M-CARE

Mobile Training for Home and Health Caregivers for People with Disabilities and Older People

Introduction to M-CARE-Curriculum

WP number	WP3
WP title	Curriculum
Status	Final
Version	V9-EN
Project start date	01/01/2014
Project duration	24 months
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For further information related to the M-CARE project please visit:

the project website (http://mcare-project.eu);

Facebook page (facebook.com/MCareproj);

Twitter page (twitter.com/MCareproject).

Content

1. Definition of the term curriculum in the context of M-CARE project

The term curriculum refers to lessons and content taught in a school or in a specific course or program. Curriculum typically refers to the knowledge and skills learners are expected to learn, which includes learning standards, learning objectives and learning outcomes as well as methods and advice for learning material to be used. (http://edglossary.org/curriculum/, 30.01.2015)

In accordance with ECVET principles, M-CARE curriculum is a learning outcome driven curriculum.

1.1.   Aims of M-CARE Curriculum

This curriculum aims to improve the daily work and its performance in personal caregiving for people with disabilities and elderly people. Drafted upon experience of project partners, a survey was launched with more than 600 questionnaires, asking people with disabilities, personal caregivers and stakeholders, what they estimate as the most important items, a personal caregiver PCG has to know, to be able to do, to decide and to be responsible for. In the result an approach was decided following the rules of International Classification of Functioning ICF.
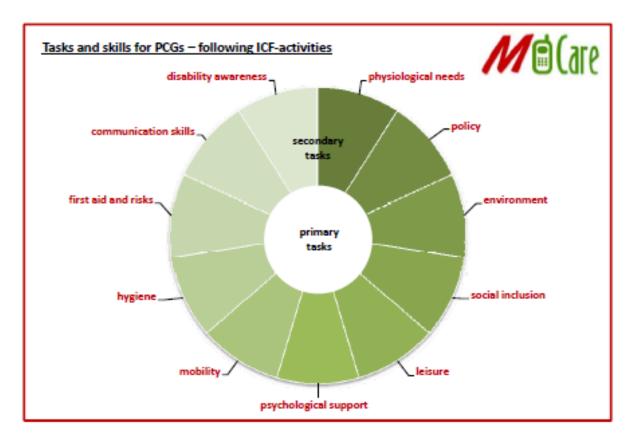

Figure 1: following the rules of International Classification of Functioning ICF

 "The International Classification of Functioning, Disability and Health", known more commonly as ICF, is a classification of health and health-related domains. As the functioning and disability of an individual occurs in a context, ICF also includes a list of environmental factors.

To define the context for the Personal caregiving Course, we defined a set of secondary tasks that are aligned with the ICF's environmental factors. A PCG should be able to implement these secondary tasks in a proper manner in order to support a person with disabilities.

This curriculum contains the guidelines, content and tools for the PCG trainer, as well as the training material for the (potential) personal caregivers that support people with disabilities and elderly people. The final outcomes should be that PCGs will support their clients in an emphatic and appropriate manner.

1.2.   Target Groups for this Curriculum

The basic idea of M-Care-project is, to enable low-skilled and/or unemployed people to work as a personal caregiver PCG. Caused by that two challenges have to be faced:

1. Low-skilled people need a special approach to learn and to be taught. This means the content has to be prepared in a very simple and very easy comprehensible way. This refers especially to the methods and the mode, information has to be prepared for this teaching process.
2. A good choice of indispensable content has to be found to cover the standards of caregiving for people with disabilities and elderly people, the individual needs of the cared person and the learning objectives and outcomes of a PCG.

Another target group are experienced personal or professional caregivers who want to find special information i.e. on technical subject or new assistive technology etc.

The third target group are the cared persons (beneficiaries – people with disabilities, elderly people), who want to be sure, that their PCG knows what and how he/she has to act as a responsible caregiver.

2. Recognition and Validation of competences: EQF and ECVET

Learning how to care about a person with disabilities or an elder person is an important prerequisite to do the job. But especially for the target group of low skilled people it will be the starting point of a personal career.

To make learning a part of a system and not to a single act, a number of European tools for vocational training have been established, such as EQF and ECVET. In M-CARE we have linked the training content to the EQF and ECVET frameworks as is illustrated in Appendix 1.

