



[EDUCATIONAL PROFILES AND STUDY PLAN]

For elderly care workers from Italy (FVG and RAS regions), Poland and Romania



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INTRODUCTION

This report contains a synthesis of the competence indicators which are common to the majority of the examined professional profiles and those that – even if belonging to only one national profile – are considered relevant and worth being part of an eventual common curriculum.

The competences are gathered under 12 domain areas.

The document analyze then how these learning outcomes are included in the curricula in the different countries and, finally, those who have been chosen as part of the “IQEA CURRICULUM”, i.e. the learning outcomes object of ECVET process.

GLOSSARY:

OSSIT: Social and healthcare Operator / *Operatore socio sanitario* - Region of Friuli Venezia Giulia and Autonomous Region of Sardinia

APIT: Domestic care assistant- basic skills / *Assistente alle persone - competenze minime* - Region of Friuli Venezia Giulia

AFIT : Family care assistant / *Assistente Familiare* – Autonomous Region of Sardinia

CAWPL : Care Assistant in a social welfare house - Poland

CAEPL : Care assistant of an elderly person - Poland

HGRO : Home caregiver - Romania

HCRO : Health care assistant - Romania

COMMON COMPETENCE INDICATORS¹

LEARNING OUTCOME HE/SHE...	KNOWLEDGE	CAPACITY	BEHAVIOUR
AREA 1 - PERSONAL CARE AND MOBILIZATION			
<p>Recognizes the social situation, living conditions, needs and psycho-physical problems of an elderly person</p> <p>Listens and identifies patient needs</p> <p>Supports patients to keep their autonomy and independence</p>	<p>Knows the meaning and the implication of care need APIT</p> <p>Knows the application of the most adequate specific healthcare techniques for the different situations she/he has to deal with OSSIT</p>	<p>Is able to identify the needs of the assisted person, through appropriate questions HGRO CAEPL CAWPL APIT</p> <p>Is able to activate the patient to increase the independence of living CAEPL APIT AFIT OSSIT</p> <p>Is able to adapt and choose in a dedicated way the daily activities and the different treatments according to the patient's peculiarities or to the changes that may occur (health status etc) HGRO APIT</p>	<p>Shows flexibility during intervention, HCRO</p> <p>Establishes a hierarchy of the activities depending on the health status, age and evolution of the patient HCRO</p> <p>Shows an empathic attitude that encourages the patients' collaboration OSSIT AFIT</p> <p>Communicates in a freely and fluent way without follow strict schemes OSSIT</p> <p>Expresses opinions and explanations in a clear way AFIT</p>
<p>¹ The acronyms in block letters identifies the curricula from which the indicator was taken</p>			

<p>Assists the person, in everyday activities</p>	<p>Knows how to apply procedures to prevent and to eliminate risks HGRO</p> <p>Knows the different requested approaches to deal with different kinds of patients APIT</p>	<p>Is able to assist in daily living activities: personal hygiene of the sick and dependent patient (assistance in eating meals, washing, bathing, combing, shaving, dressing, bed turndown service and change of bed linen and underwear the bedridden person and conduct simple rehabilitation exercises, agreed with the doctor) CAEPL</p> <p>Is able to coorrectly apply the healthcare procedures meeting needs and timetable of the patients and the care provider organization OSSIT; even in critical situations (eg. Fracture) AFIT; for different categories of beneficiaries HCRO</p>	<p>Works respecting the privacy rules OSS</p> <p>Establishes intervention priorities AF</p> <p>Shows committment in gathering and identifying information AFIT</p> <p>Demonstrates a collaborative and supportive attitude in daily working activities not only costs-efficiency oriented APIT</p>
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<p>(A) Personal cleaning and hygiene</p>	<p>Knows how to do a complete hygiene HGRO using handling transporting patients and equipments techniques OSSIT</p> <p>Knows procedures, peculiarities, applications and products for the patients' personal hygiene AFIT APIT Knows elements of Allergology AFIP</p> <p>Knows how to realize the bath of a dependent person and the partial hygiene in order to apply (local) treatment HCRO</p>	<p>Is able to support the care recipient in personal hygienic practices, dressing and physiological functions HCRO OSSIT</p> <p>Is able to substitute other care professionals when it's requested OSSIT</p> <p>Is able to stimulate the patient's autonomy in realizing the daily toilet, accordingly to the dependency degree of the patient HGRO OSSIT</p> <p>Is able to arrange suitable materials to give hygienic practices HGRO OSS</p> <p>Is able to realize intimate hygiene procedures according to patient 's health status AF even nts with catheter HGRO:</p> <ul style="list-style-type: none"> • Is able to assess the necessity of the bath HCRO • Is able to correctly use the bedpan and to hygienize it HGRO • Is able to correctly apply the procedures of toileting and intimate hygiene HGRO even pedicure, manicure, shampoo APIT • Is able to apply partially and/or totally personal hygiene for bedridden patients APIT OSSIT HGRO • Is able to help patient in care of hair and nails CAWPL • Is able to attend patient for the physiological functions APIT 	
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<p>(B) Feeding</p>	<p>Knows the procedures of feeding solid and liquid food to the dependent beneficiary HCRO OSS</p> <p>Knows the basic principles of Dietology and alimentary hygiene according to the different pathologies APIT AFIT taking into account the food intolerance AFIT</p> <p>Knows the local traditional food AFIT</p> <p>Knows the basis for planning residential space CAEPL CAWPL</p>	<p>Is able to follow the specific diets for each patient (i.e. diabetic, cardiac diet etc.) prescribed for each patient by the medical staff HCRO according to the daily care program HGRO and the meals timetable HCRO</p> <p>Is able to assess the particularities of the patient in offering feeding support HCRO</p> <p>Is able to inform patient about the timetable of meals and about the menu HCRO</p> <p>Is able to ensure the comfort / well-being of the patient during meals HCRO</p> <p>Is able to involve the beneficiary and his/her family in order to provide feeding support HCRO</p> <p>Is able to support the assisted person in creating or regaining the alimentation capacity HGRO</p> <p>Is able to correctly apply hydration techniques HGRO</p> <p>Is able to cook foods (AFIT) and to feed the care recipient HGRO</p> <p>Is able to observe the patient's refuse of food or liquids HCRO</p> <p>Is able to cook respecting different types of</p>	
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		diet and the preferences of the assisted person HGRO taking into account the traditional local food and proposes always different meals in order to stimulate patient to eat AFIT	
(C) Dressing	Knows how to dress the patient according to the season HCRO	Is able to assess and to choose the appropriate clothes for the patient HCRO Is able to support the dependent care recipient in dressing/undressing process HCRO APIT CAWPL	
Supports the user in the mobility according to the different degree of disability, adopting the most suitable measures, if dependent or bed-bound repositions, walking inside and outside, transportation (APIT-HCRO-HARO-CAEPL-CAWPL-AFIT)	Knows how to mobilize and to manipulate the bed-bound beneficiary HCRO APIT In particularly Knows: <ul style="list-style-type: none"> • how to lift up the bed-bound beneficiary HCRO • how to transport the bed-bound beneficiary HCRO • how to change the position of the bed-bound patient HGRO • how to use specific accessories for the patients' mobilization (walking stick, wheel-chair) HGRO APIT CAWPL Knows how to prevent bed sores CAWPL HGRO Knows how to mobilize correctly the	Is able to ensure the security of the patient, during the entire period of transportation Is able to apply procedures to prevent bed-sores APIT OSSIT HGRO Is able to identify the type of mobilization necessary, according to the recommendations of the medical team and to the patient's particularities HGRO Is able to support the patient walking HGRO Is able to apply the correct position for the mobility of bed-bound patients OSSIT Is able to realize a correct mobility and transportation procedures APIT Is able to use and to facilitate patients in using the adequate equipments for the patients mobility APIT	Is calm and perseverent HCRO Shows respect, calm and patience HCRO Encourages the patient demanding her/his active collaboration OSSIT

