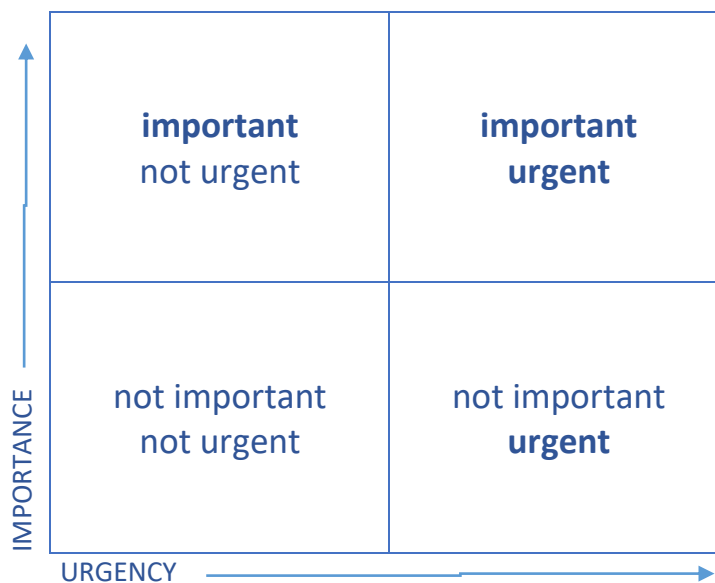
The ABC analysis helps to set priorities - it is used not only in time management but also in other areas such as market research. Thereby the tasks are divided according to the importance. Particularly important tasks of the category A should be always promptly settled. Graphically represented the ABC analysis looks like this:

The ABC-analysis



The so-called Eisenhower principle is also very well known. It is named after the former US President Eisenhower - he used it to define tasks and priorities for his team. The tasks are divided according to importance and urgency.

Eisenhower principle



Important and urgent tasks should be done immediately and by yourself. For important but not urgent tasks a deadline is set. Tasks that are urgent but not important are delegated to someone else. If a task is neither important nor urgent, it is not completed at all and goes into the wastebasket.

Example

Since Mrs. Doe has expanded her services, potential new clients are constantly contacting her. Some of her existing customers are also taking advantage of the new services, which is why her entire workday has changed a bit. After a few weeks, Mrs. Doe gets the feeling that she is in a constant state of stress, has neglected administrative matters and no longer knows which professional and private tasks should be completed first.

Since she has heard about the Eisenhower principle and liked this principle, Mrs. Doe makes a list of all open items and items to be done in the future and divides them into 4 categories according to the Eisenhower principle:

- **Important & urgent:** The bookkeeping! The accounting for the last quarter must be done urgently. Since a timely submission is very important, this task must be done immediately. In 2 days, her daughter's biology project should also be ready, for which she still has to prepare some things with her daughter.
- **Important & not urgent:** Ms. Doe keeps an inventory of her work materials and has seen that a certain dressing material will soon be used up and she will have to go shopping again. After checking the stock again, she sees that there is still time to do the shopping and that it can be postponed for a few more days. To be on the safe side, however, Mrs. Doe immediately sets a date in her calendar so that she doesn't forget to do it next week. In the calendar, she also enters a reminder for a meeting with an interested customer. She had

already spoken to the gentleman on the phone and promised to get back to him in the next few days.

- **Urgent & not important:** The work clothes urgently need to be fetched from the blowroom. This task does not necessarily have to be done by Mrs. Doe, which is why she asks her husband if he can pick up the clothes on his way home from work. The refrigerator is also rather sparsely stocked and a visit to the supermarket would be urgently needed. Actually, she wanted to go to the supermarket, but since the bookkeeping really has to be done urgently, Mrs. Doe hands this task over to her husband as well.
- **Not urgent & not important:** Unfortunately, Ms. Doe was not able to move a single task to this area.

Furthermore, she sets a few rules to use her time more effectively:

- Mrs. Doe now enters all appointments in an online calendar. For fixed dates in the future, such as the submission of the accounting, she receives a reminder a few days earlier to have enough time for the preparations.
- At the end of the working day, there is an hour for administrative activities. In this hour, e-mails are answered, invoices are filed and other administrative things are taken care of so that nothing is left undone in this area.
- Each workday has a small free window at least once a day between appointments to allow time for unforeseen things like sales calls or last-minute appointments with new customers.

Scheduling

In addition to time management, another point is extremely important for successful independence in home care - efficient scheduling.

Definition

An appointment is nothing more than a set time when something takes place or needs to be done.

In order to plan appointments sensibly, it is also important to know the background to the appointment.

So ask yourself the following questions:

- Why is the appointment taking place? What activities do you have to do?
- Who is involved? For example, do you need to coordinate with a doctor, nurse or relative of the person you are caring for?
- When and where do you meet?

- How long does the appointment last?

As a general rule, the more people you want to attend an event, the more difficult it is to plan.

A distinction is made between two appointment types:

- Fixed dates
- Flexible dates

Fixed dates cannot be moved, are often recurring, and should be recorded as early as possible for the entire calendar year. Examples are accounting and tax filing dates.

Flexible dates are entered as soon as they are known. They must be coordinated with existing appointments. In home care, this classically includes the individual care appointments with your customers.

A wide variety of tools are available for scheduling appointments. The usual appointment calendar has increasingly been replaced by appointment management on the computer or via smartphone or tablet.

Planning and coordinating appointments is a responsible task and requires some practice. Therefore, a few practical tips at this point:

- Work with colors for different appointment types - this creates a better overview. In home care, it can also be useful to color the appointments of individual clients differently so that you can see at a glance when you are with whom.
- Note that some appointments require preparation work - plan for this as well (e.g. do the shopping)
- Enter new appointments immediately - otherwise something could change in the calendar
- Do not set appointments too tightly and plan time reserves (buffer times). Do not forget to plan travel times!

Example

After Mrs. Doe was able to solve her time stress, she resolved never to get into such a situation again and to bring more structure into her daily work routine. From now on, she will use her diary not only for appointments with her customers, but for all her professional and private appointments as well.

In order to keep the best possible overview of all appointments, she will proceed as follows in the future:

- Each customer and each client is assigned its own color. This way, she can see related appointments in her calendar at a glance.
- For the individual customer appointments, she also enters the travel times so that these time slots are also blocked and there are no overlaps.
- If special preparations are required for certain appointments, reminders are also stored. In this way, Mrs. Doe receives a reminder early enough and can prepare precisely without

having to constantly keep track of all the appointments.

- Fixed dates, such as the deadlines for accounting, are already entered in the calendar for the whole year, including reminders.
- Private appointments that cannot be postponed under any circumstances are also entered as fixed dates in order to be able to plan in the best possible way.
- As soon as a new appointment arises - whether professional or private - it is entered in the calendar. In addition to appointments with customers, this also includes private appointments, such as her daughter's presentation appointments, which take up Mrs. Doe's time as well.

Document management and filing

Dealing with documents is a sensitive and responsible area. Careless handling leads to problems, extra work and, in the worst case, even to penalties or overdue fines.

Documents should always be stored so that they can be found quickly when needed. This perhaps raises the big question: What actually are all documents - and how long must what be kept?

Definition

The collective term documents basically means all objects that provide information either on paper or in electrical data form.

Documents are therefore not only contracts or invoices, but basically everything that has an information value for you as an independent caregiver.

Particular care is required for official papers or documents with a certain probative value. Self-employed persons are responsible for incoming and outgoing documents and their safekeeping.

Certain documents are also subject to a certain retention period by law. These documents must be kept in such a way that they can be found quickly in the event of an audit, e.g. by the tax office. Which periods apply to which documents is country-specific and must be inquired at the responsible authorities.

In order to have documents quickly at hand, a suitable filing system is of great importance. Documents can be sorted and filed in various ways, e.g. chronologically, numerically or by keywords.

Important

For business papers that no longer need to be stored, the wastebasket is often not the right place.

Documents that contain information relevant to data protection should be disposed of properly. Document shredders have various security levels and can be set so that it is no longer possible to reconstruct the documents.

Now let's take a quick look at the different file storage systems.

In the first step, you need to decide which type of filing to choose and whether it is individual or collective files.

The storage type is differentiated into:

- Loose-leaf filing: documents are placed loosely in folders or file covers. This type is suitable for quick and not too extensive filing.
- Stapled filing: Documents are punched and filed in folders. This type of filing requires more time, but is more secure. Especially suitable for important files and documents. Filing in the correct order is facilitated and loss of documents occurs less frequently. For this reason, this system is certainly preferable.

File management distinguishes between individual files and collective files.

- The individual file comprises only one single operation. All associated documents are assigned to this operation.
- In the collective file, documents from many similar processes come together. Examples include customer-independent documents such as gasoline bills, invoices for work materials and work clothes, etc.

Example

As a self-employed person, Mrs. Doe often has to deal with paperwork. In addition to bookkeeping and the accompanying receipts and invoices, she also has contracts with each and every one of her customers.

