



---

# LAPIS IO3

---

A digital map and guide on developing and implementing work-based and innovation learning aimed at care sector employers and TVET providers

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



OUTLINE

	Social and Health Care	WBL and qualifications	Care qualifications	Case studies
	<a href="#"><u>Bulgaria</u></a>	<a href="#"><u>Bulgaria</u></a>	<a href="#"><u>Bulgaria</u></a>	<a href="#"><u>Bulgaria</u></a>
	<a href="#"><u>Cyprus</u></a>	<a href="#"><u>Cyprus</u></a>	<a href="#"><u>Cyprus</u></a>	<a href="#"><u>Cyprus</u></a>
	<a href="#"><u>Greece</u></a>	<a href="#"><u>Greece</u></a>	<a href="#"><u>Greece</u></a>	<a href="#"><u>Greece</u></a>
	<a href="#"><u>Italy</u></a>	<a href="#"><u>Italy</u></a>	<a href="#"><u>Italy</u></a>	<a href="#"><u>Italy</u></a>
	<a href="#"><u>Poland</u></a>	<a href="#"><u>Poland</u></a>	<a href="#"><u>Poland</u></a>	<a href="#"><u>Poland</u></a>
	<a href="#"><u>The UK</u></a>	<a href="#"><u>The UK</u></a>	<a href="#"><u>The UK</u></a>	<a href="#"><u>The UK</u></a>

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



## 1 Outline

---

LAPIS IO3 is a digital map and guide for care sector employers and TVET providers will help meet objective three. It will set out case studies of best practice in work-based learning and innovation learning within the social care sector.

This guide will help employers explore the various ways in which effective work-based learning programmes can be developed and incorporated into existing qualifications frameworks.

It will set out case studies of best practice in work-based learning and innovation learning within the social care sector and our will direct employers to organisations able to offer advice and support in developing validated programmes

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



## 2 Social and Health Care in the partner Countries

---

This chapter is going to provide an overall picture of the Social and Health Care system in each partner Country.

There will be a description of the main roles and responsibilities at national and local levels and how do they cope with their tasks at common level.

This part is very important to introduce the WBL practices and opportunities described in the next chapters.

### 2.1 Bulgaria

#### 2.1.1 General structure of the national Health and Social Care

In Bulgaria, two ministries manage adult social and health services. One is the Ministry of Health and the other is the Ministry of Labour and Social Policy.

This is also observed in the professions performed in the field. Basically, they are several:

- Social worker
- Social assistant in adult care
- Social work with adults with disabilities and chronic diseases, and
- Carer

The Social Worker role has the responsibility to be close to people in need, identifying their specific needs and helping them to improve their lives.

A social worker helps people in need, organises various activities and writes reports. He liaises with third parties who have to do with vulnerable people - teachers, parents, hospital staff, charities and lawyers - to ensure they receive the best care.

The main function of a social worker is to:

- be in contact with people in need
- help in crisis situations
- plan various activities
- build relationships with clients, their families and other professionals in the social care network
- work with families
- prepares reports

The social worker plays an important role in the social services sector and works mainly in government institutions, schools and NGOs. They may also work in health and social service centres.

A social worker can be found in many sectors of society:

- Working with children at risk
- Caring for older people



- Mental health care
- Working with people with disabilities
- Working with drug and alcohol addicts

Of course, above all, the social worker must be competent. There are several other key skills that he or she should have:

- Good written and verbal communication
- Listening and observation skills
- Empathy
- Resilience
- Leadership skills
- Organizational skills
- Understanding of the legal framework
- Computer literacy

Services which focus on health care for the elderly are under the management of the Ministry of Health.

## 2.2 Cyprus

In Cyprus, social care is administered under the **Social Welfare Services (SWS)** of the Ministry of Labour and Social Insurance, which was established in the '50s just prior to the independence of the island. Schemes aiming at the elderly were introduced for the first time in 1953 to help the elderly, the disabled, single mothers and families who needed financial support.

The overarching goal of the SWS is to safeguard social cohesion and social solidarity; to provide social protection, achieve social inclusion and promote equal opportunities for all citizens in the Republic of Cyprus; to combat poverty and social exclusion and to promote the interests of individuals, families and communities.

In order to achieve the above-mentioned goals, the SWS manages the following; the strategic directions related to social care, relevant to LAPIS, are highlighted in bold.

- It safeguards every individual's right to a decent standard of living
- It provides vocational training to public assistance beneficiaries in order to enter/reenter the labour market, thus achieving their social inclusion
- It provides support to the family unit so family members may effectively perform their role;
- It supports families and individuals who are facing social problems;
- **It provides protection and care to children and other vulnerable groups of people;**
- **It sensitises non governmental organisations and local authorities to provide quality social services on the local level**
- It upgrades the services provided by State Institutions and foster families to vulnerable groups of people.



It is interesting to note that **“training” is mentioned only within the framework of skill development for reentering the workforce**. There is no mention of training or learning with regard to social care, where general terms such as ‘protection’ and ‘NGO/ local authority’ sensitisation are used to highlight the strategy and the highest level.

### 2.2.1 SWS activities

SWS offers the following: Again, those pertinent to elderly- oriented social care are shown in bold

- **Staff Development and Programme Design**
- **Public Assistance, the Elderly and the Disabled**
- Community Work
- Families and Children

The first two departments explicitly address the elderly-oriented social care activity which is more central to LAPIS; via HR development, stakeholder coordination and financial support via direct assistance schemes. As we will see below, **training considerations are placed within the 1st activity of those listed above**.

The SWS personnel consist of **257 Social Welfare Services Officers** and 149 Residential Officers who occupy posts at all levels of the Services hierarchy. The Secretarial personnel, consists of **8 Secretarial Officers and 41 Assistant Secretarial Officers**. The number of the State Institution’s **hourly wage personnel is 360**.

The most natural organisational placement of continuous and work based learning activities would be the first of the above departments. Additionally, one can note that this, current, organisational setup allows to accommodate WBL and other training oriented activities in a natural way, even if these do not currently show up as tangible priorities at the strategic level as discussed just above.

### 2.2.2 Structure of the SWS

In the case of Cyprus these services are split in three segments.

- Services for the elderly and the disabled
- Services for the mentally retarded
- Services for children

We will restrict below to the description of the first two segments as these are those mostly addressed in LAPIS. We will also restrict the presentation on the **training approaches, provisions and activities currently in place**. This will highlight the key concepts that are currently in place within the central administration of the delivery of the services.

### 2.2.3 Staff development and programme design

The recognition that the continuous development of staff is of paramount importance for the effectiveness of the programmes offered by the SWS, led to the establishment of a Staff Development Service in the early sixties (1963). The successful handling of contemporary complex social problems depends greatly on the enhancement of the Social Welfare Services human



potential. Therefore, **continuous and systematic training is of vital importance and offered to the staff.**

In-Service Staff development includes:

- An on-going in-service training programme operates for all personnel in the form of **seminars and training courses**. Training is provided by experts on their field and covers a broad range of knowledge and skills.
- The opportunity to receive **additional education and vocational training abroad in specific areas of interest** where needs have been identified.
- An introductory **training course is provided to the newly appointed Welfare Officers shortly after their recruitment**. The specific training programme aims at giving general information on subjects related to the organisation, the administration, the policy and the provided programmes of the Services.
- A basic training programme which is the continuation of the introductory training course is organised in 3 stages. Stage A is organised at the central level, it lasts 2 weeks and covers theoretical aspects that are related to human behaviour. **Stage B promotes learning in the workplace and ensures the further development of professional skills and knowledge**. Stage C lasts for a week, it is organised at a central level and it aims to facilitate the assimilation of the reflection of the knowledge acquired during the two previous stages.
- **Training programmes so as the personnel, at all levels, become able to manage not only the computerised system** but also other software programmes.
- **A library which addresses the needs of all the personnel**. The Library numbers approximately 2.500 books in the fields of social sciences. The Services' personnel has full access to the Library while students and researchers may only consult books in the library.

## 2.2.4 Public Assistance, the Elderly and the Disabled

In this activity line a number of financial and other schemes are instituted. Below, we will selectively discuss those that are pertinent to training/ work based learning.

A specific activity called **Services for the Elderly and the Disabled** has as a main objective to provide the necessary supportive services to enable the Elderly and the Disabled to live at home for as long as possible and to promote their social functioning within the family and the community. This objective is supported by the following sub-services:

- Home-care service
- Day-care service
- Residential care service

Additionally, the government encourages local communities and NGOs to develop supportive services on the local level in order to accommodate the needs of the people of their communities.