2.1.   EQF - the European Qualifications Framework

"EQF is a translation tool that helps communication and comparison between qualifications systems in Europe. Its eight common European reference levels are described in terms of learning outcomes: knowledge, skills and competences. This allows any national qualifications systems, national qualifications frameworks (NQFs) and qualifications in Europe to relate to the EQF levels." (Learning opportunities and qualifications in Europe: http://ec.europa.eu/ploteus/search/site?f[0]=im_field_entity_type%3A97).

M-CARE curriculum is addressing level 2 of EQF. "Level 2" is defined as follows:

> *Be in possession of competences for the professional fulfilment of basic requirements within a clear and stably structured field of study or work. Fulfilment of tasks takes place largely under supervision*
>
> *Knowledge - basic factual knowledge of a field of work or study;*
>
> *Skills - basic cognitive and practical skills required to use relevant information in order to carry out tasks and to solve routine problems using simple rules and tools;*
>
> *Competence - work under supervision and in clear structures with some autonomy.*

Much more important than the level obtained is the experience to achieve occupational goals by taking part in a learning activity and so to have the opportunity to get a guideline for the own occupational future and to see which value is given by attending courses.

2.2.   EQF and NQFs

If EQF is a translation tool for European levels of vocations and occupations, National Qualification Frameworks NQFs are the transferred rules, adapted to the national vocational training systems.

All participating countries, have already started to implement their NQF.

Common for all National Qualifications Frameworks is a description for *Knowledge* and *Skills.* The difference is in the definitions of what in EQF is described as *Competences*. Whilst Greece includes all the different headlines into one description and distinguishes Knowledge, Skills, Responsibility and Autonomy, Bulgaria distinguishes the "competence"-part into 4 different fields of "Autonomy and responsibility", "Learning competences", "Communicative and social competences" and "professional competences".

But independently from those distinctions, the requirements to achieve a certain level are very near and comparable. This is an important prerequisite to make learning results within the M-Care-framework comparable and also transferable within Europe.

2.3.   Why it is important to refer to EQF and NQF

EQF and NQF give information on the degree of knowledge and autonomy a person has and this will help i.e. a person with a disability to hire a PCG or not (see Appendix 2).

To assure this information there are helpful European tools for vocational education and training such as EUROPASS, EQF and ECVET – and especially within the so called "ECVET-toolkit". Within this Curriculum we try to describe very detailed and completely which Knowledge, Skills and Competences a participant may achieve, when following the M-Care-course modules and passing the M-Care-assessment process, so called M-Care-quizzes.

Describing the PCGs learning outcomes is an important step for the PCG to transfer his/her achievements to a job or to a next step in the lifelong learning process.

Within the framework of the M-CARE mobile learning process there are indicators for estimating and recognizing the "weight" of learning units and the valour of the learning outcomes. Nevertheless, it is very helpful, to get an idea about what ECVET is and how ECVET can help to build a personal career i.e. in a lifelong learning-process, with stops and goes and detours.

2.4.   M-CARE consortium going to ECVET-path

To award ECVET-points and especially to recognize learning-outcomes as part of a recognized occupation, several steps need to be followed, completed and validated. CEDEFOP gives an overview in its booklet "Necessary conditions for ECVET implementation" (Luxembourg 2012, p.12) and shows 15 conditions, addressed to very different partners. The picture shows, that the M-Care-consortium is capable to assure only 4 of them – but here we can prove, that the ECVET-approach is possible and that ECVET-practice can be done now:
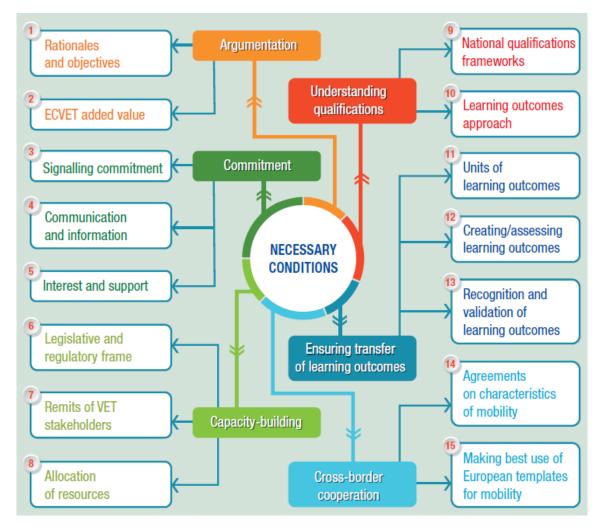
Figure 2: Necessary conditions for ECVET implementation (Source: Necessary conditions for ECVET implementation" (Luxembourg 2012, p.12)

2.5.   Overview on necessary conditions for implementing ECVET

Related to M-CARE we support a range of necessary conditions for ECVET implementation.