To ensure that Mrs. Doe always maintains an overview of her business activities, she proceeds as follows:

- Invoices and receipts are immediately filed in the designated folder. This way, nothing can get lost and she has all invoices available in chronological order. This saves a lot of time should she ever need to search for a specific invoice.
- She also prints out statements from her bank account at the end of the month and hangs them in the folder with the bills.
- Each year she creates a new folder for bills and receipts.
- Customer contracts are kept in a separate folder. In this folder, each customer has a register with an individual file containing the respective contracts and all other documents belonging to the customer.

6.5 Summary

In addition to specialized skills in nursing and caregiving, other skills are essential for successful independence in home care.



Basic knowledge of accounting and cost accounting is essential to keep an overview of cost structures, revenues and expenses. A simple income statement compares revenues with expenses and shows the profit or loss of a period with little effort. With basic cost accounting knowledge, prices for products and services can be calculated in order to act economically.

Basic marketing knowledge also helps self-employed people to market their products and services in the best possible way. The 4 Ps of the marketing mix - product, price, place, promotion - are at the center of all considerations.

Self-employed people, no matter in which field, must also demonstrate a certain organizational ability in their daily work. Efficient time and appointment management, as well as well thought-out document management and filing help to bring structure into the workday and to work efficiently and effectively.

Module 5 - Questionnaires

1. PRE – TEST

Which statements are true, which are false?

	True	False
An entrepreneur is an businessman/businesswoman.	<input type="checkbox"/>	<input type="checkbox"/>
The liability with private assets is an advantage of being self-employed.	<input type="checkbox"/>	<input type="checkbox"/>
The possibility to choose working hours and working environment by yourself is an advantage of being self-employed.	<input type="checkbox"/>	<input type="checkbox"/>
A prerequisite for being successfully self employed is that family and friends also want to work in the company and help for free.	<input type="checkbox"/>	<input type="checkbox"/>
A professional prerequisite for being successfully self employed is that one has learned the profession and knows the industry.	<input type="checkbox"/>	<input type="checkbox"/>
Complexity and a high financial risk make a good idea.	<input type="checkbox"/>	<input type="checkbox"/>
The legal requirements for incorporation are the same throughout Europe.	<input type="checkbox"/>	<input type="checkbox"/>
Information on the legal requirements for setting up a business can be obtained from various institutions, such as the chambers of commerce and industry.	<input type="checkbox"/>	<input type="checkbox"/>
A business plan is a written business concept.	<input type="checkbox"/>	<input type="checkbox"/>
Independent home care workers should have a founding will, commitment, empathy, communication skills, organizational talent and mental and physical endurance.	<input type="checkbox"/>	<input type="checkbox"/>

To be an independent home care worker you need a training as a certified nurse.

In accounting, business transactions (purchases, sales, etc.) are recorded with the help of documents.

Correct accounting is enormously important, as important key figures and information, such as tax liability, are calculated from it.

The law defines exactly who may or must use which accounting system. This differs from country to country.

If a company has high costs, it makes a loss.

A company makes a profit when the sales revenue is higher than the costs.

Fixed costs are those costs that are incurred irrespective of the production and sales volume or the services provided.

Direct costs can be directly allocated to an individual product or service.

The place where suppliers and demanders meet is the market.

The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas must be carefully coordinated with each other.

The product and assortment policy involves setting prices for individual products or the entire assortment.

Price plays a particularly important role in the purchase decision. The price-performance ratio for the customer must be right.

Advertising means the same as communication policy.



Time management means using time in a structured and goal-oriented way.

An appointment is a set time when something takes place or needs to be done.

Fixed dates cannot be postponed and always take place once.

The collective term documents basically refers to all objects that provide information either on paper or in electrical data form.

2. POST – TEST

1. Which of these statements apply to the term entrepreneurship?

- An entrepreneur is an businessman/businesswoman.
- An entrepreneur is risk-averse but hard-working. He fulfills requirements but does not want to go beyond them.
- Entrepreneurs are innovative, eager to perform, and willing to take risks.
- Entrepreneurship only applies to companies with at least 150 employees.
- Entrepreneurship describes an entrepreneurial spirit.
- Companies increasingly want employees to act like entrepreneurs.

2. What are the advantages of being self-employed?

- Liability with private assets
- High time expenditure
- Working hours and working environment can be chosen by the employee
- Ideas can be realized
- Profits remain to oneself

3. What professional and personal prerequisites do entrepreneurs need to have in order to be successful?

- Personality: An entrepreneurial personality has a certain profile, such as a willingness to take risks and apply oneself, the ability to motivate, the ability to make contacts, and the pleasure of thinking and creating independently.
- Expertise: One has learned the profession and one knows the industry.
- Environment: Family and friends also want to work in the company and help for free.
- Environment: Family and friends support the decision to start up and the timing of the start-up is appropriate for personal life planning.
- Expertise: One has founded a company before and knows the rules.
- Personality: An entrepreneurial personality has a certain profile, such as weakness in decision-making or fear of risk.

4. What makes a good idea?

- Customer benefit and USP (=Unique Selling Proposition)
- Feasibility
- Clarity and profitability
- Complexity
- High financial risk

5. Which of the following statements are true and which are false?

	True	False
The legal requirements for incorporation are the same throughout Europe.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The legal requirements for incorporation can vary greatly depending on the country in which the incorporation is to take place.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Information on the legal requirements for setting up a business can be obtained from various institutions, such as the chambers of commerce and industry.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		

Legal requirements can be e.g. the following: citizenship, capacity to act, qualification certificates or insurances.

6. Which of the following statements are true and which are false?

	True	False
As a self-employed entrepreneur, you do not have to take care of insurance yourself. This is done by the responsible chamber of commerce.	<input type="checkbox"/>	<input type="checkbox"/>

There may be insurances, such as social security or professional liability insurance, that are mandatory to take out. This depends on the country in which a company is established.	<input type="checkbox"/>	<input type="checkbox"/>
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Entrepreneurs must know themselves which insurances, duties or taxes have to be paid. The use of assistance from external consultants is not permitted.	<input type="checkbox"/>	<input type="checkbox"/>
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In some countries and industries, membership in a chamber of commerce or industry is mandatory. These membership fees must also be taken into account in the financial plan.	<input type="checkbox"/>	<input type="checkbox"/>
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7. Which of these statements apply to a business plan?

- A business plan is a written business concept.
- A business plan must always look the same and must never be adapted for a particular institution or bank.
- The business plan is an important planning and control tool for entrepreneurs.
- The business plan is only important for the foundation, after that it can be destroyed.
- A business plan is written exclusively for banks or funding agencies.

8. What should be included in a business plan? Select the correct answers.

- Exact description of the company organization and goals
- Marketing and sales - pricing, distribution channels
- The product or service is described, customer benefits and unique selling proposition must be elaborated
- Time and financial planning - when is what planned?, capital requirements, subsidies
- Executive summary - brief overview of the company and objectives

9. What personal requirements should independent home care workers have?

- Founding Will & Commitment
- Empathy
- Communication skills
- Stress susceptibility
- Mental and physical endurance
- Organizational talent

10. What professional qualifications do independent home care workers need?

- Training as a certified nurse
- Basic knowledge in the areas of accounting and cost accounting
- Training in nursing and health care, depending on which activities are performed
- A minimum of 20 hours of training in business administration
- Basic marketing knowledge

11. Put the step-by-step guide in the right order

- Discuss your plan with your private environment
- Stay on the ball and don't let small hurdles throw you off track!

- Think hard about why you want to be self-employed or why you prefer self-employment to employment.
- Clarify the legal requirements and seek advice
- Complete all formalities
- Concretize your plans
- Get help from experts if needed
- Start full speed and keep the overview
- Make a decision
- Create a business plan

12. Which of the following statements are true and which are false?

	True	False
In accounting, business transactions (purchases, sales, etc.) are recorded with the help of documents.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The income-expenses statement is internationally recognized and can be used in any country, without regard to country-specific requirements.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The law defines exactly who may or must use which accounting system. This differs from country to country.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Correct accounting is enormously important, as important key figures and information, such as tax liability, are calculated from it.	<input type="checkbox"/>	<input type="checkbox"/>

13. Which statements regarding the income-expenses statement are true and which are false?

	True	False
Even if you are not legally obliged to keep accounts, it is advisable to at least keep an income and expenditure statement in order to keep track of your finances.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The income-expenses statement is based on the inflow/outflow principle. This means that, in principle, only payment flows (income and expenses) are used to determine profit.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The inflows and outflows represent the business cases. These are recorded on an ongoing basis and sorted systematically and chronologically.	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
In the income-expenses statement, revenues and expenses are recorded according to the time of actual payment.	<input type="checkbox"/>	<input type="checkbox"/>

14. It is the first of the month and Mr. Doe is sitting in front of his accounting for the last month. He finds the following invoices and receipts in his documents: a fuel bill of 45 EUR, a fuel bill of 20 EUR, an invoice from the last family shopping trip to the grocery store of 60 EUR, an invoice from his son's toy of 10 EUR, an invoice of 125 EUR for the new shoes and T-shirts he needs for work, and a small invoice of 20 EUR for the office supplies he needs for accounting. In the documents he also finds the invoice of 75 EUR for the order from the pharmacy online store, where he ordered bandage material. He should have transferred the money last month, but unfortunately he forgot to do so. He quickly pays the bill. He also finds the direct debit for the health insurance in the amount of EUR 120 on his bank account. He received 1500 EUR from his customers last month.