## 2.2.5 Home Care

**SWS employ carers who visit people in need of care at their own premises and provide services according to the old/disabled person's needs. Carers can also be employed by Community Councils or may be self-employed.**

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



Home Care service, provides personal hygiene, house cleaning, washing of clothes, cooking, payment of bills, shopping, e.t.c.. Home care is provided to people entitled to public assistance benefits or people who can not meet their special needs by their income.

Typically, home-care does not include specialised staff and is focussed on various supportive skills, such as cooking, shopping, housekeeping. To this extent it is but marginally pertinent to training and work based learning.

### 2.2.6 Day Care

People who can not care for themselves but who also do not experience an important health issue that restricts them home, can spend their daytime at their local day-care centre where they are offered cooked meals and laundry facilities. Their entertainment and the creative spending of their time, is among the priorities of the day-care centres.

As in the above case, day-care does not include specialised staff and is not pertinent to training and work based learning.

### 2.2.7 Residential Care and Home Care Nursing

Residential Care is provided to people when their individual needs can not be met on a 24 hour basis by their family or other supportive services. Typically this service is provided for people in need of medical attention and constant support. The SWS places people in need of Residential Care in **governmental, community or privately owned residential homes**. As of 2004 residential care includes also the so-called **home care nursing**. Home care nursing, as the term implies, does not require that the person be moved to a residential home; instead he receives his medical services, physical treatment, etc. at his own premise via staff in possession of the required skills. Home care is classified as short term (below 2 months) and long term (above 2 months).

Home care nursing in Cyprus is provided to:

- Older individuals that reside in their own homes and have needs for nursing care
- People with medical or special health needs living at home
- Individuals with acute health problems
- Individuals that are discharged from hospital and still need nursing care at home
- Individuals that need palliative care or are at the final stage of their lives

(Cyprus Nursing Home Care Services, 2006)

Residential-care including home care nursing is where specialised staff is required and where training and work based learning concepts and practices become pertinent.

## 2.3 Greece

In Greece, the health and social care sector comprises of both the private and the public sector. The public sector utilizes a combined model of social health insurance along with a national health system. The National Organization for the Provision of Health Services (EOPYY) was created in





2011 acting as the exclusive purchaser of health care services financed by the National Health System (ESY) for beneficiary patients.

On the other hand, the private sector includes a range of organizations from hospitals to elderly care units and rehabilitation centres. However, there has been a significant increase in the role of NGOs and informal health care networks since 2010. Most people tend to confuse Health and Social Care Sector or might think they are not separate. This is not always the case since Elderly Care Units are mainly managed and supervised by the Ministry of Labour and Social Affairs while other Care organizations operate under the supervision of the Ministry of Health.

To summarize, the Greek Health and Social Care system is managed both by the Ministry of Health and the Ministry of Labour and Social Affairs. In addition, the responsible organization for the recognition of most educational programs in Greece is EOPPEP (National Organization for Certification of Qualifications & Vocational Guidance).

### 2.3.1 What is “social care”?

As mentioned above, health and social care work together to achieve a good quality of life for citizens, managing and satisfying their health needs. From diagnosis to treatment, a system interacts as a whole to define and apply care pathways aiming to have good health results. Nonetheless, there is a clear distinction between health and social care.

Most of the times, the aim of the Health care sector is to cure the patient of a certain disease or face a medical issue until the individual returns to their normal routine. Some times this cannot be achieved due to several reason such as the disease/condition itself (e.g. Dementia).

### 2.3.2 Who is able to receive Social Care?

As a result, the Social Care sector is the one providing care to people:

- Who are terminally-ill, providing palliative care and support
- With Neurodegenerative diseases or neurodevelopmental disorders
- Who are not self-sufficient
- With mobility limitations
- Who need care recovering from a condition

In Greece, even though the vast majority of Social Care is provided to elderly population, there is no specific age-group receiving Social Care since all age groups are included: children, adolescents, adults and seniors.

Depending on the condition and the individual needs, there are several different services available both in public and private sector:

- Care-at-Home  
Programs where health experts schedule short-term visits at the patients homes, assisting with the personal medical and nursing needs
- Assisted Living Facilities for all age-groups  
A general term for facilities that accommodate individuals who are considered vulnerable and need

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



supervision. E.g. psychiatric, neurodevelopmental disorders, limited mobility or people who are generally not self-sufficient

- Day Care Centres

Day Care Centres are Open Psychosocial Support Units that provide Social Care in a daily basis from morning to evening and include services such as psychological support, occupational therapy, group support, cognitive empowerment groups, recreational activities and more. It is important to notice that, in 1995, the Greek Ministry of Health trying to increase the number of Day Care Centres started the operation of a long-term program called “Psychargos” which completely funds the operation of a Day Care Centre as long as it fulfils certain standards. This program successfully increased the number of Day Care Centres operating at this point in the Greek region

- Care Units (Long-term & Short-term)

- Elderly Care Units
- Palliative Care Units (terminally-ill patients)

The vast majority of the public services offered consist of Care-at-Home programs and Day Care centres. On the other hand, the private sector is mostly involved in the long-term and short-term Care Units. According to Care Unit managers with years of experience, this is due to the fact that a Unit which accommodates people needs to offer 24/7 medical and nursing supervision while a day care centre will only need to cover an 8 hour shift more or less. As a result, the public sector needs to step up and offer more options, especially to elderly people, who need advanced and continuous social care provision.

## 2.4 Italy

In Italy, the **Ministry of Labour and Social Policy** mainly manages adult social and health services.

Social and health care includes the services necessary to meet the health needs of citizens, to stabilise their clinical picture, to ensure continuity between treatment and rehabilitation activities, to limit functional decline and improve the person quality of life, combining health care services with support and social protection actions.

Specific care pathways are defined to achieve these objectives, provided by health and social care workers for the treatment and rehabilitation of pathological conditions and services of a socio-assistance nature to help the person with problems of disability, economic hardship and so on.

The categories of citizens who are guaranteed social and health care are:

- chronically ill patients who are not self-sufficient (including dementia)
- end-of-life patients
- people with mental disorders
- minors with psychiatric and neurodevelopmental disorders
- people with pathological dependencies
- people with disabilities.

Depending on the person's specific condition, the severity of the symptoms, etc., the services may be provided in an intensive or extensive form, or aim at simply maintaining the person's state of health and functional capacities.

The Social sector brings together professionals who perform social and socio-assistance activities, that meet the needs of individuals and groups with emotional and psychological distress, socio-economic difficulties, and the inability to manage daily life and interpersonal relationships independently. Mainly social roles are:

- Social worker and assistant
- Educator
- Carer

Professions in the social sector are very demanding: they come into daily contact with situations of fragility and discomfort, which are stressful and emotionally difficult to manage. All citizens are guaranteed an integrated care pathway that includes, if necessary, both healthcare and social services, using desks active at almost all the ASLs or municipalities, to which citizens can turn for the multidimensional assessment of clinical functional and social needs.

The patient's health and social protection needs are detected with standardised and uniform multidimensional assessment tools throughout the region. The multidimensional assessment identifies the patient's health and care needs, regardless of the pathology from which he or she suffers, and directs operators to organise the social and health care intervention in a specific care regime (at home, in residence or in a day centre).

## 2.5 Poland

In Poland, social services for adults are the responsibility of the Ministry of Family and Social Policy. Legislative work is also underway to enable House of Social Welfares, as medical entities, to provide health services to the residents of these homes and, consequently, to regulate the status of nurses employed in these facilities.

Currently, House of Social Welfare are not health care institutions and according to the regulations, they do not have to employ nurses, but in practice they are very much needed there. There are sick people who need constant care in such places.

The running and development of the infrastructure of social welfare homes has been assigned to local governments, mainly province self-governments, however, the act does not exclude other organizational solutions, creating the possibility of creating such units for communal and district self-governments. These solutions are also based on the correct assumption that there should be small institutions at the local level responding to local needs, and the self-government district, having a much greater financial and organizational potential, has the ability to create highly specialized 24-hour support facilities open to the entire community of the region. Organizational possibilities are not used to a satisfactory degree in practical activities and, in fact, are still a theoretical alternative to the currently functioning organizational system, which places social welfare homes in the province, and financing and running directly by the province self-government or on its behalf by another non-public entity. Moreover, the legislator made it



possible to run nursing homes by other legal entities or natural persons, but the popularity of such activities is close to zero. Legal entities and natural persons much more often, when conducting activities aimed at providing services in a 24-hour system, use regulations derived from running a business.