	<p>patient HCRO AFIT APIT</p> <p>In particularly knows:</p> <ul style="list-style-type: none"> • how to apply correctly specific transportation techniques HGRO • how to apply technique to mobilize the person in orthostatic position HGRO • how to apply technique to mobilize the person sitting in the chair HGRO • how to apply technique to support the patient for walking HGRO • how to apply technique to exercise walking with the patient using accessories (walking stick etc) HGRO <p>Knows the patient care strategies and the posture transfer techniques during o the patient deambulation APIT</p> <p>Knows how to set up and change compresses HGRO</p> <p>Knows what architectural barriers are APIT</p> <p>Knows the pathologies that affect patients mobility AFIT</p>	<p>In able to do the basic maintenance for patients mobility equipments APIT</p> <p>Is able to identify and remove the potential architectural barriers APIT</p> <p>Is able to foreste the potential results of inadeguate actions AFIT</p> <p>Knows how to explain to the patient the requested postures and movements HGRO</p> <p>Knows how to involve the patient into the activity HGRO</p>	
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<p>Is able to assist terminally ill and dying persons OSS IT</p>	<p>Knows how to apply the care techniques for the dying patient HGRO</p>	<p>Is able to understand emotional experiences accompanying dyings able to provide psychological comfort and sense of security for ill/dying person to support dying person- be patient to talk, listen, read a book etc CAWPL</p> <p>Is able to communicate with ill/dying person and his/her family Support terminally ill/ dying person in his/her contacts with long unseen close relatives CAWPL</p> <p>Is able to apply techniques of palliative care HCRO</p>	
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AREA 2 – BASIC HEALTH CARE ACTIVITIES

<p>Recognizes and interprets the causes and consequences of disturbances in the functioning of psychological and somatic disorders of elderly people (CAEPL)</p>	<p>Knows how to identify changes in the status of care recipient (physical and psychological) HGRO</p>	<p>Is able to identify symptoms of elderly pathologies HGRO</p> <p>Is able to report symptoms observed to the medical staff (i.e.: if the person is aphasic or in pain etc.) using appropriate terms HGRO OSS information he/she collects (appetite, fever, fatigue etc.) HGRO to compare the normal health status with this one in which changes occur HCRO</p> <p>Is able to observe changes in the health status of the patient and to inform the supervisor in order to discuss it in the multidisciplinary team for a correct</p>	
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		assessment HCRO	
Supervises the patient health status and promote health prevention (HCRO-CAWPL-CAEPL- AP	Knows the care and prophylactic techniques of main elderly pathology APAFIT like: digestive pathologies, diabetes and the consequent complications, obesity, cardiovascular diseases, cerebral vascular accidents, respiratory pathologies, fractures and osteoporosis, urinary or anal incontinence, rheumatoid pathologies, visual impairments, hearing impairments, cancer disease HGRO	Is able to observe permanently and vigilantly the vital signs of the patient HCRO Is able to recognize symptoms of specific pathologies of the patient HGRO CAWPL	
Realizes basic therapeutical activities and basic diagnostical support OSSIT • Supervises the patient's medication administration CAWPL	Knows the main over-the-counter drugs APIT Knows the rules of giving and storage medicines CAWPL Knows the local health system organisation OSSIT	Is able to use the medical equipments to measure blood pressure and glycemia OSSIT Is able to apply supporting medical procedures foreseen in the individual care plan OSSIT Is able to monitor the administration of medicines according to the medical prescription HGRO OSSIT body temperature HGRO Is able to buy the prescribed medicines HGRO Is able to apply existing procedures	