2.5.1.   Signalling commitment (condition 3)

M-CARE partners have committed to assure high quality contributions to the mobile PCG course modules, which are practically oriented, containing elaborated learning units, leading to understandable and useful learning outcomes. This ensures that the target groups are well-prepared for the use of this mobile training and to assure professional quality.

2.5.2. Units of learning outcomes (condition 11)

Training content has been arranged in thematic modules and units, and indicate the knowledge, skills and competences to be acquired.

2.5.3. Creating / assessing learning outcomes (condition 12)

Each module also has a (self-)assessment in quiz format to validate whether the participant has correctly understood the work associated with daily PCG-work.

2.5.4. Making best use of European templates for mobility (condition 15)

M-CARE embraces a blended course approach, with face-to-face-courses, learning at the workplace and continuous support through mobile learning.

The course is divided into 14 modules and every module contains a different number of units. The module-description gives the number of hours, needed by an average learner as a "workload". Additionally a number of ECVET-points is mentioned to indicate the time and learning activity required in the framework of an officially recognized course. The module-description gives also information on the title, the learning goals and the content of the module.

After having piloted the course, European templates such as EUROPASS, ECVET-toolkit and description of learning outcomes have been introduced and became part of the setting for M-Care-training. As such, M-CARE acquired skills and competences can be added e.g. to the Europass.

2.6. Recognition and Mobility of M-CARE PCGs across Europe

The project achieved its goal within the duration of a 2-years project to establish recognition of their knowledge, skills and competences that provide them with the opportunity for mobility across Europe. For this reason also, every training organisation should issue certificates to all participants who successfully passed the final post-assessment.

3. The content of training materials:

All content of the M-CARE curriculum is divided into units and modules (see Appendix 3). This appendix provides a synopsis of the modules, the recommended teaching and learning duration and the recommended previous knowledge for passing a module.

3.1.   Definition "Unit"

Unit of learning outcomes means a component of a qualification, consisting of a coherent set of knowledge, skills and competence, which can be assessed and validated

3.2.   Definition "Module"

Modules are a coherent bundle of learning-units bound together under a common subject matter. They allow the learners to choose when and in which order they will pass a certain subject and to follow the needs in their job, so they don't have to follow their course straight-line but more flexibly.

That means almost every module can be taken by itself and normally there is no need to have formally passed another module before. All modules together give a sample of a professional entity, called "Personal Caregiver". This entity covers the individual needs of persons to be cared following the ICF-systematics.

There are however some prerequisites to be fulfilled before working as a "Personal Caregiver". More specifically, we suggest to make sure that all the objectives mentioned in module 2 "Disability awareness" and 4 "Policy" are clearly understood by the future caregiver.

4. Personal Caregiver as an occupation

"Personal Caregiver – PCG" is not an approved occupation in all of the participating countries, but it is near to different sub-occupations held by VET-providers or VET-providing institutions to prepare people for their caregiving job.

This curriculum is a way to make very transparent what is held important or even comprehensive to do as personal caregiver, with deep respect to the client (cared person). Independently from an official recognition of the qualification "PCG", the clear description of Knowledge, Skills and Competences, acquired by learning and working in the field, helps to ensure the required level of PCGs competences.

Our M-CARE training curriculum is in accordance with ECVET principles and is a learning outcome driven curriculum.

For each unit an assessment is prepared so a learner will be able to check, whether the objectives and core points of this module are achieved or not, regarding knowledge, skills and competences.

At the end, when having assessed all units a certificate is given by the responsible training institution. This offers a good feedback for the learner and also a help for the clients who want to employ a suitable PCG.

4.1.   Reference occupations for PCG

Reference occupation for this M-Care-course for PCGs have been identified by all partners.