People who require round-the-clock care due to their age, illness or disability, who cannot function independently in everyday life, who cannot be provided with the necessary assistance in the form of care services, have the right to be placed in a nursing home.

A person requiring this form of support is directed to a House of Social Welfare of an appropriate type, located as close as possible to the place of residence of the referred person, unless the circumstances of the case indicate otherwise, after obtaining the consent of that person or their statutory representative to be placed in a House of Social Welfare.

A person requiring increased medical care is referred to a care and treatment facility or a nursing and care facility.

The social welfare center provides living, care, support and educational services at the level of the applicable standard, in the scope and forms resulting from the individual needs of people staying in it. The organization of a nursing home, the scope and level of services provided by the home take into account, in particular, the freedom, intimacy, dignity and sense of security of the residents of the home and the degree of their physical and mental fitness. A nursing home may also provide care services and specialist care services to people who do not live there.

House of Social Welfares, depending on who they are intended for, are divided into the following types of homes for:

1. Elderly people
2. People who are chronically somatically ill
3. People who are chronically mentally ill
4. Adults with intellectual disabilities
5. Children and adolescents with intellectual disabilities
6. People with physical disabilities
7. People addicted to alcohol

## 2.6 The UK

In the UK context, the term “social care” refers to the personal care given by public or private organisations to help people in society who need specialised assistance to live a comfortable, healthy, fulfilling life. Services aim to provide care and protect society’s most vulnerable, this could



include children, young people, adults, or the elderly. In the UK, the Department of Health and Social Care mainly manages adult social and health care services. Local authorities are responsible for managing social care services in their areas. Councils may provide some services themselves, or they may buy services from private companies to meet the needs of their community. The amount of control individuals are able to take in relation to their own care and treatment decisions varies according to background, experience, current circumstances, and preferences.

### 2.6.1 Who can access social care?

The categories of citizens that can access social and health care are:

- Older people
- People living with a physical or learning disability
- People living with particular long-term conditions
- People recovering from a stay in hospital who may require support from social care services

### 2.6.2 Funding for social care

There is a fundamental and poorly understood distinction between social care means testing and the NHS. The 2014 Care Act aimed to prevent, reduce, or delay the need for care, where feasible, stating:

*“Effective interventions at the right time can stop needs from escalating, and help people maintain their independence for longer”.*

There is no charge for a social care assessment, all adults over eighteen are entitled to an assessment to determine whether they could qualify for help or support. There is lack of public awareness about the limitations of the current system, few people qualify for publicly funded support, the low eligibility and no cap means some people pay catastrophic costs. People with assets under £20,000 have their social care funded by the government. Individuals who do not qualify for support must pay for social care, which is capped at £86,000 over a lifetime, after this is reached, the government fund care costs, as a result, assets are often sold to cover the cost of social care.

### 2.6.3 Agreeing a support plan

If you are eligible for social care support following an assessment, you can speak with your council to agree on your social care support details. These details are your 'support plan', 'care plan', or 'care package'. Whilst availability of services varies across different councils due to high vacancy rates, local services can include:

- Support to help people develop the skills needed to live independently. Sometimes these services are referred to as 'reablement services' or 'short-term support'. They can involve help with performing certain activities again after illness or injury.
- Support with getting up in the morning, washing, dressing, and using the toilet. These services are referred to as 'personal care'.
- Help with household tasks, such as cleaning, cooking, eating meals, or shopping.

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



- Support with organising physical, leisure, or social activities. These services are called 'day-care services' or 'day-care opportunities'. They can involve the serving of meals or refreshments, help with health issues, or just provide an opportunity to meet and chat with other people.
- 'Respite care' or 'carers break', which provide opportunities for unpaid carers to take a break from caring. During these breaks, the person being cared for would have their care needs met by different carers, sometimes in a different location for a few hours, an overnight stay, or even longer.
- Support finding housing for people affected by homelessness who have care needs following a needs assessment.

#### 2.6.4 Residential care options

In the UK residential care encompasses nursing homes (care homes with nursing), and residential homes (care homes). The local council can offer social care services in different settings:

- At home – often called 'domiciliary care' or 'home care', this is the most common type of care in the UK. Mobile care workers visit patient homes and care plan needs, including personal care and short-term care, are provided in the patient's own home. Sometimes adaptations to the home are needed to assist with independent living, such as stairlift installation, shower rails, or adding a ramp to the property.
- In a care home or nursing home, often called 'residential care'. This type of care is divided between nursing homes providing medical care (for stroke patients or those with dementia), and residential homes where only basic medical care such as routine medication is provided. Patients move into these homes for the duration of the care and must fund their own daily living costs, for toiletries, entertainment, clothing etc.
- In a specialist home – instead of a home care team coming to your house to provide support, you might live in a home where care and support are offered on-site. These homes include 'sheltered housing', 'supported living', 'assisted living', 'shared lives schemes' and 'extra care housing'.
- In a day-care setting – the local council can provide day-care opportunities in a range of locations in the community, including day-care centres, sports centres, cafes, restaurants, or outdoor spaces.

#### 2.6.5 Those who do not qualify for help

Sometimes, the adults who require care don't pay for services from their council, as family or friends support them instead. The loved ones helping in these cases are 'informal carers', 'family carers' or 'unpaid carers'. These people could also be entitled to support for their mental health, finances, care training, or finding others to take over caring responsibilities while they take a respite break.



### 3 WBL and qualifications in the partner Countries

---

Before proceeding to describe the opportunities and best practices in WBL in each partner Country, we would like to outline which are the main qualifications in each system and how are they achieved and recognized.

This chapter gives a clear picture of how fragmented the Social and Health Care sector is: not only among different Countries, but also inside the same system.

Tasks, roles and qualifications are rarely matching, giving the result of an extremely varied environment, which results in a no-holistic approach towards citizens' wellness.

#### 3.1 Bulgaria

##### 3.1.1 Social workers

In order for a person to work as a social worker, a university degree (EQF 5) in Social Work or Social Pedagogy is required.

If one does not have such a degree but has a desire to work in this field, there are other qualification options. One can start by obtaining a qualification as a Social Worker in one of the training centres or can go straight to obtaining a qualification as a Social Worker.

As there are professional organizations in which one can explore issues more extensively and seek assistance:

- Social Assistance Agency
- Bulgarian Association of Social Workers (BASW)
- Society of Social Workers and Social Educators in Bulgaria

**Social work with adults with disabilities and chronic diseases** is the third level of professional qualification (EQF4). Education is related to the learning of the psychological characteristics of adults with disabilities, their specific needs and methods of social and support and counselling, which are majors in universities of Social Work, Andragogy or professional qualification in the field of Social Services. The main activities carried out by the social worker are to inform, research, assist and plan measures and activities, to assist in carrying out social work, to know and know how to apply the laws and regulations in the field of social services, which are under the wing of the Ministry of Labour and Social Policy.

**Social assistant of adults** is a second level professional qualification (EQF3). The training consists of learning about the needs of older people or more precisely professional qualification in the field of Social Services. The main activities carried out by the social assistant are aimed at improving the quality of life of the elderly. He/she provides assistance in organising activities and classes in and outside retirement homes. Here the islet is again under the wing of the Ministry of Labour and Social Policy.

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



### 3.1.2 Carers

In order for a person to work with adults as a caregiver they must have a degree in medicine.

Degree cadetships are the patient and elderly services of vocational schools, Anatolian vocational high schools or Anatolian technical high schools or nursing and elderly services associate degree programs of universities. As may also be obtained professional qualification through training and courses in the field of elderly care.

- Anatomy and physiology
- Basic information about medicines
- Personal care for the elderly and infirm
- Nutrition for the elderly and infirm
- First aid applications and dressings
- Chronic diseases
- Communication and rehabilitation for the elderly

### 3.1.3 Conclusions

With regard to the importance of training in the social care service sector and in particular with regard to residential care and home nursing that are the key areas on social care related to LAPIS, and based on the recent workshop as well as a review of recent key literature one can conclude as follows:

- **The government-run SWS acknowledges the importance of training and in particular work based learning, as this is included among the diverse types of in-house training in place.** This is a first but key condition to also highlight and mainstream the need for training and WBL also within the social care delivery points, such as residential care and home nursing.
- **The importance of training has been highlighted in both the workshop as well as in the literature, however the notion of work based learning as an important part of a fully fledged training activity is strikingly missing.** Indeed, The concept seems to be totally lacking if not largely unknown.
- To this extent **the SWS, which is aware and already practising the concept in house may be best positioned to practically and actively introduce and gradually mainstream the WBL concept** downstream in the residential home and home nursing value chain.
- **The private sector may also play an important role in using WBL and seeking a competitive advantage in this direction.** However there is a need to communicate the concept, integrate it in some tangible way in everyday activity and also communicate it in a suitable way, for example via the WBL checklist that has been integrated in the LAPIS app and its follow up peer.

