

Improving Qualification for Elderly Assistants

OUTCOMES OF THE RESEARCH PHASE AND FIRST RESULTS FROM PILOTING

IQEA TRANSNATIONAL CONFERENCE BUCHAREST 05.XII.2012







THE STEPS OF THE RESEARCH PHASE

- ✓ **Identification of the professional profiles object of ECVET:** job profiles have been collected and compared, in order to define which could have been suitable for the purposes of the project.
- ✓ At the end of this step, 7 profiles have been identified:

STEP 1 – IDENTIFICATION OF PROFILES

- ✓ **Identification of the professional profiles object of ECVET:** job profiles have been collected and compared, in order to define which could have been suitable for the purposes of the project.
- ✓ At the end of this step, 7 profiles have been identified:

PROFILE	COUNTRY	MAIN WORK ENVIRONMENT		
	Italy – Sardinia Region (RAS)	Home		
Assistente familiare (AF)				
Competenze di base nell'assistenza alla	Italy – Friuli Venezia Giulia Region	Home & care facilties		
persona (AP)	(FVG)			
Home caregiver (HG)	Romania (RO)	Home		
Health care assistant (HC)	Romania (RO)	Care facilties		
Operatore socio-sanitario (OSS)	Italy (IT)	Home & <u>care facilties</u>		
	D 1 (D1)			
Care Assistant for Elderly	Poland (PL)	Home		
Core Assistant in Casial Walfars Haves	Doland (DL)	Core facilities		
Care Assistant in Social Welfare House	Poland (PL)	Care facilities		
(CAW)				

STEP 2 – COMPARISON OF TASKS

- ✓ The following step had been a detailed analysis of the tasks performed by the
 identified professionals, in order to make sure that the responsibilities and activities
 performed were actually similar (or different).
- ✓ We identified two main groups of professions: those foreseeing the provision of basic health care activities and those focusing on personal care only

PROFILE	COUNTRY	TASKS	
	Italy – Sardinia Region (RAS)	Personal care	
Assistente familiare (AF)			
Competenze di base nell'assistenza alla persona	Italy – Friuli Venezia Giulia Region	Personal care	
(AP)	(FVG)		
Home caregiver (HG)	Romania (RO)	Personal care	
Health care assistant (HC)	Romania (RO)	Personal and basic health care	
Operatore socio-sanitario (OSS)	Italy (IT)	Personal and basic health care	
Care Assistant for Elderly	Poland (PL)	Personal and basic health care	
Care Assistant in Social Welfare House (CAW)	Poland (PL)	Personal and basic health care	

STEP 3 – COMPARISON OF CURRICULA

- ✓ After an accurate analysis and comparison of job profiles, we focused on the comparison of training curricula
- ✓ We compared the training courses currently offered in the three countries in terms of hours of training, learning units, relevance of internship on the whole curriculum
- ✓ The picture showed a large variety of duration as well as structure of courses

STEP 3 – COMPARISON OF CURRICULA

PROFILE	COUNTRY	THEORY	PRACTICE	TOTAL	%
Assistente familiare (AF)	Italy – Sardinia Region (RAS)	148	52	200	26
Competenze di base nell'assistenza alla persona (AP)	Italy – Friuli Venezia Giulia Region (FVG)	150	42 (practical exercises in classroom)	192	21%
Home caregiver (HG)	Romania (RO)	120	240	360	66%
Health care assistant (HC)	Romania (RO)	120	240	360	66%
Operatore socio- sanitario (OSS)	Italy (IT)	550	450	1000	45%
Care Assistant for Elderly	Poland (PL)	240 min. up to 682	320 + 1000 practical care	560	57%
Care Assistant in Social Welfare House (CAW)	Poland (PL)	240 min. up to 682	320 + 1000 practical care	560	57%

STEP 4 – COMPARISON OF LEARNING OUTCOMES

- ✓ Even though the professional profiles had a lot of similarities, the comparison of learning outcomes has shown that number of hours dedicated to each learning outcomes varies a lot from profile to profile
- ✓ There are differences also among the learning outcomes themselves: some are included in all profiles, while others are not.

STEP 5 – ANALYSIS OF QUALITY STANDARDS

- ✓ As a final step, we submitted to all the involved organizations a questionnaire aimed to collect information about the **training process**
- ✓ Requirements to access the courses, characteristics of teachers, assessment tools in use etc.
- ✓ The involved agencies have shown a lot of similarities, concerning the way training is provided, the candidates selected and the competence assessed.

SO...

✓ Similarities and differences... how to deal with them?