Table 1: Reference occupation for PCGs

English	German	Turkish	Bulgarian	Dutch	Greek
Assistant for housing groups and groups in Clinics	Wohn-gruppen-Assistent	kişisel bakım veren	личен асистент болногледач	Persoonlijke assistent	προσωπικός βοηθός
Neighbour-hood assistant	Nachbar-Schafts-Helfer			Persoonlijke zorgverlener	
Family assistant	Familien-Helfer		социален асистент	Mantelverzorger	
Assistant for people suffering from Alzheimer	Demenz-Begleiter				

The working field of PCGs[1]:

Table 2: Working field of PCGs

Care- support- assistance- Services		
Housekeeping activities	Activities to support daily life of care-recipients	Care-activities (Nursing)
i.e. - Preparing meals - Cleaning and tidy up - Housekeeping - Laundry, ironing etc - Shopping, running errands - Assuring a healthy indoor climate (ventilation) - Caring about plants - Caring about pets	i.e. - Presence, needed and preventive - Structuring daily life - Daily activities - Conversation, socialising - Accompanying at diverse activities	i.e. - Toileting - Nutritional support - Body care

We must comment here that care-activities require a good preparation of the PCG and this may (partially) not be done if there is no special training and recognition for this field of care. As a result, some of the actions described in the M-CARE training may not be allowed to be performed by a PCG in your country, but only by trained nurses or medical doctors.

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[1] Definition following " Positioning paper of the Federal Association of European Caregivers, Berlin (Bundesverband Europäischer Betreuungs- und Pflegekräfte)".

5. Methods to teach and to learn

The PCG portal https://www.pcgcare.eu offers access to up-to-date content and learning-units, either internet based via the online learning platform, or online via the available mobile learning app on Google Play. Everybody can access and use it for learning or for teaching and training purposes in the field of personal caregiving. Quizzes to every unit give also feedback or can help teachers to assess the knowledge of trainees: pre-, self- and post-assessment questionnaires are available to assess the trainee's knowledge.

All content has been prepared for self-learning or blended learning scenarios. They can be read or looked at (videos) and discussed with a tutor or trainer.

Which mode is chosen depends on the interest and the individual preconditions and goals of the person to become a PCG.

5.1.   M-CARE training step by step

M-CARE training consists of following steps **(in bold we indicate what technical solution supports each step)**:

- A low skilled jobseeker/nurse/current PCG expresses interest in becoming a PCG or A low skilled jobseeker/nurse/current PCG expresses interest in becoming a PCG or improving his/her skills.
  - o **Access the M-CARE portal at https://www.pcgcare.eu**
- Before we allow a person to start a training, we perform a pre-assessment of the competences and the suitability (this should also include offline legal & health checks) of PCG candidate. This includes assessing in what modules the person has experience and expertise. Questions are randomly generated by the M-CARE online database and include 30 true/false options. The results are recorded into the participants' profile and will be considered when the trainees complete the post-assessment. This will allow to evaluate the impact.
  - o **Online pre-assessment tool – 30 questions (registration required)**
- Once approved, the trainee can start his training, either face to face, a classroom or remotely.
  - o **Online   training   platform   with   embedded   modules   at https://www.pcgcare.eu/learning**
- During the training, the trainee can perform a self-assessment of the competences of the PCG candidate. 180 randomly generated true/false statements are provided by the M-CARE online database. This tool will help the participant to receive immediate mid-term feedback about his/her advancement within the course.
  - o **Online self-assessment tool – 180 questions (registration required)**
- After the training, the trainer can have the trainee perform a post-assessment of the competences of the PCG candidate. Each trainee should complete 30 randomly generated true/false statements. It is compulsory to have at least 18 (more than 60%) right answers to pass successfully the assessment. Those who pass it successfully will receive a certificate of participation.
  - o **Online post-assessment tool – 30 questions (registration required)**