		regarding functional circuites HCRO Is able to assess and use adequately the amount of necessary hygienic and sanitary materials HCRO	
Depositing, preparing, sterilizing and distributing necessary instruments for treatment and rooms and surgical rooms (dressing packages, bandages, coats...)	Knows the procedures of medical waste and biological material gathering, storage and transport OSSIT Knows how to use disinfection materials in the hospitals HCRO	Is able to apply procedures to prevent exposure at biological products HCRO Is able to apply the procedures of depositing the used sheets, dressing packages and clothes the hygienic and sanitary materials HCRO	
Assists the medical staff in execution of medical procedures: i.e. examinations, treatments (i.e.massage suppositories) by request and under supervision of a nurse or doctor HARO HCRO	Knows how to perform basic treatments CAWPL	Is able to support the medical staff in treatment delivery HCRO Is able to prepare correctly and in time the patient for the medical examination, depending on the type of investigation recommended HCRO Is able to inform the patient about the investigations the patient will undertake, in the limits of his/her competencies HCRO	Identify the patient's needs HCRO
AREA 3 – COOPERATION TO REHABILITATION ACTIVITIES			
Cooperates to activities aimed to maintain remaining psico - physical capacities, re-education, re-activation	Knows how to apply techniques to rehabilitation, to exercise movements of superior the inferior limbs HGRO CAWPL	Is able to supervise the daily activities of the patients HCRO Is able to appropriate analyse causes and dynamics of elderly emotional status and its	Acts in a flexible manner according to the different situations he/she will deal with HCRO

<p>and functional recovery and performs certain tasks under the supervision of the doctor/ therapist(OSSIT)</p> <p>Encourages, supervises and supports the patient to take active part in occupational therapy, in the rehabilitation activity and fitness and carries out routine motor exercises CAEPL CAWPL APIT HARO HCRO</p>		<p>impact on elderly physical and psychological condition CAWPL</p> <p>Is able to correctly identify the specific activities, according to the individualized protection and care plan, and to the specific objectives HCRO following exactly the supervisor’s prescription HC according to the documents’ stipulations HC</p> <p>Is able to support patient in doing gymnastics exercises HGRO</p>	
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AREA 4 – RECREATIONAL ACTIVITIES AND SOCIALIZATION

<p>Encourages the patient to actively develop and realize recreational /socialization activities for individuals and groups (discussions on different favorite subjects, reading, board games, TV watching /radio audition, park walks) cooperates also in community based</p>	<p>Knows how to apply socializing and stimulation techniques for the patient HCRO</p> <p>HGRO OSS methodology for working with a group CAW</p> <p>Knows local organisations and informal groups within care sector OSSIT</p> <p>Knows how to motivate beneficiaries to participate in different recreational activities HGRO</p>	<p>Is able to identify types of occupational therapy suitable to activate the personal resources of the beneficiaries HGRO</p> <p>Is able to initiate conversations on different usual subjects HG</p> <p>Is able to support the social operator in developing the rehabilitation cognitive small activities through adequate ideas and proposes inputs and activities in order to stimulate the social involvement OSSIT</p>	<p>Is an engaging person able to involve patient in the activities carried out OSSIT HGRO</p> <p>Develops patients potentialities OSSIT</p>
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services OSSIT HCRO		<p>Is able to use art therapy to integrate group and solve difficult situations in the nursing house society CAEPL</p> <p>Is able to motivate patient to take part in occasional celebrations, holiday events, social events etc. CAEPL</p> <p>Is able to support patient in organizing and using the available leisure time in a constructive manner, developing the following aspects: self-realisation, development of interests and integration with family, others who are in the DPS or in the local community. CAEPL</p> <p>Is able to stimulate the potentialities of the care recipient HGRO</p>	
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AREA 5 – COOPERATION WITH OTHER PROFESSIONALS