What is Mr. Meier's profit this month?

- EUR 1,025
- EUR 1,170
- EUR 1,095
- 1,100 EUR

15. May this profit be spent 1:1 privately by Mr. Meier?

- Yes, this sum is the profit left for Mr. Meier from this month. This money may be spent.
- No, this money should not be spent 1:1. After all, Mr. Meier also has to pay taxes on his income. The tax payments must also be covered, which is why part of the money must be kept for these payments.

16. Match the following statements with the appropriate cost accounting tasks.

You are considering caring for two more people in need of special care.

PERFORMANCE CALCULATION

You plan the costs and sales for the next year.

PRICING

You calculate the price for a new care service.

DECISION

You consider offering a service only in combination with other services and no longer on its own, as it only brings losses when offered on its own.

PLANNING

17. Choose the correct statements.

- A company makes a profit when the sales revenue is higher than the costs.
- The total earnings from the sale should cover all the company's costs.
- When all costs are covered, the company makes a profit.
- If the company has high costs, it makes a loss.

18. A common definition of the term cost is:

Costs are incurred when products and services are _____. Costs are the _____ of all goods and services of an _____ that are consumed to produce the operating output.

19. Use the right types of costs.

_____ can be directly allocated to an individual product or service.

_____ are those costs that are incurred irrespective of the production and sales volume or the services provided.

_____ are not directly related to the individual products and services and can only be indirectly allocated to them.

_____ are volume-dependent costs that change as a result of the production and sales volume or the service offered.

20. Who can answer the following questions? The accounting department or the cost accounting department?

	Accounting	Cost accounting
Did the customer John Doe pay his invoice in cash or by bank transfer?	<input type="checkbox"/>	<input type="checkbox"/>
How much does a 3-hour home care session with Ms. Doe cost?	<input type="checkbox"/>	<input type="checkbox"/>
Has the bill for the new work clothes already been paid?	<input type="checkbox"/>	<input type="checkbox"/>
How high must the price for a new service be?	<input type="checkbox"/>	<input type="checkbox"/>

21. Highlight all the topics of marketing.

- How long is the procurement process?
- How do the goods get to the customer?
- How is thorough marketing planning done?
- Who is my supplier?
- Who is my target group?
- How do I advertise?
- Which needs can I cover?
- What are my core competencies?
- What should be the price?

22. What terms are we talking about here?

The place where suppliers and demanders meet: _____

The provider is also named: _____

The demand party is also named: _____

The generic term for all the activities that the seller must set to meet the buyer in the market:

23. Which of the following statements are true and which are false?

	True	False
The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas must be carefully coordinated with each other.	<input type="checkbox"/>	<input type="checkbox"/>
The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas are to be considered independently of each other and do not have to be coordinated.	<input type="checkbox"/>	<input type="checkbox"/>
The marketing mix describes the totality of all advertising measures defined to achieve the marketing objectives.	<input type="checkbox"/>	<input type="checkbox"/>
The marketing mix describes the totality of all measures defined to achieve the marketing objectives in order to keep the costs of advertising as low as possible.	<input type="checkbox"/>	<input type="checkbox"/>

24. What are the terms of the 4 P's called in "language of partner countries to be inserted"?

product: _____

price: _____

place: _____

promotion: _____

25. Mark the correct statement(s) about product policy.

- Product policy concerns all decisions that affect the product or service itself.
- The assortment policy concerns the company's decision on how the overall range of goods, materials and services is designed.
- Decisions on product design, quality, packaging, brand, size, etc. are not made via product policy.
- The product and assortment policy involves setting prices for individual products or the entire assortment.

26. Mark the correct statement(s) about pricing policy.

- The sales price is the basis for the turnover and survival of a company.
- Prices set only according to economic criteria.
- Price plays a particularly important role in the purchase decision. The price-performance ratio for the customer must be right.
- When setting prices, three perspectives must be taken into account - economic aspects, psychological aspects, and the competition.

27. Complete the following text with the correct words.

Distribution means _____ (*processing / dispatch / sales*). It is about all measures that are set to overcome space and time between consumer and _____ (*manufacturer / customer / authorities*). The distribution policy of the company decides on which _____ (*rails / trucks / ways*) the product is distributed. The main tasks are the



_____ (organization / visualization / authorization) of the distribution channels,
the choice of the location of the company and the means of transport.

28. Which of the statements about communication policy are true?

- Communication policy deals only with internal communication processes.
- Advertising means the same as communication policy.
- All measures that proclaim the messages of marketing are called communication policy.
- Communication policy is part of the marketing mix.

29. Which of the following measures are part of the communication policy? Mark the correct statement(s).

- Advertising
- Personal sale
- Direct Sales
- Portfolio analysis
- Fairs, Events, Sponsoring
- Offer measures
- Public Relations
- Sales promotion
- Differentiation

30. Put the statements in the correct order.

- Upon arrival, there is a short greeting and the two ladies have a lively chat.
- Afterwards, Ms. Doe presents her services and explains to the lady which care and nursing services she can offer her.
- The lady is so enthusiastic that she immediately hires Ms. Doe and gives her the job.
- Afterwards, Ms. Doe analyzes the need of the lady together with the lady. The lady tells Ms. Doe what care she needs and what she expects from Ms. Doe.
- Ms. Doe has an appointment for a personal sales meeting with a new customer.

31. Which of these statements apply to time management?

- Buffer times should not be planned, this tempts you to dawdle.
- The Eisenhower principle divides tasks according to urgency and importance.
- The ABC analysis helps to set priorities in time management.
- Tasks that are not important and not urgent should be delegated according to the Eisenhower principle.
- Time management is only for top managers.
- Time management means using time in a structured and goal-oriented way.

32. You would like to organize a barbecue tomorrow afternoon and still have a few things to do for it. Apply the Eisenhower Principle to the subtasks below.

Tasks	Actions
1 Walk the dog	A Plan it for tomorrow
2 Invite friends	B Delegate task
3 Do the grocery shopping	C Do not fulfill the task
4 Wash the curtains	D Fulfill the task on your own

	Important	Not important
Urgent		
Not urgent		

33. You will find statements about scheduling here. Tick whether the statements are true or false.

true false

Flexible dates must be added to the calendar at the beginning of the year.

New appointments should be added collectively into the online calendar at the end of the week.

Appointment management can no longer take place only in the classic calendar, but also online via computer, smartphone or tablet.

For scheduling purposes, the background of the appointment is meaningless.

An appointment is a set time when something takes place or needs to be done.

Fixed dates cannot be postponed and always take place once.

Fixed dates cannot be moved, are often recurring, and should be scheduled as early as possible for the entire calendar year.

34. Choose the correct statements.

- The collective term documents basically refers to all objects that provide information either on paper or in electrical data form.



- Documents are contracts or invoices that are available in paper form.
- Documents with sensitive content must be disposed of properly so that the content can no longer be reconstructed.

35. Which of these statements apply to filing systems?

- Stapled filing takes more time, but is more secure.
- Individual files comprise only a single process and all associated documents.
- Loose-leaf filing is particularly simple and is therefore especially suitable for large, extensive quantities of documents.
- In the collective file, documents from many similar processes come together.

Overall evaluation

Pre- training Evaluation

**PRE TRAINING QUESTIONNAIRE
FOR PARTICIPANTS OF THE TRAINING
in the frame of
EMPOWER4EMPLOYMENT
project**

Title of training:

Date of training: dd.mm.yyyy.

Place of training: Full name with the adress

Name and surname of participants	
---	--

Dear Sir or Madam!

The information that will be obtained through this questionnaire will be used for your self-assessment and improvement of competences as a result of participation in the training.

Please complete the questionnaire by putting an **X** in the box corresponding to your assessment.

1. Have you ever participated in training on a similar subject?

Yes

No

Please express your opinion according to rating scale:

- 1- Definitely not
- 2- Probably not,
- 3- It's hard to say
- 4- Probably yes,
- 5- Definitely yes.