- When doing the practical training exercises, or while being on the job the (potential) PCG can still access training material anywhere anytime through mobile learning.
    - o **Mobile M-CARE app, including Assistive Technology support service, enhanced with an embedded gaming element, available via Google Play.**
- (Potential) PCGs share experiences and good practices, together with persons with a disability via dedicated fora, linked to the different curriculum modules.
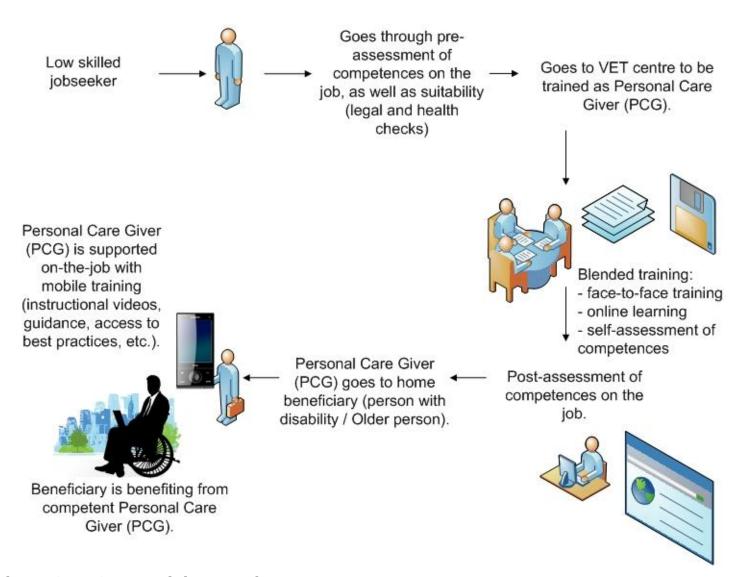   - o **M-CARE portal community at https://www.pcgcare.eu**

Figure 3: M-CARE training step by step

5.2.   Core idea of M-Care: Mobile modular learning

The core idea of the M-Care-project is to make learning content available in small and easy to handle units available on a portable device (smartphone or tablet).

*"**M-CARE** brings you the training at the moment you need it, in a portable mobile modular format, addressing a wide range of topics directly connected with the daily work of a caretaker who is supporting older people and people with disabilities."*

5.2.1.   Mobile Learning – it's not a "self-runner"!

There are some important aspects to be considered when using mobile learning:

- Mobile learners have to be capable to use the device and its application effortlessly.
- The reason why the mobile learner should learn has to be very obvious.
- There has to be a very direct benefit or clear sign of a benefit, why one should go to the lesson mentioned in that moment.
- Mobile learners need feedback – directly and very short-term.
- An assessment after every session is a good medium to give this feedback – and it can of course consist of games or fun.
- Mobile learners need support if they sit before an obstacle – very short-term.
- It's more satisfying to have a clear task that can be solved with the learned stuff than to learn just for stock.
- Motivation to learn has to be freshened up from time to time.
- The link between face-to-face-training and mobile learning has to be clear and it needs as little redundancies as possible.

The requirement to install this kind of mobile learning is that the trainee is capable to make responsible and correct use of it. This can be a challenge for the caregiver, but also an advantage and additional benefit for the cared for person who gets access to a "new world of online content" which is relevant for his/her (potential) PCG.

Attention: When using mobile devices as a caregiver, please ensure that your client knows what you are doing and why you do so. Don't let the impression arise you do something behind the back of your client!

5.3.   Gamification elements in M-CARE Mobile Application

5.3.1.   Definition of M-CARE gamification elements' objectives

Following objectives guided us in applying gamification elements into the M-CARE curriculum and training content:

- Have users completed the modules?
- Have users tried the suggested modules that they didn't initially plan to follow?
- Have users shared their experience with their colleagues?
- Have users talked about the application?
- Have users commented the content?

5.3.2.   Delineation of target behaviours

As per the project's objectives, users should be able to use the app not only when they have a question, but regularly so that they can learn more about PCG's tasks. Although some users will download the M-CARE app to use it only for solving a certain problem or to learn about a

specific matter, the application's goal remains: User should be motivated to follow all the modules and find out all the available material about taking care of someone in need.

Gamification will help motivate them in to using the application not just because they need an answer, but because they want to be better at their work and learn more about care giving tasks. According to the self-determination theory, users will want to improve themselves and acquire useful information for the greater good.

5.3.3.   Description of the "players"

Low skilled people/people with family members that have a disability (+18)

M-CARE will be used by people that provide care services for people with disabilities or older people. The app will have to be fun in order for them to keep on using it, even after they find the answer they were looking for. Especially for family members who are providing care for free, intrinsic motivators like "learn more in order to be better and your job" or extrinsic like "a higher salary, or a better job" will not do the trick. It is necessary that they feel that using the app will make them a better person, a more caring one and thus becoming more useful to the community.