Works in team, is able to acknowledge the roles of the different professionals involved in the care sector APIT-OSSTI	<p>Knows how to communicate information to the members of the team HGRO</p> <p>Knows the roles of all those persons working in the social and health care sector APIT</p>	<p>Is able to cooperate with the members of the multidisciplinary team AP to periodically plan and assess the care process and the evolution of the beneficiaries HGRO; Is able to actively take part in the coordination meetings APIT</p> <p>Is able to cooperate with the medical staff (i.e.: Family Doctor, etc.) to simplify the</p>	<p>Develops good team working skills avoiding conflicts and accepting critics by colleagues OSSIT</p> <p>Reports information in a correct way OSSIT</p> <p>Is aware of her/his own tasks and functions in connection with other workers APIT</p>
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		<p>health care activities OSSIT</p> <p>Is able to correctly apply instructions provided by supervisors HGRO; by social and healthcare workers and by patient's family OSSIT</p> <p>Is able to fill in the "relevant events diary" OSSIT</p>	
<p>Handles the bureaucratic procedures most commonly used by elderly people AFIT APIT CAEPL CAWPL</p> <p>Recognizes, contacts and uses the resources of the family environment, at institutional and local level in his/her care activity to solve health, physical, family, housing and legal problems of the patient CAEPL-CAWPL</p>	<p>Knows information collection methods and takes into account the patient 's social network OSSIT</p> <p>Knows how to identify organizations for the health promotion and protection CAEPL CAWPL</p> <p>Knows the main local social and healthcare services and their network OSSIT APIT AFIT</p> <p>Knows how emergency services work and can be activated (i.e.: emergency medical service and number, etc.) AFIT</p> <p>Knows the main local services (poste offices, banks, supermarkets, etc) APIT</p> <p>Knows the procedures to achieve: certification, access to healtcare services AFIT</p>	<p>Is able to contact the suitable professionals OSSIT</p> <p>Is able to communicate general information of patient's health status to services and his/her family according to his/her competences OSSIT</p> <p>Is able to explain to patient and his family how they can access to the services (steps, procedures, etc.) APIT</p> <p>Supports family in filling in forms and applications AFIT</p> <p>Is able to describe and inform about contacts and offices addresses, is able to contact and establish relationship with local services APIT</p> <p>Knows the way around public services and facilities and is able to reserve medical examinations APIT</p> <p>Is able to carry out not professional medical</p>	<p>Is empathic and is able to involve patient OSSIT</p> <p>Collects information and uses them in a correct way OSSIT</p> <p>Supports patients, respecting them, giving them a sense of safety and a psychological help APIT</p> <p>Commits her-himself in solve problems APIT</p> <p>Is able to recognize other people's needs OSSIT</p> <p>Is able to work in team OSSIT</p>

	Knows how public services work AFIT	observations OSSIT	
AREA 6 – HOUSE AND OTHER LIVING ENVIRONMENT MANAGEMENT			
<p>Takes care of cleaning and hygiene of the patient 's living environment bed hygiene, washing and ironing clothes, dish washing, meals preparation, serve, collect and trays</p> <p>Respects the sanitary and safety rules, with a particular focus on patient environment OSSIT HARO HCRO CAEPL</p>	<p>Knows the principles of environmental hygiene and care (hygiene, environmental sanification, the confinement room standards, the temperature, the lighting, etc.) and knows how to use appropriate procedures and apply the cleaning products CAEPL CAWPL OSS</p> <p>Knows how to realize the disinfection of dishes/trays HCRO</p> <p>Knows how to tidy up the patient domestic and care environments OSSIT</p>	<p>Is able to guarantee all the comforts within the care facility OSSIT</p> <p>Is able to observe and evaluate the patient domestic environment OSSIT</p> <p>Is able to help patient to maintain purity at the care recipient living and caring environment, even to keep cleaned her/his personal stuff and is able to replace it when necessary HGRO</p> <p>Is able to apply the hygiene procedures in the living spaces of the patients HCRO HGROOSS</p> <p>Is able to identify the necessity of cleaning the rooms or interior spaces whenever it is needed</p> <p>Is able to make the bed in different moments and contexts (bed-bounded patient,...) APIT CAWPL HCRO</p> <p>Is able to apply the procedures of collecting and depositing the dirty bed sheets and personal clothes in special spaces HCRO taking over / transportation/ distribution of clean bed sheets and personal clothe</p> <p>Is able to advise on the planning and</p>	<p>Shows conscious behaviour in critics situations HCRO</p> <p>Is empathic OSSIT</p>

		<p>organization of the household. CAEPL Is able to arrange housing in accordance with the needs of elderly person CAEPL CAWPL</p> <p>Is able to dress the table on esthetic basis and taking into account the patient's preferences HCRO</p>	
<p>Supports the patient to run the household and to manage domestic issues (intake, shopping, payment budget and of bills) CAEPL OSSIT AFIT</p>	<p>Knows how to cooperate with institutions in order to solve health, family and housing problems of the elderly person CAEPL</p> <p>Knows how to manage small amounts of money OSSIT</p>	<p>Is able to assist elderly person in household budget planning and rational management of funds CAEPL</p> <p>Is able to evaluate the food price/quality relationship in accordance with patient pathology AFIT</p> <p>Is able to assist in making small purchases CAEPL CAWPL to accompany the beneficiary shopping HGRO</p> <p>Is able to choose and correctly use detergent and cleaning products APIT AFIT</p> <p>Is able to do the shopping OSSIT</p>	<p>Makes choices according to the specific situations/conditions AFIT</p>
AREA 7 – PLANNING, MONITORING, COLLECTING INFORMATION			
<p>Plans and organizes her/his own work.</p>	<p>Knows how to prepare weekly and monthly plans of work Knows how CAWPL CAEPL APIT AFIT</p> <p>Knows the individual planning and the project/intervention planning according to her/his competence and responsibilities</p>	<p>Is able to contribute to the individual planning thanks to her/his observation activities of the patient needs and health status APIT</p> <p>Is able to develop individual support plan</p>	<p>Is aware of is role in relation to the other professionals and can give her/his suggestions and opinions OSSIT</p> <p>Understands the reasons of the interventions OSSIT</p>