1. Do you think that your competences and skills are sufficient?

	Within the scope of the training	1	2	3	4	5
		Definitely not	Probably not	It's hard to say	Probably yes	Definitely yes
1	Knowledge of the types of disability					
2	Knowledge of the specificity of human aging					
3	Knowledge of the specificity of mental disorders and dementia					
4	Hierarchy of human needs					
5	Indication of the principles, models and methods of working with various groups of home care recipients,					
6	Use of rules, models and methods of work with people with low professional qualifications					
7	Labour market demand					



8	The rules of professional activation of people with low qualifications.					
9	Principles of communication with people with low professional competences					
10	Taking professional actions based on own knowledge and interdisciplinary cooperation					
11	Knowledge of support institutions and organizations in the field of home care					

2. Do you use your knowledge every day in your professional work?

	Within the scope of the training	1	2	3	4	5
		Definitely not	Probably not	It's hard to say	Probably yes	Definitely yes
1	Knowledge of the types of disability					
2	Knowledge of the specificity of human aging					
3	Knowledge of the specificity of mental disorders and dementia					
4	Hierarchy of human needs					
5	Indication of the principles, models and methods of working with various groups of home care recipients,					
6	Use of rules, models and methods of work with people with low professional qualifications					
7	Labour market demand					
8	The rules of professional activation of people with low qualifications.					
9	Principles of communication with people with low professional competences					
10	Taking professional actions based on own knowledge and interdisciplinary cooperation					
11	Knowledge of support institutions and organizations in the field of home care					

Thank you for completing the questionnaire!



Post-training Evaluation

**POST TRAINING QUESTIONNAIRE
FOR PARTICIPANTS OF THE TRAINING
in the frame of
EMPOWER4EMPLOYMENT
project**

Title of training:

Date of training: dd.mm.yyyy.

Place of training: Full name with the adress

Name and surname of participants	
---	--

Dear Sir or Madam!

The information that will be obtained through this questionnaire will be used for your self-assessment and improvement of competences as a result of participation in the training.

Please complete the questionnaire by putting an **X** in the box corresponding to your assessment.

Please express your opinion according to rating scale:

- 1- Definitely not
- 2- Probably not,
- 3- It's hard to say
- 4- Probably yes,
- 5- Definitely yes.

3. Has the information obtained during the training increased your competences and skills??

		1	2	3	4	5
	Within the scope of the training	Definitely not	Probably not	It's hard to say	Probably yes	Definitely yes
1	Knowledge of the types of disability					
2	Knowledge of the specificity of human aging					
3	Knowledge of the specificity of mental disorders and dementia					
4	Hierarchy of human needs					
5	Indication of the principles, models and methods of working with various groups of home care recipients,					
6	Use of rules, models and methods of work with people with low professional qualifications					
7	Labour market demand					
8	The rules of professional activation of people with low qualifications.					
9	Principles of communication with people with low					



	professional competences					
10	Taking professional actions based on own knowledge and interdisciplinary cooperation					
11	Knowledge of support institutions and organizations in the field of home care					

4. Will you use the information obtained during the training on a daily basis at work?

	Within the scope of the training	1	2	3	4	5
		Definitely not	Probably not	It's hard to say	Probably yes	Definitely yes
1	Knowledge of the types of disability					
2	Knowledge of the specificity of human aging					
3	Knowledge of the specificity of mental disorders and dementia					
4	Hierarchy of human needs					
5	Indication of the principles, models and methods of working with various groups of home care recipients,					
6	Use of rules, models and methods of work with people with low professional qualifications					
7	Labour market demand					
8	The rules of professional activation of people with low qualifications.					
9	Principles of communication with people with low professional competences					
10	Taking professional actions based on own knowledge and interdisciplinary cooperation					
11	Knowledge of support institutions and organizations in the field of home care					

5. How do you evaluate the organization of the training?

		1	2	3	4	5
		Very bad	Rather bad	It's hard to say	Rather good	Very good
1	The process of organizing the training (e.g. contact with the organizer,					

	reliability and speed of the answers provided)					
2	Trainer care during the training (e.g. availability of the trainer, assistance in case of emerging problems)					

6. How do you evaluate the training program?

		1	2	3	4	5
		Very bad	Rather bad	It's hard to say	Rather good	Very good
1	Compliance of the training program with expectations					
2	The possibility of practical use of the presented material					

7. How do you rate the training trainer (s)?

		1	2	3	4	5
		Very bad	Rather bad	It's hard to say	Rather good	Very good
1	Knowledge and preparation of the trainer					
2	The way of conducting activities and transferring knowledge					
3	Ability to ask questions and get answers					

8. How do you rate the received training materials?

		1	2	3	4	5
		Very bad	Rather bad	It's hard to say	Rather good	Very good
1	Substantive content					
2	Graphic design, readability and clarity of the presented materials					

9. What is your overall evaluation of the training?

		1	2	3	4	5
		Very bad	Rather bad	It's hard to say	Rather good	Very good
1	Overall assessment of the training					

Thank you for completing the questionnaire!

Case studies

Sample case descriptions for conducting classes. On the basis of selected case studies, instructions for training participants can be formulated, e.g.:

- please prepare a help plan (daily, weekly)
 - please offer support for the disabled person and their family
 - please specify the priority needs
 - please indicate the forms of assistance
1. I am 49 years old. I have multiple sclerosis. I am in a wheelchair. I had to quit my job. I am dependent on my husband. We have no children. I try to take care of the house and myself, but it is very difficult for me. I think my husband is only with me for a pity.
 2. I am 66 years old. The husband is an alcoholic. As a result of the accident, he lost his leg. He was fired from his job. I work and maintain the house. My husband suspects me of cheating. I don't have the strength to look after him.
 3. I am 38 years old. I live with my mum. I don't know what will happen to me when mommy dies. I can't write or read. I am intellectually disabled. I go to the day center. I'm afraid of people.
 4. I am 26 years old. I am in a wheelchair after a spine injury. I graduated in economics. I just got my first job. I have a friend, he is an IT specialist - also in a wheelchair - I think it's something more. I moved out from my parents. I want to finally start living on my own. I love them, they support me, but it's time for independence. Only if we can handle it?
 5. I am 70 years old. I have been a widow for 7 years. I have no children. I worked as an accountant. My husband and job had been my whole life - now I lost everything - including my will to live. I don't meet my friends because it irritates me that they can be happy. Sometimes I think that I have nothing to live for and for.
 6. I am 78 years old. For 5 years, after hip joints surgery, I have problems with independent movement, I use elbow crutches or a walker. I am quite obese. The wife is very active despite being 75 years old. She attends the University of the Third Age, goes to gymnastics and meets with her friends. She's never home - I don't think she cares about me anymore. We often argue because she torments me with a diet, makes me lose weight and rehabilitate. I think she is ashamed of the cripple.
 7. I am 65 years old. My husband left me when my second child was born. He left me with a 4-year-old healthy son and a 2-year-old daughter with cerebral palsy. Now the children are grown up. My son helps me financially because he earns money until now, but he is in England. The care for my daughter fell exclusively on me, and in addition, for 2 years I had to take my mother after a major stroke, lying down, requiring even more care than my daughter. I am tired, I have no time for myself. After all, I'm not that old yet, I used to be

even an attractive woman - now I don't feel like her anymore. I don't remember when I was at the hairdresser.

8. We are a couple for 2 years, we met in a sanitarium. We are 79 years old. If not for my partner's diabetes and my disability (I am in a wheelchair), we would also like to visit, see and experience something. It is difficult for us to run a household.
9. I became a widow at the age of 72, now I am 76. I am a wheelchair user. I have met the Men. We are doing very well, we have been meeting for several months now. The problem is with my children and his who do not accept our relationship. They say that at our age it is not appropriate and that we are setting a bad example for our grandchildren. After all, we're not gonna be hiding like teenagers.
10. I am a single 72 year old woman. I spend lonely long evenings watching TV series and cognac. I can't fall asleep without a few glasses of alcohol. I have no interests. When I drink, I don't need anything else. After the fall, I broke my leg, I have problems with the basic activities of everyday life.
11. I am 70 years old. I have had cancer. I have a kidney transplant, I have diabetes and an overactive thyroid gland. I take a lot of medications and am very susceptible to any infections. I want to live and enjoy every day I have left. I don't want to be a burden to the family.
12. Today, my mother's doctor informed me that my mother would be discharged home in two days. She is after a stroke, requires all day care, does not walk, barely sits on a wheelchair, needs to be fed. I don't know what to do, I have never looked after such a sick man. I work professionally. I need help.
13. I am an elderly man, everyone says elegant old man. I have Parkinson's disease. I don't know how to prepare for the progression of the disease. I am lonely - I have no family. Now I am still independent, but the disease is progressing and I know that I will need help soon.
14. I am disabled, I do not leave the apartment. I have dizziness. I live with my son. Martin is 55 years old. He can't work because he has a curvature of his spine and he was always such a frail child. We live off my retirement. Martin gets pocket money for cigarettes. Sometimes he invites colleagues and then I have to prepare something more to eat. Martin is a good child, he only sometimes yells at me and pushes me when I get in the way, but he has never beaten me. He only shows off like that in front of his friends, but I only have him.
15. For 10 years I have been taking care of my father who suffers from Ch. Alzheimer's. I lived with him. I don't have my life. I am my father's care giver 24 hours a day. I don't have the strength anymore, sometimes I think I'll do something wrong.