## 3.2 Cyprus

### 3.2.1 Key actors and certifications

Social Care engages diverse types of specialisation and responsibilities. Below a broad classification is shown. Doctors are of course part of this service, although they are mostly engaged in specific moments in time and not in a continuous manner, which is what underpins all below social care specialisations, pertinent to the elderly and the disabled.

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.





- Various types of **physical therapists** (physiotherapists, occupational therapists, speech & language therapists etc.)
- Various types of **psychological and mental health therapists** (counsellors, trauma experts, psychologists, psychotherapists, cognitive- behavioural experts,, etc.)
- Various types of **technical support providers** (nurses, caregivers, social workers, etc.)

For most of the above specialisations **there are clear rules that apply to their registration**. In most cases (e.g. social workers, psychotherapists, etc.) university degrees are required. In some cases practical training is also required prior to entering the respective Register.

However, one must keep in mind that the landscape in professional certification is very fluid as new disciplines show up constantly to address emerging needs and specialisations. This is especially pertinent to psychology related specialisations, where conflicts are not rare between people requesting certification and the respective Register denying it on the grounds that certain requirements are missing.

Although WBL typically applies for professionals and not students, some form of WBL is required as part of the formal requirements towards acquiring a university degree and therefore a professional certification. However, a professional registration once acquired is not subject to revision or updates. Therefore and to refer to our case of WBL, **there is no way that WBL can affect the update of a professional certification**.

As an example, physiotherapists need to be entered in the Register of Physiotherapists by the Registrar of the Cyprus and Physiotherapy Establishments Registration Council and obtain a practice licence, to the provisions of “The Registration of Physiotherapists Law of 1989 (140/1989)”, as periodically amended.

Similar apply to all other specialisations

### 3.2.2 The providers of the activity in Cyprus

The actual social care activity in Cyprus, and in particular is provided

- **In public residential care institutions.** There are approximately 20- 25 public (state and municipal) institutions in Cyprus, addressing the needs of the elderly, the disabled and the mentally retarded. These are staffed by permanent as well as hourly waged staff.
- In the course of **home nursing** as discussed above. This approach is getting more and more popular as it comes with significant and obvious benefits for the recipient of the service.
- **In private residential care institutions.** These are of various specialisations and a varying sophistication. They are constantly increasing and aim at a higher quality of services, which however, must be affordable by the recipient of the service as they come at some often significant cost.

The exact balance of these three main pathways comes with conflicts and debates. Although the goal may be the same, the specific interests are not always streamlined and often the deterioration of the public service, mostly due to lack of adequate funding, is what creates



opportunities for the private sector. Perhaps a situation where the public sector would constantly enhance its services and the private sector would follow up seeking to further differentiate and add new value offerings would be a much better balance point.

In Cyprus there is currently an Association of Care Home Owners which is a newly founded entity and is not yet visible on the web. Its executive, Mr. Savvides is an important contact point for LAPIS activities in Cyprus, as it is through him and Synthesis Ltd, the local social innovation hub that LAPIS activities are unfolding in Cyprus, linking to stakeholders, and looking forward to launching in the near future the follow up service, already visible at [www.socialcareinnovation.eu](http://www.socialcareinnovation.eu).

### 3.2.3 Quality, problems and priorities in the delivery of social care services

Recently within the LAPIS activities a workshop was conducted in Cyprus with four social care workers, working in residential homes as well as within home nursing schemes in order to register their perception of the current problems and priorities within the delivery of the services.

The results of this workshop, encapsulated in a related report, resonate very well with other surveys and literature reviews conducted on the island. Particular reference is due to the key work published in 2015 in the paper Evaluation of Home Care Nursing for Elderly People in Cyprus, published in the International Journal of Caring Sciences. Key findings were as follows:

Quantitative analysis on beneficiaries' reaction towards the quality of residential care services showed that **beneficiaries overwhelmingly reported being satisfied with home care nursing personnel** and suggested the increase of the number of home care nurses.

Although this registered view may suggest a success of the service it is also the views of experts that are important as elderly people and not always mindful of the opportunities and the benefits they could unleash.

The analysis by means of focus groups and key informants interviews **highlighted three priorities as follows:**

- **[coordination]** A need for a strategic plan that would promote collaboration between formal/ statutory services such as pharmacists, physiotherapists, and informal/ non-regulated services.
- **[training]** Consideration should be given in the **development of a common, integrated and multidisciplinary training programme both for home care users and nursing personnel in all European countries**. National and international standards should be adapted to meet district and local needs of home care. In most European countries, health care in home care is part of the health care system whereas local governments organise and take responsibility for the social aspect of home care.
- **[data collection & assignment of responsibilities]** Decisions need to be made in the planning stage of home care and guidelines to be developed so that each level of administration acknowledges its responsibilities. Further, research studies in relation to chronic disease of older adults, existing administrative data about health events, such as monitoring the number of injuries due to falls among seniors with hospital discharge data is also an essential component in order to investigate the multidimensional aspect of evaluation of home care nursing.



Clearly, the training requirement surfaced in this report as a priority area both explicitly (second recommendation) as well as implicitly within the third recommendation above. This was also highlighted in the recently conducted LAPIS workshop/ focus group in Cyprus.

### 3.2.4 Organisations in Cyprus to support WBL

As reported in the first part of the desk research, the concept of WBL is largely missing in Cyprus. It does not show up in the key related scientific literature and is something the sector is largely unaware of. During the workshop and the interviews, our interlocutors appeared at most vaguely aware of the term, while more often it did not ring any bell at all.

We have found two important exceptions to this.

- First, the government itself and in particular the Social Welfare Services appears to be aware of the concept and in fact is practising it itself in the administration of the social care services in Cyprus. However, it is not at all clear what the pathway could be to transfer this awareness and know-how also at the more operational level, at the daily routing of home care operations. Additionally one should keep in mind that the government is a slow organisation, with complex decision making. We will however deliver this LAPIS work to the officials in the SWS so at least we can raise the issue and suggest that they look into a strategy that can help the sector uptake practices similar to those they have already instituted in-house . A second approach, that in fact was recommended to us by Dr. Stergiou, an executive of SWS in the area of Larnaca would be to produce a publication raising for the first time the issue in Cyprus. This could then be more easily distributed within the related government executives; and perhaps ,also more credibly.
- Second, the Cypriot Social Innovation Hub, operated by Synthesis Ltd. in Nicosia is an organisation that has been perhaps more than any other on the island active in training on social issues, including social care. We have had numerous discussions with Synthesis executives up to its CEO, Mr. Isaias and we found a most fertile and knowledgeable ground for pushing forward issues such as WBL.

Mr. Isaias introduced us to a number of local home care stakeholders, including the newly formed Association of Home care owners and his president Mr. Savvides, who was pivotal in facilitating the organisation of the LAPIS workshop and the organisation of several interviews. Synthesis also contributed to the elaboration of a WBL evaluation checklist and most importantly agreed to launch with us the follow up activity ([www.socialcareinnovation.eu](http://www.socialcareinnovation.eu)) on Cyprus. The tangible co-op is visible in the About Us page of this service.

Overall, the Synthesis people appreciate the importance of the WBL concept. Yet, they also strongly suggested that the overall idea be put in a cost- benefit framework; indeed it makes no sense to praise WBL when you have no estimation of what the costs of its introduction could possibly be. Synthesis also agrees to be part of a potential publication on the matter.

### 3.2.5 Conclusion

The four main axis of action in order to promote WBL uptake in Cyprus as follows:

- Deliver to the SWS government officials a LAPIS report highlighting the WBL potential and way forward in Cyprus.



- Elaborate a short publication communicating the LAPIS results and related recommendations
- Issue a press release acting as a gateway to the report and the publication
- Uptake WBL in the follow up LAPIS service as a distinct and tangible checklist that providers can set up to describe the conformance of their unit with WBL

All these items are realistic and will be concluded within the LAPIS timeframe. As far as the publication is concerned we will opt for a fast publication approach so that we can hopefully have the actual publication within the project lifetime and promote it also via the envisaged press release.