	APIT OSSIT	CAEPL OSSIT Is able to co-operate with developing treatment plans CAWPL OSSIT Is able to carry out the planned interventions in accordance with her/his competences OSSIT APIT	
Monitors and assists the gathering of data about the needs and risky conditions of the care recipient Reports to the medical/social professional staff the problems observed at the beneficiaries OSSIT HCRO Supports the put in practice of interventions monitoring protocols CAEPL APIT	Knows how to signal relevant information on care recipient's status to supervisors and to the patient's family HGRO	Is able to monitor and evaluate of undertaken activities CAWPL <ul style="list-style-type: none"> • Is able to select methods, techniques and tools for monitoring and evaluation of specific care stages CAWPL • Is able to gather information to monitor the care processes APIT Is able to measure the quality of care CAEPL CAWPL Is able to signal relevant data and information about the patient health status OSSIT: <ul style="list-style-type: none"> • Is able to observe and to monitor the quantity of water and food ingested and monitor the frequency of eliminations by the patient HCRO • Is able to monitor the patient's weight OSSIT 	Gathers and communicates information OSSIT Understands patient needs even were they are unspoken OSSIT

Evaluates, according to its competences, the most suitable interventions that should be put in practice OSS HGRO	Knows the potentialities of the available resources APIT	Is able to make evaluation of social situation, conditions of living and psycho-physical problems of elderly person CAE PL HGRO Is able to make psychosocial assessment of patient CAWPL	Is aware of her/his role and tasks related to the other professionals, is able to giving suggestions HGRO
Uses common informative tools to record what registered during the working shift OSSIT	Knows the professional standards for preparing analyze and synthesize documents CAEPL CAWPL HGRO OSS Knows the procedures about the clinical risk OSSIT Recognizes the function of the following evaluation units: BINA Vama, Valgraph OSSIT	Is able to read, use and control the quality of professional documentation CAEPL CAWPL OSSIT Is able to collect supplementary information (program changes, modification of health status of the assisted person etc), through relevant questions HGRO Is able to rapidly identify the medical indications, by consulting medical prescriptions	
AREA 8 – MANAGEMENT OF EMERGENCY SITUATIONS			
Provides elderly people with emergency care/ first aid Manages emergency situations CAEPL CAWPL APIT	Knows how to apply first-aid technique HGRO HCRO and the procedures in case of emergency such as: Hemorrhages; car accidents; techniques of artificial respiration and cardiac massage; traumatism; fractures; burns; electrocution; loss of consciousness; volunteer/involunteer intoxications; Heimlich technique HGRO	Is able to intervene in emergency and critics situations HGRO APIT CAEPL <ul style="list-style-type: none"> Is able to apply the BLS techniques, to activate the emergency service and to support the patient before the arrival of the emergency medical staff APIT Is able to perform non-invasive first aid measures OSSIT 	Shows rapidity, promptitude and firmness in soliciting help for the beneficiary HCRO. Takes optimal decisions in emergency situations Assesses priorities when offering first aid HGRO Evaluates dangerous situations and faces

	also during the feeding process HCRO		them with self-control OSSIT APIT Communicates under pressure APIT
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AREA 9 – EMOTIONAL SUPPORT

Puts in practice helping relationships with the care recipient and his/her family, to support social integration and to maintain /recover personal identity, to solve emotional crisis, difficult situations and conflicts OSSIT CAEPL CAWPL	Knows how to stimulate the beneficiary's communication skills HGRO Knows how to apply conflict solving techniques HGRO	Is able to develop positive interpersonal relations within patient environment in care care. Involving family CAEPL and accepting their habits APIT AFIT Is able to make appropriate assessment of the causes and dynamics of emotional states and their impact on elderly person physical and psychological conditions HCRO • Is able to adjust methods of working to psycho-physical state of the elderly person CAWPL • Is able to recognize and to report depression status OSSIT and is able to give patient the needed support OSSIT Is able to use in practice the principles of psychotherapy CAEPL/CAWPL	Perceives the burn out symptoms and risks APIT Identifies the individual characteristics and habits of care recipient HGRO Behaves in an empathic and flexible manner HG
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AREA 10 – APPROPRIATE COMMUNICATION

<p>Is able to communicate with the care recipient and his/her family, using (if migrant) the language of working place, using ,if necessary, alternative methods of communication OSSIT AFIT APIT CAEPL</p>	<p>Knows principles, systems, styles and methods of communication (verbal communication, visual communication, etc.) OSSIT APIT</p> <p>Knows the language of the country where she/he works (if migrant worker), at least level A2 OSSIT AFIT APIT, knows local dialect and particular idiomatic sentences OSSIT</p>	<p>Knows how to behave in relation to the patients and their families HCRO AP</p> <ul style="list-style-type: none"> Is able to provide services and patient's family with reports on psychological and physical patient conditions HGRO, according to the rules OSSIT <p>Is able to communicate in an appropriate way with the beneficiary and his/her family HGRO OSSIT, can adapt her/his voice tone and posture according to the sensory deficit of the patient APIT HGRO</p> <ul style="list-style-type: none"> Informs patient about her/his health situation and received treatments OSSIT HGRO 	<p>Identifies his/her own abilities in the field of communication with others CAWPI, i.e.: listening, dialogue and recognition of factors that disrupt communication CAW</p> <p>Recognizes the patient needs AFIT</p> <p>Elaborates complex analysis to express a professional evaluation and criticism CAWPL OSSIT AFIT</p> <p>Has the ability to persuade and negotiate CAEPL CAWPL</p> <p>Behaves in an empathic manner OSSIT</p>
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AREA 11 – ETHICAL AND LEGAL ASPECTS