Workshop “Willingness to change”

Introduction

Change is always associated with something new and unknown.

Change is always accompanied by fears, doubts and objections.

It becomes natural to resist change.

Long-term unemployed person - change process - employed person

The workshop aims to prepare the participants to:

- achieving an active attitude in relation to changes taking place on the labour market,
- improving the process of making decisions, their implementation and taking responsibility for them,
- unleashing creativity and a new way of thinking in the process of change,
- breaking down barriers
- setting and achieving goals.

1. List your values and define what they mean for you.
2. Order the values by numbering them from 1 to 10, with 1 being the highest value for you.

VALUE	What is a given value? How do you understand it? What does it mean?	How do you know that you are doing it every month?

Summarize the first 5 values that are most important to you. Describe them in a few sentences. In this way, you build your Mission, which is the answer to the question: What gives meaning to my life? What do I want to do in my life? What do I want to do? What do I care most about?

What am I living for

I. ... and others

Now think of an employee / person who:

Doesn't have opportunity he/she would like to have

Has fears that hold him/her back

Has needs that aren't provided

Doesn't believe in him/herself, he/her has no self-esteem.

Describe what you see

Now think what he/she would look like, what would change if he/she had the opportunity, he/she would not be afraid, he/she would fulfill his/her needs and he/she would believe in him/herself.

Describe what you see

How can you help such a person?

Facts ----- Change ----- Desired condition

II. and YOU in the past

Think back to the past and remember the moment / time / period when:

- you had the opportunity and / or
- you have relieved of your fears and / or
- you realized your needs and / or
- you felt self-confidence, you had a sense of worth.

Answer the questions:

What did you feel then? What did you do then? What does it tell you? What are your conclusions? What do you think? What are your conclusions? What do you want to do about it?

III. and YOU in the present

What opportunities are you looking for now?

What are your concerns now?

What are your needs now?

What is the source of certainty and self-esteem?

What do you think about this? What are your conclusions? What do you want to do?

IV.and YOU in the future – in a year, 5 years, 10 years

So, what is your goal really?

What is preventing its achievement?

What is helpful in achieving it?

What do you need to achieve it?

What's holding you back?

What will happen when you achieve it?

Examples of mental exercises

1. Exercise for abstract thinking

❖ From the following set of words, please specify the one that does not match the others, and then explain why.

Example:

Wednesday, Thursday, Friday, **March**, Saturday - March is the name of the month and the other words are the names of the days of the week.

- ❖ Birthday cake, poppy seed cake, cheesecake, nut cake, bun -
- ❖ Sweater, shirt, pants, jacket, vest -
- ❖ Train, bicycle, car, plane, bus-
- ❖ Dog, cow, giraffe, sheep, horse -
- ❖ Lion, ram, scorpion, fish, maiden, cat -
- ❖ Sweet, cold, sour, salty, bitter -

Etc.

- ❖ Please guess the words

Example:

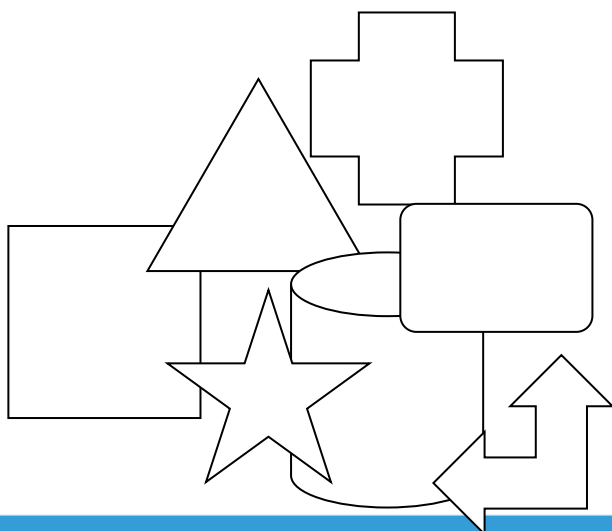
The colored part of the flower, the snow crystal - a petal

1. The underground part of the plant, the edible part of the carrot -
2. Red in the meadow, ground for dough -
3. To TV, plane -
4. The opposite of war, at home -
5. In the mouth, English, German -

E.t.c.

Exercise on visual-spatial functions

Redraw a figure in a different color separately



Examples of physical and breathing exercises

TOPIC	ACTIVITY	DOSAGE	METHODOLOGICAL SUGGESTIONS	AIDS
Exercises to strengthen the muscles and improve the mobility of the upper limbs.	Sit on the stool, ULs shrunken, hands clenched Movement: extend ULs forward with fingers extended.	Maximum 10 repetitions	The posture during the exercise should be upright. Perform the exercise at a slow pace, adapted to the practitioner's abilities.	—
	Sit on the stool, UL shrunken, hands clenched Movement: Inhale with ULs rise and fingers extended, return to starting position (PW), exhale.	Maximum 10 repetitions	The posture during the exercise should be upright. We inhale with our nose and exhale with our lips for a longer time.	—
	Sit on the stool, ULs hang along the torso. Movement: Alternating ULs swings, ULR straight elbow up, ULL tilted backward, change.	Maximum 20 repetitions	Swings should be performed at a slow pace, adjusted to the practitioner's abilities.	—
	Sit on the stool, ULs hang along the torso. Movement: Raise the ULs sideways up - inhale, return to the starting position - exhale.	Maximum 10 repetitions	Perform the exercise at a slow pace. Inhale through the nose, prolonged exhalation through the mouth	—
	Sit on the stool, ULs hang along the torso. Movement: backward circulation of the ULs in the straightened elbows.	Maximum 15 repetitions	Perform the exercise at a slow pace, adapted to the practitioner's abilities..	—
Back muscles shaping exercise	Sit on the stool, ULs on your hips. Movement: Turn the torso to the right, ULs to the side, return to the starting position, repeat to the left side.	Maximum 15 repetitions	The posture during the exercise should be upright.	—
	Sit on the stool, ULs hang along the torso, ULs straight at the knees. Movement: 1. Raise of the straightened ULs 2. Bend forward with an attempt to reach for the feet.	Maximum 10 repetitions	—	—



Breathing exercise	Straddle position, ULs along the torso. Movement: 1. Raise the ULs along with the inhale 2. Incline 3. Return to SP with exhalation	Maximum 10 repetitions	Perform the exercise at a slow pace, adapted to the practitioner's abilities. Inhale through the nose, prolonged exhalation through the mouth	—
Back muscles shaping exercise	Straddling position, ULs hang down along the body. Movement: Salty torso right and left.	Maximum 10 repetitions	—	—
Balance and stabilization exercises	Straddle position, ULs on the hips. Movement: Circulation of torso to the right, then to the left.	2 minutes	Perform the exercise at a slow pace, adapted to the practitioner's abilities.	—
	Basic position, ULs on the hips. Movement: Walk with knees raised	3 minutes	During the exercise, try to maintain balance, perform the exercise at a slow pace.	—
	Straddle position, ULs on the hips. Movement: Standing on one leg, raise the other straight leg to the side, make circles.	Maximum 10 repetitions	If it is possible, we try to make circles in the lifted LL, if it is impossible, it is enough to lift it.	—
Breathing exercise	Straddling position, ULs hang down along the body. Movement: Raise ULs forward with inhalation, return to SP with exhalation	Maximum 10 repetitions	Inhale through the nose, prolonged exhalation through the mouth	—
Exercises to strengthen the muscles and improve the mobility of the upper limbs.	Straddling position, ULs hang down along the body. Movement: Circulation of the UL's elbows, straightened, back and forth.	2 minutes	Circulatory movement should be as extensive as possible.	—
Handling the upper limbs	Sit in a chair facing each other approximately 1 meter away. Grasp the gym cane with both hands Movement: Joint "screwing and unscrewing" movement.	Maximum 10 repetitions	—	Gym cane
Improving the functions of the whole body, useful for example when getting dressed	Sit in a chair facing each other approximately 1 meter away. Grip the jumping rubber with both hands. Movement: Simultaneous lifting of the rubber, putting it successively: behind the head, back, under the buttocks, under the feet. Inhale, raise the gums again and repeat the steps.	Maximum 10 repetitions	—	rubbers



Inspiratory muscle training	Sit on the chair at the table. Movement: The person "sucks" air through the straw while moving the foam elements from one to another designated location.	Maximum repetitions	10	Preparation of straw and light foam elements.	Straw, light foam elements.
Activation of the hip, knee and ankle joints, strengthening the muscles bending the hip and knee joints, stretching the iliopsoas muscles	Standing in front of the chair leaning against the wall, hands resting on the wall at shoulder height. Movement: Alternating feet positioning on the chair seat.	Maximum repetitions	10	In order to increase the difficulty of a motor task, a given exercise can be performed without resting the hand against the wall, but only in a situation of good balance or with the assistance of a caregiver.	----
Strengthening the muscles of the legs, lengthening the lumbar spine	Standing position facing the back of the chair, hold on the backrest Movement: Half-squats or full squats with lengthening of the lower spine. Return to starting position with a breath.	Maximum repetitions	10	—	—
Improving the movements of the spine and shoulder girdle, activation of the respiratory system	Sit in a chair facing each other approximately 1 meter away. Grasp the gym cane with both hands. Movement: One person pulls the stick towards the chest with a slight torso tilt (inhale), while the other person leans forward with arms extended (exhale). The feet are still resting on the ground.	Maximum repetitions	10	The movement is like sawing a tree by two people.	Gym cane
Improvement of neuromuscular coordination and activation of the lower limbs	Sit on a chair facing each other 1-2 meters away. Movement: Pass the ball with a rolling motion with only your legs.	Maximum repetitions	10	The movement is like sawing a tree by two people. Preparing a soft ball on the floor. You can play goal-scoring by putting material around the three sides of the chair. An empty wall forms a goal.	Balls

UL – upper limbs

ULR – upper limb right

ULL – upper limb left

LL – lower limbs

SP – starting position

Exercise activating the participants

An example of an activating exercise for training participants.