The suggested cost benefit analysis, although fully valid as a concept, is not something we can push forward within the short time frame of LAPIS and will therefore not be given any tangible follow up.

### 3.3 Greece

#### 3.3.1 Who is working in Social Care?

Social Care provision may include several different aspects and responsibilities but there are some main roles and specializations that are involved regardless of the designed care pathway:

- Social Worker
- Psychologist
- Mental Health Counselor
- Nurse (providing Health Care but always collaborating with the Psycho-social Sectors)
- Caregiver
- Therapists (physiotherapists, occupational therapists, speech & language therapists etc.)

#### 3.3.2 Training needed for Caregivers

The training needs are different almost for every role/position. To begin with, most organizations for the role of the Caregiver require no experience, no training or anything, just the will to work in that field. The caregiver's responsibilities differ from an organization to another but most commonly, caregivers are the ones who will help the individual with the bathing & the feeding process, who will help with the beneficiary's bed and clothes, their appearance (taking care of hair, nails, oral hygiene). There are certain certificates and short-cycle seminars that aim to educate people on caregiving but they are not fairly popular in Greece. After discussing with senior care leaders, they pointed to us that the caregiving role in Greece is not advanced in terms of education because the amount of informal – family caregivers is huge. They highlighted the fact that the vast majority of cases needing care (e.g. dementia, mental disorders, seniors needing care in general) burden the family who will not accept to institutionalize their loved one and they will do their best to adapt to the caregiver's role.

#### 3.3.3 Training needed for Social Workers

For the Social Worker role, things are more distinct. The Social Worker needs to have a license. In order to apply for the license, you need a Social Worker degree (4-year degree in Greek



universities; EQF Level 6) or any other appropriate Social Worker degree from abroad and apply for it. Then there is a distinction between a Social Worker being employed and working as a freelancer. Being employed is the condition where only the license is required but in order to work as a freelancer social worker, you need to have at least 5 years of certified experience as an employed Social Worker and the field where you work as a freelancer Social Worker must be the same with the field that you worked during that 5 years.

### 3.3.4 Training needed for Psychologists

To work as a Psychologist, the requirements are similar to the Social Worker. In order to get the license, you need to have a Psychology Degree (in Greece this is 4 years of University education; EQF Level 6) and no criminal record. Then you apply for a license and by the time you have it you can also work as an employee and a freelancer.

### 3.3.5 Training needed for Mental Health counsellors

The Mental Health Counsellor role is a big debate in Greece because through our desk research, we identified that there is no clear legal or educational framework on who can become Mental Health Counsellor. This title seems to be used as an inclusive title for many different specialties that for different reasons want to be called mental health counsellors. In detail, Psychologists that have degrees from abroad can work as “mental health counsellors” until they are done with the recognition of studies. These people are not allowed to officially work as Psychologists because their license needs the recognition of studies. Furthermore, people with no basic degree that attend courses/seminars recognized by EOPPEP can start working as freelancer mental health counsellors. It is interesting to note that these courses/programs differ a lot from each other both in duration and content (6-month training in Counselling Therapy – 3-year training in Integrative Psychotherapy).

## 3.4 Italy

Professionals in the social area tend to specialise in an area of intervention, such as minors, the elderly, people with disabilities, people suffering from mental illness or substance abuse, victims of violence, immigrant men and women, and the homeless.

The aim is to identify the problems faced by the target group and to support people in finding a solution.

Depending on the type of distress, there are different options of care:

- day and night care services for the elderly, the sick and the handicapped,
- protection services for women and minors,
- community for the treatment of alcohol and drug addictions.

The training required therefore tends to be specific to each professional field: in fact, to manage psychological distress requires different skills from those needed to work in a community for the disabled.



### 3.4.1 Social worker

A Social Worker is a specialised worker at the service of the community, who deals with minors, groups or families in a particular state of difficulty to prevent and reduce problems.

The professional figure therefore operates in very diverse contexts:

- the problems of minors
- mental health and drug addiction problems,
- families in economic difficulty and disabled,
- people in prison
- integration of immigrants and non-EU nationals in host communities.

In order to become a social worker, it is necessary to obtain a degree (three-year or master's degree) in the field of social work, pass the state exam and register on the professional register.

There are two categories of Social Workers:

- Social Worker who performs **operational tasks in the service of the community**, needs a three-year degree (L-39). During the degree there are internship periods to get closer to the profession and gain experience in the field. After graduation it is necessary to pass the State examination that will allow registration in section B of the Professional Register.
- **Specialist** Social Worker has managerial tasks, organises and coordinates social services. It is necessary to hold a Master's Degree in 'Social Service and Social Policy'. Also, in this case it is necessary to sit a state examination for the enrolment in section A of the Register.

### 3.4.2 Educator

An educator is responsible for organising and managing projects and activities of educational and rehabilitation services for people in trouble, families and people in difficult circumstances, from children to the elderly, regardless of social class. There are two different educator figures, one works in rehabilitation area and the other in pedagogical field.

The educator's main tasks include:

- planning and development of educational actions and services
- organisation of care and rehabilitation
- analysis of local needs, designing educational and re-educational programmes for people in trouble
- appointing and organising the work team, carrying out educational and social reintegration interventions, assessing and reporting on the situation of family units, assisting persons in charge with a growth and reintegration pathway
- preparation of documentation and analysis of services offered
- analysis and evaluation of educational interventions, reporting on the progress of the interventions carried out and in progress, promoting and organising assistance and voluntary groups

To become a socio-educational professional educator a degree in Educational Science is required, in order to work in socio-educational services field such as:

- social centres
- territorial educational services



- listening and support centres
- support services for socially vulnerable individuals and families
- care facilities for the elderly
- services for drug addicts
- centres for the severely disabled people

An Educational Science degree is mandatory.

### 3.4.3 Carer

Carer helps people with difficult conditions to meet their basic needs, professionally promoting their well-being and autonomy. This can take place at home, in hospital or in the residential facilities where they live.

They generally work with people who are socially disadvantaged or ill:

- elderly people with social and health problems,
- bedridden patients, families, problematic children and young people,
- people with disabilities, adults in difficulty or with psychiatric problems,
- hospital in-patients.

The competence of the carer mainly concerns integrated interventions of direct assistance to the person and complementary help with assistance and protection activities for the improvement of the assisted person's living, hygienic and relational conditions in home services and guardianship facilities.

Cares take care of personal hygiene and changing linen, participates in preparing and/or helping to eat meals, as well as helping with the correct taking of prescribed medication and the correct use of simple medical devices. They collaborate with other operators of different professionalism, but with the same aims (including doctors, nurses, psychologists, physiotherapists, family of the patient). They assist in walking, in the correct use of aids, aids and equipment, in learning and maintaining correct postures and observe, recognise and report some of the most common warning symptoms that the patient may present (pallor, sweating, etc.) in order to prevent complications, although they may not intervene directly but refer to a doctor.

Carer's support to families can significantly reduce the use of hospitalisation and decrease the sense of abandonment.

In order to obtain the qualification of Health and Social Worker, it is necessary:

- a mandatory training course lasting approximately 1,000 hours
- an apprenticeship
- a final test before a commission appointed by the Region where the course was held, with the final issue of a qualification certificate.

## 3.5 Poland

House of Social Welfare employ the staff most often in the following positions:

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



- a social worker
- guardian
- nurse
- psychologist

In the governmental classification of professions and specialties, the profession: carer in a nursing home is listed under the number 341203. It is also a profession marked with the letter S, and therefore one that can be learned in vocational education.

People who have not graduated from a trade school (former vocational school), and would like to try their hand at being a carer in the House of Social Welfare, can choose a vocational course, for example at an evening or weekend school. The courses are often free of charge - it is worth asking about the possibilities of education in this field, for example at the employment office. However, as part of the profession of a guardian, you can obtain a position, depending on your qualifications:

- senior qualified carer in a House of Social Welfare
- senior carer of an elderly person
- a qualified carer in a House of Social Welfare
- senior guardian
- carer of an elderly person
- senior medical guardian
- medical guardian
- guardian
- junior guardian

The positions of junior guardian, guardian and senior guardian may be employed by people without specialized vocational training, with only secondary education (e.g. general education). People with such education are not prepared to work in such a position. They gain their knowledge and qualifications through instruction of older employees, practical training and training courses.