Professional/experienced PCGs/Trainers

To those who work already as PCGs, M-CARE will give an opportunity to enhance the knowledge in those areas where they do not have enough competence and knowledge. By using gamification elements, PCGs will feel like they are following a training course and that will eventually allow them to acquire interesting knowledge that will facilitate their work. Furthermore, as an intrinsic motivator, they want to be better at their work in order to be able to offer more to the people around them.

5.3.4.   Devising activity loops

Engagement Loop

Users will get feedback for everything they do. This way, they will earn points for the steps they complete (sharing, commenting, quiz) and some badges as a status signifier for their achievements. This will entice players to fill in relevant and accurate information.

Progression Loop

The player's journey will have progression steps. Progression can be illustrated by points and badges. At first, based on the number of badges he/she has collected, the user will be characterized as "novice", then after following some modules, he/she will earn the title "intermediate" and when he/she has completed a fair amount of courses, they will be characterized as experts. The users' levels will be demonstrated by the corresponding badges (e.g. gold, silver, bronze).

5.3.5.   Incorporating the "fun" element

The self-determination theory with intrinsic motivation is used to develop fun elements in the gamified system. Therefore, in M-Care's case, a lot of different badges will be awarded to the player when they complete the corresponding lessons' quizzes, or just because they chose to

do a specific task. This will make them rightfully feel they have made the right choices and that the system rewards them. Given also the fact that users tend to like collecting items/awards, there will be a lot of colourful and funny, style badges. Eventually, the whole process will motivate people to take a lot of courses and explore what else is hidden in the app.

5.3.6.   Point and badge collecting system

The applications will use a point system and badges for feedback. For example:

- Have users tried suggested lessons – For every lesson --> 50 points, for every lesson from a different category --> 200 points.
- Have users shared their experience --> 30 points for every share on Twitter or Facebook.
- Have users talked about the application--> for every discussion start --> 50 points and for every comment --> 20 points.

Appendix 1

Value of learning-outcomes in ECVET - Credits

This table gives an overview over the "workload" an average learner will need, to achieve the goals, foreseen in the mentioned Learning Modules. It also gives an overview of the number of "ECVET-Credit-points" a learner will possibly achieve within an officially recognized training.

For to become recognized personal caregiver you should present all learning material and a description what and how you learned within the framework of PCG-Care to your national body for recognition of prior learning, so you will have the chance to become a recognized personal caregiver, within the limits of the knowledge proved by PCG-Care-certificates.

Module Nr	Module Name	Teaching duration face-2-face* (hs = hours)	e-Learning duration* (hs = hours)	Associated ECVET points**
Nr 1	Didactical support for mobile learning module	2 hs	8 hs	0.3
Nr 2	Disability Awareness	8 hs	12 hs	0.6
Nr 3	Communication Skills	12 hs	20 hs	1.2
Nr 4	Policy	2 hs	8 hs	0.3
Nr 5	Social Inclusion	4 hs	12 hs	0.6
Nr 6	Psychological Empowerment	8 hs	16 hs	0.8
Nr 7	Physiological Needs	20 hs	30 hs	1.6
Nr 8	Hygiene	12 hs	20 hs	1.2
Nr 9	Daily Care at Home	4 hs	12 hs	0.6
Nr 10	First Aid and Risks	12 hs	12 hs	0.8
Nr 11	Environment	4 hs	12 hs	0.6
Nr 12	Mobility	12 hs	12 hs	0.8
Nr 13	Leisure / Daily Activities	4 hs	8 hs	0.3
Nr 14	PCG's Burnout	8 hs	4 hs	0.3
	Final session – conclusion and feedback	2 hs	0 hs	0
	Total (average duration)	114 hs	186	10,00

* Teaching and learning duration is calculated for an "ideal average learner". Duration can vary to more or less hours mentioned in this table depending on the learner's capabilities or pre-knowledge.

** In the framework of an officially recognized course the workload of about 30 hours is equivalent to 1 point

Appendix 2

EQF / NQF – some Examples

For illustration purposes, below some extracts from the CEDEFOP Working paper "Analysis and overview of NQF level descriptors in European countries" (Luxembourg: Publications Office of the European Union, 2013).