LET'S RECAP OUR AIM

- ✓ According to the principles of ECVET, IQEA intends to facilitate the validation, recognition and accumulation of work-related skills and knowledge acquired during a stay in another country or in mobility or in informal contexts. It should ensure that these experiences contribute to vocational qualifications.
- ✓ Specifically, IQEA intends to contribute to the transparency of the professional profiles and qualifications object of the project with the aim to allow mutual recognition, on a voluntary base, by training agency from Italy (Sardinia and Friuli Venezia Giulia Regions), Romania and Poland, of credits (ECVET points) to people trained in any of the countries / region involved.
- ✓ Finally, IQEA also aims to support **professional mobility** from lower to higher qualifications, thus supporting the personal and professional development of persons involved in the process.

LET'S FOCUS ON WHAT WE HAVE IN COMMON!

- ✓ IQEA partnership decided to focus on similarities, rather then on differences.
- ✓ We therefore identified a «mini curriculum IQEA» based on the learning outcomes common to all the profiles
- ✓ The IQEA curriculum is therefore the object of mutual recognition between the project partners



THE IQEA CURRICULUM

- ✓ PERSONAL HYGENE: He/she is able to assists the person in personal hygiene
- ✓ NUTRITION AND FEEDING: He/she is able to assists the person in nutrition and feeding
- ✓ 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
- 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.
- ✓ FIRST AID: He/she is able to provide older people with emergency care/ first aid
- ✓ **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.
- ✓ PROFESSIONAL ETHIC: He/ she observes the principles of professional ethics

THE INDICATORS

✓ For each learning outcome, a set of indicators has been developed. For instance:

FIRST AID

- Learning outcome: He/she is able to provide older people with emergency care/ first aid
- Indicators:
- Capacity to intervene in emergency and critics situations
- Capacity to activate the emergency service
- 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; traumatisms; fractures; burns; electrocution; loss of consciousness; volunteer/in volunteer intoxications; Heimlich technique.

THE ASSESSMENT TOOLS

- ✓ For each indicator, a set of assessment tools have been developed.
- ✓ The tests have been created gathering those normally in use in the partner institutions.
- ✓ For example:
- 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
- 1. Which is the meaning of aphasia?
 - a) It's a disease that prevents people from eating
 - b) It's a disease that causes serious speaking problems to people
 - 2. In order to communicate with an elderly person with impairments of hearing
 - a) You should speak in a rapid way
 - b) You should speak slowly and loudly

THE ECVET POINTS

- ✓ For each country and qualification we calculated the number of ECVET points that might be allocated in mobility
- ✓ For instance, we have calculated that the IQEA curriculum has a relative weight of 6,5 points over a total of 15 ECVET points that might be allocated to the Romanian profile of Home Caregiver
- ECVET points are a numerical representation of the overall weight of learning outcomes in a qualification and of the relative weight of units in relation to the qualification.
- Together with units, descriptions of learning outcomes and information about the level of qualifications, ECVET points can support the understanding of a qualification. The number of ECVET points allocated to a qualification, together with other specifications, can indicate for example, that the scope of the qualification is narrow or broad.
- The number of ECVET points allocated to a unit provides the learner with information concerning the relative weight of what s/he has accumulated already. It also provides the learner with information concerning what remains to be achieved.
- [Source: ECVET TEAM]

THE COMMITTMENT OF PILOT TESTERS

- Organisations and institutions interested in pilot testing must sign a Memorandum of Understanding (MoU)
- ✓ On the basis of that, they committ to:
- insert in their curriculum the learning outcomes (and their indicators) identified as «common» in IQEA → note: these are NOT «new» learning outcomes, as they are all already part of the curricula in use in the partner countries we just ask VET agencies to name them the way they are named in IQEA, to make mutual recognition easier
- assess the learners on the basis of the IQEA assessment tool (for the IQEA learning outcomes only)
- **In case of mobility, acknowledge** to students coming from a partner organization the number of **ECVET points** agreed in the MoU

IQEA & INFORMALLY ACQUIRED SKILLS

- ✓ Please note: the IQEA MoU can be applied also in the framework of procedures aimed to validation of informally acquired skills – where in use and allowed by national / local regulations
- ✓ In this case, workers with prooved experience in the field can be submitted to the IQEA assessment even if they have not previously followed a formal training course

THE TESTING SO FAR - ITALY

- ✓ In Italy the project is now being tested in Friuli Venezia Giulia and Sardinia
- An additional Alpha test has been carried out in Emilia
 Romagna
- ✓ The testing concerns formal training (Sardinia and Friuli)
 where VET agencies are currently re-planning their
 courses adopting the IQEA learning outcomes
- ✓ In Sardinia it has also been experimented in the framework of validation of informally acquired skills, in a project aimed to support employability of homecare workers
- ✓ About 40 end-users and 5 VET agencies involved so far
 - the testing will end in Spring 2013



THE TESTING SO FAR - ROMANIA

THE TESTING SO FAR - POLAND

• THANK YOU FOR YOUR ATTENTION • ANY QUESTIONS?

Licia Boccaletti – ANS – Italy

progetti@anzianienonsolo.itwww.anzianienonsolo.it