<p>Observes the principles of professional ethics. CAEPL CAWPL APIT</p> <p>Promotes care recipient's rights CAEPL CAWPL</p>	<p>Knows information about human and elderly rights, professional deontology, rights and obligations of the home care giver, the rights of the care recipients HGRO</p> <ul style="list-style-type: none"> Knows privacy regulation APIT Knows the principles of the care activity legal liability and the laws regulating this kind of job APIT Knows the attributions of the homecaregiver CAEPL 	<p>Is able to behave adequately respecting the rights and fundamental liberties of the beneficiaries HCRO:</p> <ul style="list-style-type: none"> Is able to identify correctly the violation of beneficiaries' rights HCRO Is able to respect the confidentiality principle regarding the care recipients HGRO AFIT <p>Is able to follow the procedures of the ethical code of the profession HCRO the deontological principles of home care worker</p>	<p>Understands the patient needs APIT</p> <p>Behaves in an empathic manner APIT</p> <p>Listens without prejudice and respects privacy and dignità of the patient APIT</p>
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		<p>HGRO</p> <p>Is able to accomplish the duties of the profession HCRO</p> <p>Is able to apply procedures stipulated in the internal regulations of the institution regarding the patients HCRO</p>	
<p>Follows the Labour Code provisions concerning the rights and duties of the employee AFIT CAEPL</p>	<p>Knows the national employment contract APIT AFIT</p> <p>Knows how to calculate her/his own salary with the support of an expert AFIT</p>		
<p>Observes rules and principles of occupational health and safety regulations, fire protection and environmental protection CAEPL APIT</p>	<p>Knows the prevention rules and principles: danger and risk related to the social and healthcare field AFIT HGRO OSSIT</p> <p>Knows how to prevent and decrease the (environmental) risk factors OSSIT</p> <p>Knows the health hygiene principles, infections risks and prevention APIT and the hygiene principle for the worker (uniform, worker hygiene, washing hands) APIT HCRO</p> <p>Knows the use of the products for the different care contexts APIT</p>	<p>Is able to use the individual protection devices APIT</p> <p>Is able to correctly dispose of waste APIT</p> <p>Adopts adequate attitudes for the prevention APIT</p> <p>Maintains her/his own hygiene AFIT</p>	

AREA 12 – USE OF ICT SUPPORTS

Uses information technology in care daily activities (gathering and working on data, preparing documentation) CAEPL CAWPL AFIT OSS	Knows how the PC works OSSIT Knows how to use the mobile phone and the phone OSSIT	Is able to use computer tools independently to compiling data, drafting documents CAEPL OSSIT; using the available data CAEPL CAWPL	
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LEARNING OUTCOMES IN CURRICULA

The following chart shows how the common learning outcomes are thought in the study plans currently in use in the countries involved in the project.

The use of same colors indicates that different learning outcomes are part of the same didactic unit, according to the study plan.

LEARNING OUTCOME HE/SHE...	RAS – AF	FVG – AF	IT-OSS-RAS	IT-OSS-FVG	RO – HA	RO-HC	CAE - PL
<p>Recognizes the social situation, living conditions, needs and psycho-physical problems of an elderly person</p> <p>Listens and identifies patient needs</p> <p>Supports patients to keep their autonomy and independence</p>	----	Social and cultural area (20H)	Gerontology (50H)	Psychology (30H)	-----	Daily activities management – homecare and its indications (26H – 6T/20P)	Fundamental of psychology and sociology (165H)
<p>ASSISTANCE IN EVERYDAY ACTIVITIES</p> <p>1. Personal cleaning and hygiene</p>	<p>Personal hygiene (8H)</p> <p>Care techniques in elderly pathology (16H)</p>	<p>Personal assistance (45H)</p>	<p>Personal hygiene (50H)</p>	<p>Basic assistance (65 H)</p>	<p>Care techniques (92H – 37T/ 55P)</p>	<p>Human anatomy and physiology (38H – 18T/20P)</p> <p>Hygiene notions (26H – 6T/20P)</p> <p>Care techniques in elderly pathology (36H – 6T/30P)</p> <p>Care for the elderly with</p>	<p>Care about an older person (62/231H)</p>

						mental disorders (26H – 6T/20P)	
2. Feeding	Feeding and preparation of meals (12H) Care techniques in elderly pathology (16H)	Hygiene and safety and hygiene of food (15H) Personal assistance (45H)	Nutrition and feeding (50H)	Basic assistance (65 H)	Care techniques (92H – 37T/ 55P)	Nutrition and feeding notions (26H – 6T/20P) Care techniques in elderly pathology (36H – 6T/30P) Care for the elderly with mental disorders (26H – 6T/20P) Human anatomy and physiology (38H – 18T/20P)	Care about an older person (60/231H)
3. Dressing	Personal hygiene (8H) Care techniques in elderly pathology (16H)	Personal assistance (45H)		Basic assistance (65 H)	Care techniques (92H – 37T/ 55P)	Hygiene notions (26H – 6T/20P) Care techniques in elderly pathology (36H – 6T/30P) Care for the elderly with mental disorders	Care about an older person (?/231H)