All other positions are inextricably linked with appropriate professional preparation. The professions of child caregiver and medical caregiver are medical professions and their qualifications are specified in separate regulations.

A qualified carer in a nursing home must have a diploma in the profession of a caretaker in a nursing home, a carer for an elderly person - a diploma in the profession of a carer for an elderly person. Education in these professions takes place at the post-secondary level and lasts 2 years, and also takes place as part of apprenticeships.

On the other hand, people who have completed their training in the profession of a disabled person's assistant may be employed in the following positions: assistant to a disabled person (min.

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



Grade category - VII) or, after meeting the requirement of 5 years of work experience - senior assistant to a disabled person (min. Category grade - XI). At the same time, it should be emphasized that the core curricula for education in this profession contain different content than in the profession of a carer in a nursing home, and the education itself lasts half the time, because it is only 1 year. A person with such professional preparation should conduct broadly understood environmental rehabilitation, the assumption of which is to provide services to people with disabilities in the local community. Rather, it should be employed to provide specialist care services to people with disabilities at their place of residence or in day care centres.

Tasks as a caregiver in House of Social Welfare vary, depending on the needs of the charges. It can be help in everyday activities, e.g. related to satisfying basic needs - eating, changing, washing, etc. The career's duties in a nursing home also include assistance in rehabilitation and activation activities recommended by a doctor or other specialist. A House of Social Welfare employee can also advise on, for example, spending free time, planning expenses. He tries to mobilize the charges to use their advantages and interests, for example to develop in their free time, develop positive habits or find a job. The guardian is also a person to whom a resident of Nursing Home in a difficult situation can turn. The required features and skills include: resistance to stress, emotional maturity, good physical condition, ease of establishing contacts with other people and a lot of patience.

Unfortunately, in Poland, the profession of caregiver in House of Social Welfare is very poorly remunerated. Only medical caregivers who are classified in Poland, as well as medical staff employed in, for example, hospitals earn more.

## 3.6 The UK

### 3.6.1 The workforce

The health and social care workforce for adults in the UK includes:

- Care workers
- Personal assistants
- Social workers
- Occupational therapists
- Registered nurses
- Housing support workers
- Those in managerial roles

### 3.6.2 Staff training (prerequisites)

In the UK, you do not necessarily need any qualifications to start working in social care; what's important are the person's values. Most social care qualifications are vocational, and can be done once you begin your role, as the skills needed are specific to the job being done, however, many do require GCSE Maths and English. Certain qualifications can give potential workers an idea of what working in the sector may be like, but these are not required, such qualifications include:



Level 1 Award in Preparing to work in the care sector; Level 2 Certificate in Preparing to work in the care sector; Level 3 certificate in preparing to work in the care sector. Any member of the public can choose to enrol on these courses and self-fund them, sometimes a local JobCentre Plus or College may be able to help you find a suitable course and potential funding for it, or help you to apply for an advanced learner loan for the fees.

### 3.6.3 Staff qualifications (entry level- mandatory)

When you begin working as a carer you will undergo a thorough induction which includes the Care Certificate. This is a set of standards that everyone needs to perform their role, however, it is not externally validated. Employers should also ensure relevant mandatory training is undertaken, such as fire safety, moving and handling, first aid. NVQ's have been replaced by Diplomas which range from level 2-5, these are evidence based so must be completed whilst working, although many workers in the sector still hold valid NVQ's. It is also possible to enrol on specialist courses for things like dementia care, autism, communication skills, end of life care, activity provision, team leading. There are many short courses available online, and with local charities and community groups.

### 3.6.4 Staff qualifications (senior roles- mandatory)

Some roles such as social workers and occupational therapists require a degree, and some more senior roles such as managers or counsellors may require specific qualifications.

Useful links to find out more about:

- Study and training: <https://www.healthcareers.nhs.uk/career-planning/career-planning/study-and-training/study-and-training>
- Different roles within the adult health and social care sector:  
<https://www.skillsforcare.org.uk/Careers-in-care/Job-roles/Job-roles-in-social-care.aspx>
- National Careers Service: <https://nationalcareers.service.gov.uk/job-profiles/care-worker>

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

## 4 Care qualifications in the partner Countries

In this section, we will describe in detail how each qualification is obtained, based upon which prerequisites and which are the main related training providers, Country by Country.

A cross-referencing with the EQF<sup>1</sup> (European Qualification Framework) system will help to identify common threads among the plethora of roles and tasks which populates the Social and Health Care system of the partner Countries.

### 4.1 Bulgaria

#### 4.1.1 Social pedagogy

Social care EQF6	<b>Prerequisites:</b> Age 16+ High school education	The Bachelor's degree is obtained after a four-year course /8 semester and 240 credits/ in full-time study, according to the attached Curriculum. Opportunities for additional qualification: To pursue further education in a Master's degree To obtain a second higher education To participate in various forms of continuing education To pursue qualification as a Social Worker in Training Centres or qualification as a Social Worker.	240 credits	University of Sofia, University of Veliko Tarnovo, University of Rousse, University of South-West, University of Plovdiv, University of Thrace, University "Prof. Dr. Asen Zlatarov" and Shimen University
---------------------	--	---	----------------	--

#### 4.1.2 Social work

Social care EQF6	<b>Prerequisites:</b> Age 16+ High school education	The Bachelor's degree is obtained after a four-year course /8 semester in full-time study	277 credits	Sofia University, Veliko Tarnovo University, Plovdiv University, Rousse
---------------------	---	---	----------------	---

<sup>1</sup> Consult <https://www.cedefop.europa.eu/en/projects/european-qualifications-framework-efq> or <https://europa.eu/europass/en/europass-tools/european-qualifications-framework> for more details on EQF



				University, Southwest University and Shumen University
--	--	--	--	--

#### 4.1.3 Nurse

Social and health care EQF6	<b>Prerequisites:</b> Age 16+ High school education	The Bachelor's degree is obtained after a four-year course in full-time study	240 ECTS credits	Sofia University, Southwest University, University of Rousse, Medical University - Plovdiv, Medical University - Sofia, Medical University - Pleven, Medical University - Varna, University of Thrace
-----------------------------	---	---	------------------	---

#### 4.1.4 Medical rehabilitation and occupational therapy

Social and health care EQF6	<b>Prerequisites:</b> Age 16+ High school education	The Bachelor's degree is obtained after a four-year course /8 semester in full-time study	260 ECTS credits	Sofia University, Medical University - Pleven, Thracian University, Medical University - Sofia, Medical University - Plovdiv
-----------------------------	---	---	------------------	--

#### 4.1.5 Management of social work institutions

Social work EQF7	<b>Prerequisites:</b> Bachelor's degree in Social Work	The Master's degree is obtained after a one-year course/ 2 semesters in full-time study	81 credits	Sofia University, University of Rousse, Plovdiv University
------------------	---	---	------------	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.1.6 Clinical Social Work

Social and health care EQF7	<b>Prerequisites:</b> Bachelor's degree in Social Work and related subjects	The Master's degree is obtained after a one-year course/ 2 semesters in part-time studies	69 credits	Sofia University, University of Rousse, Medical University- Varna
-----------------------------	--	---	------------	---

#### 4.1.7 Clinical Psychology

Health care EQF7	<b>Prerequisites:</b> Bachelor's degree in psychology, health care, health management, medicine and dentistry, public health, medical rehabilitation and occupational therapy	The Master's degree is obtained after 9 months (1500 hours of practical training)	240 ECTS credits	Sofia University, Medical University - Plovdiv, Southwest University, Veliko Tarnovo University, Medical University - Sofia, Medical University - Varna, Plovdiv University
------------------	--	---	------------------	---

#### 4.1.8 Social assistant in adult care

Social care EQF3	<b>Prerequisites:</b> The minimum entry requirements for applicants are: <ul style="list-style-type: none"> <li>for students: completion of primary education;</li> <li>for people aged 16 or over: completion of upper secondary education.</li> </ul>	Qualification as a social assistant can be obtained from courses at vocational education and training centres  Duration: 660 study hours Second level of professional qualification State diploma - Certificate of professional qualification 24 hours online access Practical training		Centres for vocational education and training
------------------	--	---	--	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.1.9 Social work with adults with disabilities and chronic diseases

Social and health care EQF4	<b>Prerequisites:</b> Age 16+ High school education	Acquisition of a qualification in the profession "Social work assistant" by vocational education and training centres		Centres for vocational education and training
--------------------------------	---	---	--	---

#### 4.1.10 Carer

Social and health care EQF2	<b>Prerequisites:</b> The minimum level of education for persons, at the age of 16 years shall be completed primary education. Those who successfully pass the state examinations in the theory and practice of the profession receive a Certificate of Professional qualification.	Degree cadetships are the patient and elderly services of vocational schools, Anatolian vocational high schools or Anatolian technical high schools or nursing		Vocational schools, Anatolian vocational high schools or Anatolian technical high schools or nursing
--------------------------------	--	--	--	--

## 4.2 Cyprus

Below is a compilation of social care related qualifications one can acquire in Cyprus. As an overall conclusion there is an abundance of higher level (EQF = 6/ 7) possibilities but very few, lower EQF options; in fact only Frederick University offers a EQF = 5 ‘Paramedic’ qualification.