Belgium (Flanders) (CEDEFOP, p. 37)

	Knowledge/skills	*Context/autonomy/responsibility*
Level 2	- Understanding information, concrete concepts and standard procedures within a specific area. - Applying one or more of the following skills: cognitive skills; analysing information by distinguishing and relating elements. Motorical skills: - transforming sensory perceptions into motor actions; - performing acquired practical-technical actions. Applying a selected number of standard procedures when performing tasks; applying prescribed strategies to solve a limited number of concrete, recognisable problems.	- Acting in a limited number of comparable, simple, familiar contexts. - Acting with delicate, passive objects. - Functioning under supervision with limited autonomy. - Taking limited executive responsibility for one's work.
Level 3	- Understanding a number of abstract concepts, laws, formulas and methods within a specific area; distinguishing between major and minor issues in information. - Applying one or more of the following skills: cognitive skills; analysing information using deduction and induction; synthesising information. Motorical skills: - making constructions based on a plan - performing actions which require tactical and strategic insight - applying artistic-creative skills. Choosing, combining and applying standard procedures and methods to perform tasks and solve a variety of well-defined, concrete problems.	- Acting in comparable contexts in which a number of factors change. - Acting with delicate, active objects. - Functioning with certain autonomy within a well-defined set of tasks. - Taking limited organisational responsibility for one's work.

Bulgaria (CEDEFOP, p. 45)

Level 2					
Knowledge	**Skills**	**Competences**			
		Autonomy and Responsibility	**Learning Competences**	**Communicative and Social Competences**	**Professional Competences**

• Has basic factual knowledge in a given field of study. • Knows how to extract, select and use simple information. • Has basic knowledge of important social spheres (family, school, working environment, small community, etc.)	• Has basic cognitive and practical skills required to carry out simple tasks, solve routine problems and do routine activities. • Applies a limited number of skills to carry out more complex tasks in familiar contexts. • Establishes simple correlations according to a set of criteria in the various fields of work or study. • Carries out simple operations by means of various instruments and easy-to-use machines. • Understands instructions	• Works with a relative degree of autonomy in familiar contexts, taking responsibility for the performance of the assigned task. • Works in unfamiliar contexts following the written or oral instructions of the task supervisor. • Knows the possibilities and risks of using the acquired	• Is aware of the possibility to continue his/her education and training. • Acknowledges the need to acquire some key competences (mother tongue, mathematics, computer literacy, etc.).	• Works in a group, accepts and expresses an opinion and/or criticism. • Orients oneself and acts adequately in a specific context. • Exchanges oral and written information. • Communicates successfully in a diverse social and cultural environment. • Carries out	• Carries out routine tasks under unchanging circumstances.

Germany (CEDEFOP, p.76):

Professional competence			Personal competence	
Level 2	Knowledge	Skills	Social competence	Autonomy
• Be in possession of competences for the professional fulfilment of basic requirements within a clear and stably structured field of study or work. Fulfilment of tasks takes place largely under supervision				
• Be in possession of basic general knowledge and basic professional knowledge with a field of study or work.	• Be in possession of basic cognitive and practical skills required to carry out tasks within a field of study or work, evaluate the results of such tasks in accordance with stipulated criteria and establish correlations.		• Work within a group. Accept and express general feedback and criticism. Act and react in accordance with the given situation with regard to verbal and written communication.	• Learn or work in a responsible manner and largely under supervision within familiar and stable contexts. Appraise own actions and the actions of others. Use stipulated learning guides and request learning guidance.
Professional competence			Personal competence	
Level 3	Knowledge	Skills	Social competence	Autonomy

• Be in possession of competences for the autonomous fulfilment of technical requirements within a field of study or field of occupational activity which remains clear while being openly structured in some areas.			
• Be in possession of extended general knowledge or extended professional knowledge within a field of study or field of occupational activity.	• Be in possession of a spectrum of cognitive and practical skills for the planning and processing of technical tasks within a field of study or field of occupational activity. Evaluate results in accordance with criteria which are largely stipulated, provide simple transfers of methods and results.	• Work within a group and occasionally offer support. Help shape the learning or working environment, present processes and results to the appropriate recipients of such information.	• Learn or work autonomously and responsibly including within contexts which are less familiar. Appraise own actions and the actions of others. Request learning guidance and select various learning aids.