						(26H – 6T/20P)	
Supports the user in the mobility according to the different degree of disability, adopting the most suitable measures, if dependent or bed-bound repositions, walking inside and outside, transportation	Mobilization (6H) Care techniques in elderly pathology (16H)	Mobilization (15H)	Mobilization (50H)	Mobilisation (25H)	Care techniques (92H – 37T/ 55P)	Mobilization techniques (46H – 6T/40P) Human anatomy and physiology (38H – 18T/20P)	Care about an older person (30/231H)
Is able to assist terminally ill and dying persons	----	----	Personal hygiene (50H)		Care techniques (92H – 37T/ 55P)	Care techniques in elderly pathology (36H – 6T/30P)	Diseases in older persons (8/99H)
Recognizes and interprets the causes and consequences of disturbances in the functioning of psychological and somatic disorders of elderly people	Care techniques in elderly pathology (16H)	First aid (12 H)	Gerontology (50H)	Gerontology (20H)	----	----	Fundamental of psychopathology (66H) Diseases in older persons (91/99H)
Supervises the patient health status and promote health prevention	----	----	Basic therapeutical activities and basic diagnostical		----	----	Health promotion and prevention (66H) Care about an

			support (50H)				older person (32/231H)
Realizes basic therapeutical activities and basic diagnostical support Supervises the patient's medication administration	----	----	Basic therapeutical activities and basic diagnostical support (50H)		----	----	----
Depositing, preparing, sterilizing and distributing necessary instruments for treatment and rooms and surgical rooms (dressing packages, bandages, coats...)	----	----	Disinfection and cleaning (50H)	Hygiene (45H)	Hygiene care of the patient and cleaning of the spaces where the patient lives (120 H / 40 T / 80 P)	----	----
Assists the medical staff in execution of medical procedures: i.e. examinations , treatments by request and under supervision of a nurse or doctor	----	----	Basic therapeutical activities and basic diagnostical support (50H)		----	----	----
Cooperates to activities aimed to maintain remaining psico - physical	----	----	Psychology and communication (50H)	Psychology (30H)	----	Developmental psychology (66H – 30T/36P)	----

<p>capacities, re-education, re-activation and functional recovery and performs certain tasks under the supervision of the doctor/ therapist</p> <p>Encourages, supervises and supports the patient to take active part in occupational therapy, in the rehabilitation activity and fitness and carries out routine motor exercises</p>							
<p>Encourages the patient to actively develop and realize recreational /socialization activities for individuals and groups (discussions on different favorite subjects, reading,</p>	<p>----</p>	<p>Personal assistance (45H)</p>	<p>Psychology and communication (50H)</p>	<p>Recreational activities (15H)</p>	<p>----</p>	<p>----</p>	<p>Leisure activities (165H)</p>

board games, TV watching /radio audition, park walks) cooperates also in community based services							
Works in team, is able to acknowledge the roles of the different professionals involved in the care sector	----	Psychology (20H)	Health and care regulations (30H)	Professional orientation (30H)	Communication and working within the multidisciplinary team (23 H – 8T/15P)	----	Methodology of working with an older person
Handles the bureaucratic procedures most commonly used by elderly people Recognizes, contacts and uses the resources of the family environment, at institutional and local level in his/her care activity to solve health, physical, family, housing and legal problems of the patient	Health and care regulation (12H) Local service social system (12H)	Social and cultural area (20H)	Health and care regulations (30H)	Social and health care regulation (35H)	----	----	----

Takes care of cleaning and hygiene of the patient 's living environment bed hygiene, washing and ironing clothes, dish washing, meals preparation, serve, collect and trays Respects the sanitary and safety rules, with a particular focus on patient environment	Feeding and preparation of meals (12H) Housekeeping (8H)	Hygiene and safety and hygiene of food (15H)	Disinfection and cleaning (50H)	Hygiene (45H)	Hygiene care of the patient and cleaning of the spaces where the patient lives (120 H / 40 T / 80 P)	Daily activities management – homecare and its indications (26H – 6T/20P)	---- Health promotion and prevention (15/66H)
Supports the patient to run the household and to manage domestic issues (intake, shopping, payment budget and of bills)	----	---	---	----	----	Daily activities management – homecare and its indications (26H – 6T/20P)	---
Plans and organizes her/his own work.	----	----	---	Social work methodology (30 H)	Planning his/her own activity and continuous training (60H / 20T-40P)	Daily activities management – homecare and its indications (26H – 6T/20P)	Fundamental of law (8/99)
Monitors and assists the gathering of data	----	----	Protocols, indicators and	Social work methodology (30	----	----	----

<p>about the needs and risky conditions of the care recipient</p> <p>Reports to the medical/social professional staff the problems observed at the beneficiaries</p> <p>Supports the put in practice of interventions monitoring protocols</p>			<p>quality principles (30H)</p> <p>Social work methodologies (30H)</p>	H)			
Evaluates, according to its competences, the most suitable interventions that should be put in practice	----	----	Social work methodologies (30H)	Social work methodology (30H)	----	----	----
Uses common informative tools to record what registered during the working shift	----	----	Social work methodologies (30H)	Social work methodology (30H)	----	----	----
Provides elderly people with emergency care/ first aid	Emergency situations and safety (10H)	First aid (12H)	First aid (30H)	First aid (45H)	----	First-aid notions and techniques (32H – 12T/20P)	Care about an older person (32/231H)