Objective: an attempt to diagnose resources and needs in the care system for dependent people.

Participants fill in as they see fit, and then the facilitator starts a discussion during which participants share their observations.

What is missing, and what should be?	What is present and shouldn't be?

Improving practical skills

Practical classes suggestions:

1. Demonstration of daily gymnastics (including respiratory) for dependent people in various age groups with various deficits, using available items.
2. Presentation of facilities for the elderly and instructions on how to use them
<https://www.taniomania.pl/s/?search=pomoce+seniora&order=popularity&page=2>
3. Practical training to secure a disabled person while walking
4. Practical learning of assistance in transferring from a wheelchair to a chair (in training conditions). At home, this skill will be useful when switching from a wheelchair to a toilet and from a wheelchair to a bed
5. A set of exemplary exercises for memory, concentration, visual-spatial functions, language functions, abstract thinking
6. Demonstration of the safety rules of a dependent person in public space
7. Choosing the right outfit for the weather conditions and the type of activity (comfort and aesthetics)
8. Fast, proven, easy and healthy meal recipes.
9. Principles of a good night's sleep.

Annex

MODULE 1

Which of the following statements are True or False?

Statements	True	False	
Question 1 The needs assessment is a process that will...			
1. Describe the state of health of the individual requiring ongoing care.	True		
2. Enable the identification of the major risk factors and causes of ill health.	True		
3. Enable the identification of the actions needed to address these risk factors.	True		
4. The needs assessment process is a one-off activity		False	
Question 2 Needs assessment will enable the Home Careworker to...			
5. Effectively plan and deliver the most appropriate care to those individuals with the greatest needs.	True		
6. Will stop continuous need for further training		False	
7. Support the application of the principles of equity and social justice in practice.	True		
8. Ensure that scarce resources are allocated where they can support the maximum health benefit for the individual and the care providers.	True		

What is Profiling? You can choose more than one statement.

- o Collection of relevant information that will inform the Home Care worker about the state of health and health needs of the individual requiring the care. **Yes**
- o Is a process of analysis that will identifying and major and immediate health issues? **Yes**
- o Profiling supports the deciding factors of priorities for action to be taken. **Yes**
- o Will support any Planning public health and health care programmes that will address any priority issues identified **Yes**
- o Profiling will not support the implementation of any planned activities and will evaluate health outcomes. **No**

What is the acronym of SMART?

- Specific/Measurable/Achievable/Realistic/Time **Yes**
- Specified/Measurable/Achievable/Realistic/Time **No**
- Specified/Measurable/Attainable/Time **No**
- Specific/Measurable/Attainable/Time **No**

“When you are planning your care of a patient, what makes a good health assessment?”

- Patients’ perception of their own needs? **Yes**
- The views of carers and family members? **Yes**
- Social and psychological needs as well as physical needs? **Yes**
- There is not the need to involve other professionals in care. **No**

The module is directly based on practical participation through role plays, discussion, and peer learning. There are also a number of forms to complete and discuss that will could be used in the field of duty.



MODULE 2

Note: Only the answers which have concrete results are stated below. Other questions and statements are based on the personal experiences and initiatives of learners. Trainers may take into consideration this statement during the evaluation process.

UNIT 1 – Home Care Recipients in Focus

	Yes	No
Old people will probably be the greatest users of home care.	x	<input type="checkbox"/>
The 2nd relatively large group, which needs home care, consists of adults ages 18 to 49, often with mental illness.	x	<input type="checkbox"/>
The most common disabilities occurring in children are learning disabilities.	x	<input type="checkbox"/>
Speech problems are not common early in life.	<input type="checkbox"/>	x
Learning disabilities are more likely to arise later in childhood.	x	<input type="checkbox"/>
Among the adult recipients of care, approximately 80 % are age 50 or older and have mostly age-related disabilities	x	<input type="checkbox"/>
Chronic illnesses don't affect mental health	<input type="checkbox"/>	x

Unit 2:

	Yes	No
Active listening skills are important to communicate with the client, family, and other members of the health care team.	x	<input type="checkbox"/>



Communication barriers could include vision, hearing, speech, and language disorders. x

Using tone, verbal, and non-verbal communication that demonstrates respect, promotes the home care recipient's dignity, and is culturally appropriate. x

Proficiency incomprehension of the language, including verbal and written communication is not of great importance in the home care sector. x

Applying all home care activities in accordance with laws, regulations, policies is not a great deal of importance. x

Applying all home care activities in accordance with confidentiality issues, and ethical codes is a great deal of importance. x

If possible, independence of home care recipients should be promoted. x

The individual's rights to privacy respect and dignity must not be considered in every practice. x

The procedures necessary to maintain a safe environment and minimize risks should be identified. x

It is not important for home care applications to adhere to infection prevention and control principles. x

Home care workers must possess first aid knowledge. x

Age-appropriate care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must be provided. x



Individualized care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must not be provided. x

Person-centered care, with a focus on physical, psychological, social, emotional, cognitive, cultural, and spiritual support must be provided. x

Safety and security should be provided for household works. x

MODULE 3

Which statements are true, which are false?

	True	False
Home care services are provided only in public sector		x
Practices for homecare services have different standards among public and private sectors	x	
Community health centers are private home care institutions		x
Security risk in the home environment of the caregiver is a problem faced in public home care sector		x
Qualification and competence of the personnel of a public home care worker is more important than a private home care worker		x
To be compassionate and patient is enough to become a caregiver		x
Effective communication skills is the most important feature of a caregiver	x	
Private home care companies might have insufficient teams	x	
Social Welfare centers are an option to work as a caregiver in public sector	x	



In private hospitals there are a full range of home health care services a patient can receive	x	
Basic security and health knowledge is enough to become a caregiver		x
Unlicensed companies that employ illegal workers is a risk factor in the private home care sector	x	
Continuity is an essential element in home care service	x	
In care services, the effectiveness of local administrations, non-governmental practices and private sector services has decreased in recent years		x

MODULE 4:

Which statements are true, which are false?

	true	false
Home care is however hires someone to take care of their home	<input type="checkbox"/>	<input checked="" type="checkbox"/>
To take care of someone I don't need to have any prior training	<input type="checkbox"/>	<input checked="" type="checkbox"/>
There are different types of adult care	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As a low skilled adult it is easier to start as a self-employer	<input type="checkbox"/>	<input checked="" type="checkbox"/>
It is important to have a good team work behind the first experience as a home care worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Home care sector has tendency to disappear	<input type="checkbox"/>	<input checked="" type="checkbox"/>
As a home care worker I don't need to clean the patient's house	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Patient, courage and responsibility are three important characteristics to have in this job	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Is geriatric care training an essential to take care of someone	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nursery is a strong training needed for home care	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In home care I just have to take care of elderly	<input type="checkbox"/>	<input checked="" type="checkbox"/>
I can work as a self-employer in home care	<input checked="" type="checkbox"/>	<input type="checkbox"/>
I have to set priorities to organize the tasks to do	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cleaning dishes and the toilet can be tasks included in my job	<input checked="" type="checkbox"/>	<input type="checkbox"/>



	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Flexibility and being able to adapt is essential in this field	<input checked="" type="checkbox"/>	<input type="checkbox"/>
The family is able to call you whenever they want, and you have the responsibility to answer.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Communicating with the patient's family is an important task	<input checked="" type="checkbox"/>	<input type="checkbox"/>
There are different tasks that must be done. Keeping track of the patient's behavior is one of them.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
As a home care worker, you will face different tasks everyday	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Home care workers have to be able to prioritize their mental health to take care of a third person	<input checked="" type="checkbox"/>	<input type="checkbox"/>



Module 5 – Questionnaire with answers

1. PRE – TEST

Which statements are true, which are false?

	true	false
An entrepreneur is an businessman/businesswoman.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/>		
The liability with private assets is an advantage of being self-employed.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<hr/>		
The possibility to choose working hours and working environment by yourself is an advantage of being self-employed.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/>		
A prerequisite for being successfully self employed is that family and friends also want to work in the company and help for free.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<hr/>		
A professional prerequisite for being successfully self employed is that one has learned the profession and knows the industry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Complexity and a high financial risk make a good idea.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<hr/>		
The legal requirements for incorporation are the same throughout Europe.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<hr/>		
Information on the legal requirements for setting up a business can be obtained from various institutions, such as the chambers of commerce and industry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>



A business plan is a written business concept.