This is a major cause for the significant lack of social care resources that is currently observed on the island and has been validated by a great lot of contacted stakeholders

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

### 4.2.1 Bachelor Degree

Psychology & Social Care EQF = 6	<p><b>Prerequisites:</b> High school Pancyprian Examinations organised by the Ministry of Education and Culture for admission into establishments of higher education. Entry on the basis of Panhellenic Examinations: 10% of the total number of places offered through the Pancyprian Examinations may be taken up by candidates passing the Panhellenic Examinations. Entry on the basis of International Examinations An additional number of places (3%) of admissions from Cyprus may be sought on the basis of the results of international examinations such as GCE, Baccalaureate or other equivalent examinations</p>	<p><b>Course delivery:</b> Class, practice <b>Duration:</b> 4 years <b>Course structure:</b> 8 semesters <b>Fee:</b> ~10000E/ y</p>	EU	Faculty of Social Sciences and Education  University of Cyprus
Social Work AND Psychology EQF = 6	<p><b>Prerequisites:</b> High school graduation</p>	<p><b>Course delivery:</b> Class, practice <b>Duration:</b> 4 years <b>Course structure:</b> 8 semesters <b>Fee:</b> ~8500E/ y</p>	EU	School of Humanities and Social Sciences  University of Nicosia

### 4.2.2 Master's Degree

Clinical Psychology EQF = 7	<p><b>Prerequisites:</b> High school graduation</p>	<p><b>Course delivery:</b> Class, practice <b>Duration:</b> 3 years</p>	EU	School of Humanities and Social Sciences
--------------------------------	---	---	----	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<b>Course structure:</b> 6 semesters <b>Fee:</b> ~8500E/ y		University of Nicosia
Counselling Psychology EQF = 7 1st Cycle (Master's Degree)	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice <b>Duration:</b> 2.5 years <b>Course structure:</b> 5 semesters <b>Fee:</b> ~8500E/ y	EU	School of Humanities and Social Sciences  University of Nicosia
Social Work EQF = 7 1st Cycle (Master's Degree)	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice OR distance learning <b>Duration:</b> 1.5 years <b>Course structure:</b> 3 semesters <b>Fee:</b> ~8500E/ y	EU	School of Humanities and Social Sciences  University of Nicosia
Educational Psychology EQF = 7 1st Cycle (Master's Degree)	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice OR distance learning <b>Duration:</b> 1.5 - 2.5years <b>Course structure:</b> 3 -5 semesters <b>Fee:</b> ~8500E/ y	EU	School of Humanities and Social Sciences  University of Nicosia

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



#### 4.2.3 Nursing Bachelor Degree

EQF = 6	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice <b>Duration:</b> 4 years <b>Course structure:</b> 8 semesters <b>Fee:</b> ~6000E/ y	EU	Dpt. Of Health Sciences  European University Cyprus
---------	---	---	----	---

#### 4.2.4 Nursing Master's Degree

This is in three variants:

1. Community Nursing
2. Mental Health Nursing
3. Emergency and Intensive Nursing

EQF = 7	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice <b>Duration:</b> 1.5 years <b>Course structure:</b> 3 semesters <b>Fee:</b> ~6000E/ y	EU	Dpt. Of Health Sciences  European University Cyprus
---------	---	---	----	---

#### 4.2.5 Exercise Physiotherapy Master's Degree

EQF = 7	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice	EU	Dpt. Of Health Sciences
---------	---	--	----	-------------------------

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<b>Duration:</b> 1.5 years <b>Course structure:</b> 3 semesters <b>Fee:</b> ~6000E/ y		European University Cyprus
--	--	---	--	-------------------------------

#### 4.2.6 Social work Bachelor degree

EQF= 6	<b>Prerequisites:</b> High School Graduation	<b>Course delivery:</b> Part/ Full time <b>Duration:</b> 4 - 5 years <b>Course structure:</b> 8 semesters <b>Fee:</b> 65E/ ECTS	EU	School of Education and Social Sciences  Frederick University
--------	---	---	----	--

#### 4.2.7 General Nursing Bachelor degree

EQF= 6	<b>Prerequisites:</b> High School Graduation	<b>Course delivery:</b> Part/ Full time <b>Duration:</b> 4 - 5 years <b>Course structure:</b> 8 semesters <b>Fee:</b> 65E/ ECTS	EU	School of Health Sciences  Frederick University
--------	---	---	----	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.2.8 Paramedic Diploma

EQF= 5		<b>Course delivery:</b> Full time <b>Duration:</b> 2 years <b>Course structure:</b> 4 semesters <b>Fee:</b> 65E/ ECTS		School of Health Sciences  Frederick University
--------	--	---	--	--

#### 4.2.9 Community Health Care specialisation in Wound Prevention and Care – Master’s Degree

EQF= 7		<b>Course delivery:</b> Full time <b>Duration:</b> 2 years <b>Course structure:</b> 90 credits required <b>Fee:</b> 65E/ ECTS		Division of Health S& Education  Frederick University
--------	--	---	--	--

#### 4.2.10 Nursing and Speech Therapy Bachelor Degree

EQF = 6	<b>Prerequisites:</b> High school graduation	<b>Course delivery:</b> Class, practice <b>Duration:</b> 4 years <b>Course structure:</b> 8 semesters <b>Fee:</b> ~10.000/ y	EU	Cyprus University of Technology
---------	---	--	----	------------------------------------

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

## 4.3 Greece

### 4.3.1 Social care

European Care Certificate (EQF level 3)	No previous education needed	Formal learning, 25 hours of e-learning, 100-question exams, 80-100 euro cost	Officially recognised by several European countries	<p>Institute for Employment Development (<a href="https://ianap.gr/">https://ianap.gr/</a>)</p> <p>TACT Hellas (<a href="https://www.tacthellas.org/">https://www.tacthellas.org/</a>)</p> <p>Institute of Domestic Rehabilitation (<a href="https://iea.org.gr/">https://iea.org.gr/</a>)</p>
---	------------------------------	---	---	--

### 4.3.2 Health Care

Training & Certification of Health Care Professionals in Health Care Quality specialized in Clinical Governance (EQF 7-8)	Bachelor's Degree or more (MSc/MA, PhD, Post-Doc etc.)	Formal Learning, 1 month duration and 96 hours e-learning, 250 Euro Cost	10 ECTS	University of West Attica
Effective Communication between Health Expert – Patient	Bachelor's Degree in Health sector, certified Nurses, Assistant Nurses, Microbiologists,	Formal learning, 3 months duration for 72 hours of distance learning, evaluation test	Official Certification from National and Kapodistrian University of Athens	National and Kapodistrian University of Athens

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

	Radiologists, Occupational Therapists	after each unit, ~300 euros cost		
Health Coaching for Health Experts	Graduates of Health Sector	Formal learning, 2 months duration for 50 hours of distance learning, evaluation test after each unit, ~300 euros cost	Official Certification from National and Kapodistrian University of Athens	National and Kapodistrian University of Athens

#### 4.4 Italy

In Italy we use **CFU** (University Educational Credits) to evaluate the training done. CFU were introduced by Ministerial Decree No 509 of 3 November 1999. Their purpose is to quantify in numerical figures the work done by the student during his or her course of study, in all the hours of lessons, home study, attendance of laboratories or internships inherent to the course being followed. Generally, the rule applies that 1 CFU is equivalent to 25 hours of work in which the student will acquire the skills necessary to pass the examination.

CFUs are a simplification with regard to the recognition of examinations taken in other Italian or European universities (e.g. as part of the Erasmus programme) and are transferable via the ECTS system (in English: European Credit Transfer System).