Manages emergency situations							
Puts in practice helping relationships with the care recipient and his/her family, to support social integration and to maintain /recover personal identity, to solve emotional crisis, difficult situations and conflicts	Communication (12H)	Psychology (20H)	Psychology and communication (50H)	Psychology (30H)	Communication and working within the multidisciplinary team (23 H – 8T/15P)	----	----
Is able to communicate with the care recipient and his/her family, using (if migrant) the language of working place, using ,if necessary, alternative methods of communication	Communication (12H)	Psychology (20H)	English language (30H) Psychology and communication (50H)	Psychology (30H)	Communication and working within the multidisciplinary team (23 H – 8T/15P)	Developmental psychology (66H – 30T/36P)	Foreign language (66H) Sign Language (33H)
Observes the principles of professional ethics. Promotes care recipient’s rights	Rights and duties (8H)	Social and cultural area (20H)	Health and care regulations (30H)	Ethic (15H)	Ethical principles and values (40 H – 10T/30P) Respecting the rights of the	Rights & responsibilities (38H – 18T/20P)	Methodology of working with an older person (10/99)

					beneficiaries (25H – 5T/15P)		
Follows the Labour Code provisions concerning the rights and duties of the employee	Rights and duties (8H)	---	Health and care regulations (30H)	Social and health care regulation (35H)	----	----	Fundamental of law (8/99)
Observes rules and principles of occupational health and safety regulations, fire protection and environmental protection	Emergency situations and safety (10H)	Work safety (15H)	Health and safety (20H)	Hygiene (45H)	Hygiene care of the patient and cleaning of the spaces where the patient lives (120 H / 40 T / 80 P)	Rights & responsibilities (38H – 18T/20P)	Fundamental of law (12/99)
Uses information technology in care daily activities (gathering and working on data, preparing documentation)	Basic ICT (16H)	Basic ICT (8H)	Digital skills (30H)	----	----	----	Methodology of working with an older person (14/99)

THE “IQEA CURRICULUM”

Because of the variety of tasks performed and of related learning outcomes, it does not appear feasible to develop an ECVET agreement focusing on ALL of them, as it would be unmanageable to find an agreement among all institutes among what is thought and at which level of knowledge and therefore to agree on mutual recognition and ECVET points to be allocated.

The proposal is therefore to focus only on those learning outcomes which are included in all profiles and with minor differences on indicators among the profiles with the same EQF level.

These learning outcomes are the following:

PERSONAL HYGIENE: He/she is able to assist the person in personal hygiene

Indicators:

1. Capability to arrange suitable materials to give hygienic practices
2. Capability to correctly use the bedpan and to hygienize it
3. Capability to correctly apply the procedures of toileting and intimate hygiene
4. Capability to help patient in care of hair and nails
5. Capability to help the patient for the physiological functions
6. Capability to realize the bath of a dependent person
7. Capability to apply partially and/or totally personal hygiene for bedridden patients

8. Capability to support the dependent care recipient in dressing/undressing process

NUTRITION AND FEEDING: He/she is able to assist the person in nutrition and feeding

Indicators:

1. Capability to apply techniques for feeding solid food and liquids to the dependent beneficiary
2. Capability to apply the basic principles of dietetics according to the different pathologies (i.e. diabetic, cardiac diet etc.)
3. Capability to apply the basic principles of food hygiene
4. Capability to cook according to local traditions
5. Capability to ensure the comfort / well-being of the patient during meals

MOBILIZATION: He/she is able to support the user in the mobility according to the different degree of disability, adopting the most suitable measures, if dependent or bed-bound repositions, walking inside and outside, transportation

Indicators:

1. Capability to apply operational techniques to mobilize and to manipulate the bed-bound beneficiary (how to lift up the bed-bound beneficiary, how to change the position of the bed-bound patient, how to use specific accessories for the patients' mobilization such as walking stick, wheel-chair)
2. Capability to apply procedures to prevent bed-sores
3. Capability to support the patient walking
4. Capability to transport the patient, ensuring its security during the entire period of transportation

MANAGEMENT AND HYGENE OF LIVING ENVIRONMENTS: He/she is able to take care of cleaning and hygiene of the patient's living environment bed hygiene, washing and ironing clothes, dish washing, respecting the sanitary and safety rules, with a particular focus on patient environment. He/she is able to support the patient to run the household and to manage domestic issues.

Indicators:

1. Capability to apply principles of environmental hygiene and care (hygiene, environmental sanification, the confinement room standards, the temperature, the lighting, etc.) and to use appropriate procedures and apply the cleaning products
2. Capability to apply disinfection techniques
3. Capability to make the bed in different moments and contexts (bed-bounded patient...)
4. Capability to prevent exposure accidents of biological products
5. Capability to support in shopping, paying bills etc.

FIRST AID: He/she is able to provide older people with emergency care/ first aid

Indicators:

1. Capacity to intervene in emergency and critics situations
2. Capacity to activate the emergency service
3. Capacity to apply first-aid technique and the procedures in case of emergency such as: hemorrhages; car accidents; techniques of artificial respiration and cardiac massage; traumatism; fractures; burns; electrocution; loss of consciousness; volunteer/in volunteer intoxications; Heimlich technique.

COMMUNICATION: He/ she is able to communicate with the care recipient and his/her family, using (if migrant) the language of working place, using, if necessary, alternative methods of communication.

Indicators:

1. Knowledge of principles, systems, styles and methods of communication (verbal communication, visual communication, etc.)
2. Capability to communicate in an appropriate way with the beneficiary and his/her family adapting her/his voice tone and posture according to the sensory deficit of the patient
3. Capability to speak and understand the language of the country where she/he works (if migrant worker), at least level A2 (identified as a prerequisite but not part of the CV)

PROFESSIONAL ETHIC: He/ she observes the principles of professional ethics.

Indicators:

1. Capability to be able to respect the confidentiality principle regarding the care recipients
2. Capability to identify correctly the violation of beneficiaries' rights
3. Capability to follow the procedures of the ethical code of the profession
4. Knowledge of the principles of the care activity legal liability and the laws regulating the profession

NOTE: the issue of **WORK HEALTH AND SAFETY** is also common to all profiles but because of compliance to national regulations it appears not to be suitable as object of ECVET credits.