Independent home care workers should have a founding will, committment, empathy, communication skills, organizational talent and mental and physical endurance.

To be an independent home care worker you need a training as a certified nurse.

In accounting, business transactions (purchases, sales, etc.) are recorded with the help of documents.

Correct accounting is enormously important, as important key figures and information, such as tax liability, are calculated from it.

The law defines exactly who may or must use which accounting system. This differs from country to country.

If a company has high costs, it makes a loss.

A company makes a profit when the sales revenue is higher than the costs.

Fixed costs are those costs that are incurred irrespective of the production and sales



volume or the services provided.

Direct costs can be directly allocated to an individual product or service.

The place where suppliers and demanders meet is the market.

The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas must be carefully coordinated with each other.

The product and assortment policy involves setting prices for individual products or the entire assortment.

Price plays a particularly important role in the purchase decision. The price-performance ratio for the customer must be right.

Advertising means the same as communication policy.

Time management means using time in a structured and goal-oriented way.

An appointment is a set time when something takes place or needs to be done.



Fixed dates cannot be postponed and always take place once.



The collective term documents basically refers to all objects that provide information either on paper or in electrical data form.





2. POST – TEST

→ Blue marked questions/answers for pre-post-test check!

1. Which of these statements apply to the term entrepreneurship?

- An entrepreneur is an businessman/businesswoman.
- An entrepreneur is risk-averse but hard-working. He fulfills requirements but does not want to go beyond them.
- Entrepreneurs are innovative, eager to perform, and willing to take risks.
- Entrepreneurship only applies to companies with at least 150 employees.
- Entrepreneurship describes an entrepreneurial spirit.
- Companies increasingly want employees to act like entrepreneurs.

2. What are the advantages of being self-employed?

- Liability with private assets
- High time expenditure
- Working hours and working environment can be chosen by yourself
- Ideas can be realized
- Profits remain to oneself

3. What professional and personal prerequisites do entrepreneurs need to have in order to be successful?

- Personality: An entrepreneurial personality has a certain profile, such as a willingness to take risks and apply oneself, the ability to motivate, the ability to make contacts, and the pleasure of thinking and creating independently.
- Expertise: One has learned the profession and knows the industry.
- Environment: Family and friends also want to work in the company and help for free.



- Environment: Family and friends support the decision to start up and the timing of the start-up is appropriate for personal life planning.
- Expertise: One has founded a company before and knows the rules.
- Personality: An entrepreneurial personality has a certain profile, such as weakness in decision-making or fear of risk.

4. What makes a good idea?

- Customer benefit and USP (=Unique Selling Proposition)
- Feasibility
- Clarity and profitability
- Complexity
- High financial risk

5. Which of the following statements are true and which are false?

	true	false
The legal requirements for incorporation are the same throughout Europe.	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<hr/>		
The legal requirements for incorporation can vary greatly depending on the country in which the incorporation is to take place.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Information on the legal requirements for setting up a business can be obtained from various institutions, such as the chambers of commerce and industry.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Legal requirements can be e.g. the following: citizenship, capacity to act, qualification certificates or insurances.	<input checked="" type="checkbox"/>	<input type="checkbox"/>



6. Which of the following statements are true and which are false?

true false

As a self-employed entrepreneur, you do not have to take care of insurance yourself. This is done by the responsible chamber of commerce.

×

There may be insurances, such as social security or professional liability insurance, that are mandatory to take out. This depends on the country in which a company is established.

×

Entrepreneurs must know themselves which insurances, duties or taxes have to be paid. The use of assistance from external consultants is not permitted.

×

In some countries and industries, membership in a chamber of commerce or industry is mandatory. These membership fees must also be taken into account in the financial plan.

×

7. Which of these statements apply to a business plan?

× A business plan is a written business concept.

A business plan must always look the same and must never be adapted for a particular institution or bank.

× The business plan is an important planning and control tool for entrepreneurs.

The business plan is only important for the foundation, after that it can be destroyed.

A business plan is written exclusively for banks or funding agencies.

8. What should be included in a business plan? Select the correct answers.



- × Exact description of the company organization and goals
- × Marketing and sales - pricing, distribution channels
- × The product or service is described, customer benefits and unique selling proposition must be elaborated
- × Time and financial planning - when is what planned?, capital requirements, subsidies
- × Executive summary - brief overview of the company and objectives

9. What personal requirements should independent home care workers have?

- × Founding Will & Commitment
- × Empathy
- × Communication skills
- Stress susceptibility
- × Mental and physical endurance
- × Organizational talent

10. What professional qualifications do independent home care workers need?

- Training as a certified nurse
- × Basic knowledge in the areas of accounting and cost accounting
- × Training in nursing and health care, depending on which activities are performed
- A minimum of 20 hours of training in business administration
- × Basic marketing knowledge

11. Put the step-by-step guide in the right order

1. Think hard about why you want to be self-employed or why you prefer self-employment to employment.



2. Discuss your plan with your private environment
3. Concretize your plans
4. Clarify the legal requirements and seek advice
5. Create a business plan
6. Get help from experts if needed
7. Make a decision
8. Complete all formalities
9. Start full speed and keep the overview
10. Stay on the ball and don't let small hurdles throw you off track!

12. Which of the following statements are true and which are false?

true false

In accounting, business transactions (purchases, sales, etc.) are recorded with the help of documents.

The income-expenses statement is internationally recognized and can be used in any country, without regard to country-specific requirements.

The law defines exactly who may or must use which accounting system. This differs from country to country.

Correct accounting is enormously important, as important key figures and information, such as tax liability, are calculated from it.

13. Which statements regarding the income-expenses statement are true and which are false?



true false

Even if you are not legally obliged to keep accounts, it is advisable to at least keep an income and expenditure statement in order to keep track of your finances.

The income-expenses statement is based on the inflow/outflow principle. This means that, in principle, only payment flows (income and expenses) are used to determine profit.

The inflows and outflows represent the business cases. These are recorded on an ongoing basis and sorted systematically and chronologically.

In the income-expenses statement, revenues and expenses are recorded according to the time of actual payment.

14. It is the first of the month and Mr. Doe is sitting in front of his accounting for the last month. He finds the following invoices and receipts in his documents: a fuel bill of 45 EUR, a fuel bill of 20 EUR, an invoice from the last family shopping trip to the grocery store of 60 EUR, an invoice from his son's toy of 10 EUR, an invoice of 125 EUR for the new shoes and T-shirts he needs for work, and a small invoice of 20 EUR for the office supplies he needs for accounting. In the documents he also finds the invoice of 75 EUR for the order from the pharmacy online store, where he ordered bandage material. He should have transferred the money last month, but unfortunately he forgot to do so. He quickly pays the bill. He also finds the direct debit for the health insurance in the amount of EUR 120 on his bank account. He received 1500 EUR from his customers last month.