Greece (P. 86)

Level 2	• has acquired basic general knowledge related to a field of work or study that allow them to understand the procedures for implementing basic tasks and instructions; • can apply basic knowledge and perform a variety of complex tasks in a field of work or study; has communication skills; • can perform tasks in a specific field of work or study under limited supervision and/or with some autonomy in a structured context.
Level 3	• has acquired basic general knowledge that allows them to understand the relationship of theoretical knowledge and information within a field of work or study; understands the components and procedures appropriate to complex tasks and instructions; • can demonstrate broad cognitive and practical skill in successful execution of complex tasks both in intimate and non-intimate contexts; has communication skills and problem-solving capabilities through selecting and applying basic methodologies, tools, materials and information; • can perform tasks autonomously in a particular field of work or study; has the ability to adjust their behaviour depending on the needs of problem-solving; takes initiatives in specified fields of work or study and acts under supervision in implementing emergency procedures of quality control.

Turkey (Draft – to be recognized and legalized, see CEDEFOP, p.165f)

	Knowledge	Skills	Competences
Level 2	• Possess basic theoretical knowledge and practical knowledge related to the standard tools, instruments and methods required to perform clearly defined activities related to an area of work or learning.	• Utilise the knowledge required to perform clearly defined activities related to an area of work or learning and to work out solutions for the problems foreseen.	• Take responsibility in the performance of clearly defined activities under guidance and/or supervision, and determine needs and goals of learning under guidance.
Level 3	• Possess theoretical and practical knowledge required to perform uncomplicated activities in different environments related to an area of work or learning.	• Interpret data, evaluate results, select appropriate standard tasks and methods and apply them systematically, provide solutions to unforeseen	• Take responsibility in performing uncomplicated activities under limited guidance and/or supervision; determine needs and goals of learning under guidance, when

		problems related to uncomplicated activities in an area of work or learning.	guidance is required.

Appendix 3

	Modules and Module-References			
Sometimes it is very helpful for working on a module to have passed already some other modules. Here you have a table of our recommendations of reference-modules				
Module Nr	Module Name	Teaching duration* (hs = hours)	Learning duration* (hs = hours)	Previous Knowledge recommended (see the curriculum-tables on pcgcare.eu-platform)
Nr 1	Didactical support for mobile learning module	2 hs	8 hs	Literacy, familiarity with online and mobile technologies
Nr 2	Disability Awareness	8 hs	12 hs	Starting point of Training!
Nr 3	Communication Skills	12 hs	20 hs	Module Nr 2 Literacy, use of Android devices
Nr 4	Policy	2 hs	8 hs	Module Nr 2 Literacy, use of Android devices
Nr 5	Social Inclusion	4 hs	12 hs	Modules Nr 2 and Nr 4 Literacy, use of Android devices
Nr 6	Psychological Empowerment	8 hs	16 hs	Modules Nr 2, Nr 4 and Nr 5 Literacy, use of Android devices
Nr 7	Physiological Needs	20 hs	30 hs	Modules Nr 2, Nr 4 and Nr 5 Literacy, use of Android devices
Nr 8	Hygiene	12 hs	20 hs	Modules Nr 2 and Nr 5 Literacy, use of Android devices
Nr 9	Daily Care at Home	4 hs	12 hs	Modules Nr 2 and Nr 5 Literacy, use of Android devices
Nr 10	First Aid and Risks	12 hs	12 hs	Modules Nr 2, Nr 5, Nr 8, Nr 9 Literacy, use of Android devices
Nr 11	Environment	4 hs	12 hs	Modules Nr 2, Nr 5, Nr 7 and Nr 9 Literacy, use of Android devices
Nr 12	Mobility	12 hs	12 hs	Modules Nr 2, Nr 5, Nr 7, Nr 8 and Nr 9 Literacy, use of Android devices
Nr 13	Leisure / Daily Activities'	4 hs	8 hs	Modules Nr 2, Nr 5, Nr 7, Nr 8, Nr 9 Literacy, use of Android devices
Nr 14	PCG's Burnout	8 hs	4 hs	Modules Nr 2, Nr 5, Nr 6, Nr 7, Nr 8 and Nr 9 Literacy, use of Android devices
Final session – conclusion and feedback		2 hs	0 hs	

	Total (average duration)	114 hs	186	
	* Teaching and learning duration is calculated from an "ideal average learner" - duration can vary to more or less hours mentioned in this table depending from learner's capabilities or pre-knowledge			