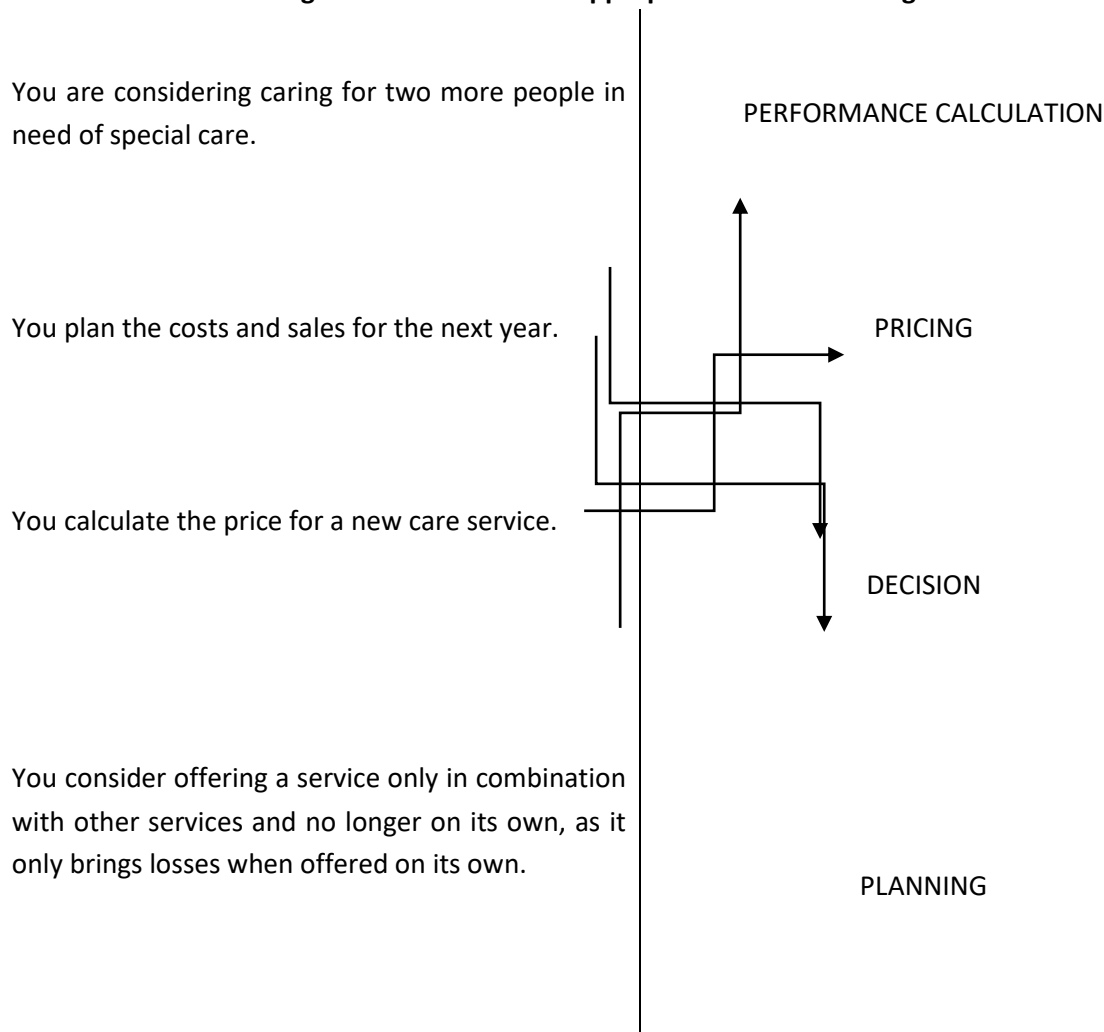
What is Mr. Meier's profit this month?

- EUR 1,025
- EUR 1,170
- EUR 1,095
- 1,100 EUR

15. May this profit be spent 1:1 privately by Mr. Meier?

- Yes, this sum is the profit left for Mr. Meier from this month. This money may be spent.
- No, this money should not be spent 1:1. After all, Mr. Meier also has to pay taxes on his income. The tax payments must also be covered, which is why part of the money must be kept for these payments.

16. Match the following statements with the appropriate cost accounting tasks.



17. Choose the correct statements.

- A company makes a profit when the sales revenue is higher than the costs.
- The total earnings from the sale should cover all the company's costs.
- When all costs are covered, the company makes a profit.
- If a company has high costs, it makes a loss.

18. A common definition of the term cost is:

Costs are incurred when products and services are **created**. Costs are the **value** of all goods and services in an **accounting period** that are consumed to produce the operating output.

19. Use the right types of costs.

Direct costs can be directly allocated to an individual product or service.

Fixed costs are those costs that are incurred irrespective of the production and sales volume or the services provided.

Overhead costs are not directly related to the individual products and services and can only be indirectly allocated to them.

Variable costs are volume-dependent costs that change as a result of the production and sales volume or the service offered.

20. Who can answer the following questions? The accounting department or the cost accounting department?

	Accounting	Cost accounting
Did the customer John Doe pay his invoice in cash or by bank transfer?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
How much does a 3-hour home care session with Ms. Doe cost?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has the bill for the new work clothes already been paid?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
How high must the price for a new service be?	<input type="checkbox"/>	<input checked="" type="checkbox"/>



21. Highlight all the topics of marketing.

- How long is the procurement process?
- How do the goods get to the customer?
- How is thorough marketing planning done?
- Who is my supplier?
- Who is my target group?
- How do I advertise?
- Which needs can I cover?
- What are my core competencies?
- What should be the price?

22. What terms are we talking about here?

The place where suppliers and demanders meet: **market**

The provider is also named: **seller**

The demand party is also named: **buyer**

The generic term for all the activities that the seller must set to meet the buyer in the market:
marketing

23. Which of the following statements are true and which are false?

true false

The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas must be carefully coordinated with each other.

The marketing mix describes the totality of all activities defined to achieve the marketing objectives. It is divided into four areas: Product policy, pricing policy, distribution policy and communication policy. All areas are to be considered



independently of each other and do not have to be coordinated.

The marketing mix describes the totality of all advertising measures defined to achieve the marketing objectives.

The marketing mix describes the totality of all measures defined to achieve the marketing objectives in order to keep the costs of advertising as low as possible.

24. What are the terms of the 4 P's called in "language of partner countries to be inserted"?

product: _____

price: _____

place: _____

promotion: _____

25. Mark the correct statement(s) about product policy.

- Product policy concerns all decisions that affect the product or service itself.
- The assortment policy concerns the company's decision on how the overall range of goods, materials and services is designed.
- Decisions on product design, quality, packaging, brand, size, etc. are not made via product policy.
- The product and assortment policy involves setting prices for individual products or the entire assortment.

26. Mark the correct statement(s) about pricing policy.

- The sales price is the basis for the turnover and survival of a company.
- Prices set only according to economic criteria.
- Price plays a particularly important role in the purchase decision. The price-performance ratio for the customer must be right.



- × When setting prices, three perspectives must be taken into account - economic aspects, psychological aspects, and the competition.

27. Complete the following text with the correct words.

Distribution means _____ (*processing / **dispatch** / sales*). It is about all measures that are set to overcome space and time between consumer and _____ (*manufacturer / customer / authorities*). The distribution policy of the company decides on which _____ (*rails / trucks / **ways***) the product is distributed. The main tasks are the _____ (***organization** / visualization / authorization*) of the distribution channels, the choice of the location of the company and the means of transport.

28. Which of the statements about communication policy are true?

- Communication policy deals only with internal communication processes.
- Advertising means the same as communication policy.
- × All measures that proclaim the messages of marketing are called communication policy.
- × Communication policy is part of the marketing mix.

29. Which of the following measures are part of the communication policy? Mark the correct statement(s).

- × Advertising
- × Personal sale
- Direct Sales
- Portfolio analysis
- × Fairs, Events, Sponsoring
- Offer measures
- × Public Relations
- × Sales promotion



- Differentiation

30. Put the statements in the correct order.

1. Ms. Doe has an appointment for a personal sales meeting with a new customer.
2. Upon arrival, there is a short greeting and the two ladies have a lively chat.
3. Afterwards, Ms. Doe analyzes the need of the lady together with the lady. The lady tells Ms. Doe what care she needs and what she expects from Ms. Doe.
4. Afterwards, Ms. Doe presents her services and explains to the lady which care and nursing services she can offer her.
5. The lady is so enthusiastic that she immediately hires Ms. Doe and gives her the job.

31. Which of these statements apply to time management?

- Buffer times should not be planned, this tempts you to dawdle.
- ✗ The Eisenhower principle divides tasks according to urgency and importance.
- ✗ The ABC analysis helps to set priorities in time management.
- Tasks that are not important and not urgent should be delegated according to the Eisenhower principle.
- Time management is only for top managers.
- ✗ Time management means using time in a structured and goal-oriented way.

32. You would like to organize a barbecue tomorrow afternoon and still have a few things to do for it. Apply the Eisenhower Principle to the subtasks below.

Tasks	Actions
1 Walk the dog	A Plan it for tomorrow
2 Invite friends	B Delegate task
3 Do the grocery shopping	C Do not fulfill the task
4 Wash the curtains	D Fulfill the task on your own

	Important	Not important



Urgent	2 D	1 B
Not urgent	3 A	4C

33. You will find statements about scheduling here. Tick whether the statements are true or false.

true false

Flexible dates must be added to the calendar at the beginning of the year.

×

New appointments should be added collectively into the online calendar at the end of the week.

×

Appointment management can no longer take place only in the classic calendar, but also online via computer, smartphone or tablet.

×

For scheduling purposes, the background of the appointment is meaningless.

×

An appointment is a set time when something takes place or needs to be done.

×



Fixed dates cannot be postponed and always take place once.



Fixed dates cannot be moved, are often recurring, and should be scheduled as early as possible for the entire calendar year.



34. Choose the correct statements.

- The collective term documents basically refers to all objects that provide information either on paper or in electrical data form.
- Documents are contracts or invoices that are available in paper form.
- Documents with sensitive content must be disposed of properly so that the content can no longer be reconstructed.

35. Which of these statements apply to filing systems?

- Stapled filing takes more time, but is more secure.
- Individual files comprise only a single process and all associated documents.
- Loose-leaf filing is particularly simple and is therefore especially suitable for large, extensive quantities of documents.
- In the collective file, documents from many similar processes come together.



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