As far as doctors in specialised training are concerned, the commitment per CFU is weighted according to two types of activity:

- professionalising activities (practical and internship activities);
- and other types of activities.

For professionalising activities, 1 CFU is equivalent to 30 hours of commitment instead of 25 hours: this makes it possible to equate the trainee's weekly hourly commitment with that of full-time doctors in the National Health Service (38 hours per week).

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.4.1 Master Coordination Health Professions

<b>EQF Level:</b> 6	<b>Prerequisites:</b> Health workers with Bachelor's degree and/or Master's degree;	<b>Course delivery:</b> Online <b>Duration:</b> 12 months /1500 hours <b>Course structure:</b> self-assessment tests Online; Participation in network activities; Mandatory completion of an internship; final written exam with a thesis and a multiple-choice test. <b>Fee:</b> €1300	<b>Recognition:</b> CFU 60	<b>Main Providers:</b> Pegaso/ Icotea
---------------------	--	--	-------------------------------	--

#### 4.4.2 Professional ethics course for social workers

<b>EQF Level:</b> 4	<b>Prerequisites:</b> registered as social worker	<b>Course delivery:</b> Online <b>Duration:</b> 4 days /15 hours <b>Course structure:</b> in-depth study of regulatory references to improve the decision-making and organisational performance of social workers. Disciplinary sanctions applied by the currently applicable code of ethics for the role of a social worker <b>Fee:</b> 99 €	<b>Recognition:</b> 15 CFU	<b>Main Provider:</b> Icotea
---------------------	--	---	-------------------------------	---------------------------------

#### 4.4.3 Master for Special educational needs

<b>EQF Level:</b> 5	<b>Prerequisites:</b> - Age 18+ - Bachelor's degree	<b>Course delivery:</b> online or blended learning, (learner can select one mode of study at their convenience). <b>Duration:</b> 1500 hours <b>Course structure:</b> The master is composed of 4/5 modules;	<b>Recognition:</b> 60 CFU	<b>Main Provider:</b> Icotea
---------------------	---	--	-------------------------------	---------------------------------

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<p><b>Assessment:</b> The final examination consists of the production and discussion of a paper to be handed in to the board and a test of multiple-choice questions.</p> <p><b>Fee:</b> 650€</p>		
--	--	--	--	--

#### 4.4.4 Master's/Diploma on ABA/BES/DSA Method teaching for autism

<b>EQF level:</b> 6	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>- teachers, school managers, freelancers and any other figure, within public institutions as well as private companies</li> </ul>	<p><b>Course delivery:</b> online or blended learning, (learner can select one mode of study at their convenience).</p> <p><b>Duration:</b> 3000 hours</p> <p><b>Course structure:</b> ABA/BES/DSA method for autism, based on recognising and working with Special Educational Needs and Specific Learning Disorders</p> <p><b>Assessment:</b> intermediate and final tests.</p> <p><b>Fee:</b> 650€</p>	<p><b>Recognition:</b></p> <p>120 CFU, 50 ECM</p>	<p><b>Main Provider:</b></p> <p>Icotea</p>
---------------------	--	---	---	--

#### 4.4.5 Master in family mediation

<b>EQF level:</b> 4	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>Diploma / equivalent recognised qualification</li> </ul>	<p><b>Course delivery:</b> Online</p> <p><b>Duration:</b> 1500 h</p> <p><b>Course structure:</b> Basic training in family mediation</p> <p><b>Assessment:</b> no exams, submission of assignments only.</p> <p><b>Fee:</b> 650€</p>	<p><b>Recognition:</b></p> <p>60 CFU, 40 ECM</p>	<p><b>Main Provider:</b></p> <p>Icotea</p>
---------------------	---	---	--	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.4.6 Course for Healthcare and social workers

<b>EQF level:</b> 3	<b>Prerequisites:</b> - Age 18+ - Secondary school certificate	<b>Course delivery:</b> in-class teaching <b>Duration:</b> 1000 hours - 550 h theory-practice - 450 h internship <b>Course structure:</b> - 550 h theory-practice - 450 h internship <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> Variable	<b>Providers:</b> specialized VET schools
---------------------	--	--	--

#### 4.4.7 Professional training course for healthcare and social workers (TEGS: Technical Expert in Service Management)

<b>EQF Level:</b> 3	<b>Prerequisites:</b> - Age 18+ Diploma / equivalent recognised qualification. Profile declined in the social welfare sector on the specific competences of service organisation and care and user management	<b>Course delivery:</b> in-class teaching professional training course <b>Duration:</b> 170 hours <b>Course structure:</b> 110 theoretical-practical and 60 internship hours. <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> Variable	<b>Main Provider:</b> Agenfor
---------------------	--	---	----------------------------------

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



#### 4.4.8 Diploma for Social service workers

<b>EQF level:</b> 4	<b>Prerequisites:</b> High school Diploma	<b>Course delivery:</b> flexible delivery methods including online and in-class teaching (learner can select one mode of study at their convenience). <b>Duration:</b> 1-5 years <b>Course structure:</b> -subjects of study divided into 4 areas: socio-cultural, hygienic-sanitary, psychological-social and technical-operational -training in social welfare facilities <b>Assessment:</b> final exam <b>Fee:</b> Variable		<b>Providers:</b> technical schools
---------------------	---	--	--	--

#### 4.4.9 Course for Socio-assistant operator OSA

<b>EQF Level:</b> 5	<b>Prerequisites:</b> - Age 18+ - Middle school diploma	<b>Course delivery:</b> flexible delivery methods including online and in-class teaching. <b>Duration:</b> 600 hours <b>Course structure:</b> 336 hours in asynchronous mode, 84 hours for video lessons, 180 hours for Project Work, with topics assignment. <b>Assessment:</b> final exam <b>Fee:</b> 700 €		<b>Main Provider:</b> Alteredu
---------------------	---	---	--	-----------------------------------

#### 4.4.10 Degree in Social service (L39)

<b>EQF Level:</b> 6	<b>Prerequisites:</b> - Age 18+ - High school Diploma	<b>Course delivery:</b> variable <b>Duration:</b> 3 years <b>Course structure:</b> University study with internships at local authorities, family homes, associations dealing with social hardship, public health companies and hospitals. <b>Assessment:</b> 20 exams and thesis <b>Fee:</b> Variable	<b>Providers:</b> Italian Universities
---------------------	---	--	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

## 4.5 Poland

### 4.5.1 Social care of elderly in a social welfare home (qualifying vocational course)

<p><b>EQF Level</b></p>	<p>Completed high school and people working with elderly people who want to improve their qualifications</p>	<p><b>Course delivery:</b> Class, practice  <b>Duration:</b>          445 hours – 7 months  <b>Course structure:</b></p> <ul style="list-style-type: none"> <li>- Occupational Health and Safety</li> <li>- Basics of social assistance</li> <li>- Organizing support services for the mentee</li> <li>- Carrying out caring and supporting activities in the person under care</li> <li>- Activating the person under care to independence in life</li> <li>- A foreign professional language</li> <li>- Apprenticeships</li> </ul> <p><b>Assessment:</b> final exam</p> <p><b>Fee: to be agreed</b></p>	<p><b>Provider:</b> Collegium School of Medical Services</p>
<p><b>EQF Level</b></p>	<p>Completed high school and people working with elderly people who want to improve their qualifications</p>	<p><b>Course delivery:</b> Class, practice  <b>Duration:</b>          60 hours  <b>Course structure:</b></p> <ul style="list-style-type: none"> <li>- The role and tasks of the guardian</li> <li>- Elderly diseases, patient observation, measurement and analysis of parameters</li> <li>- Protection against infection, disinfection, sterilization</li> <li>- Principles of proper nutrition of sick, elderly and disabled people</li> </ul>	<p><b>Providers:</b> SKK and College of Health Sciences</p>

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<ul style="list-style-type: none"> <li>- Physiological and psychological aspects of aging</li> <li>- Attitude towards the feelings and behavior of the cared for person</li> <li>- Prevention of pressure ulcers and the effects of long-term immobilization</li> <li>- Problems of care for disabled patients</li> <li>- Nursing care for elderly patients</li> <li>- Rehabilitation process</li> <li>- First aid in geriatrics</li> <li>- Caring for the dying and accompanying death</li> <li>- Selected issues of pharmacotherapy</li> </ul> <p><b>Assessment:</b> final exam</p> <p><b>Fee: around 220 Euro</b></p>	
<b>EQF Level</b>	Completed high school and people working with elderly people who want to improve their qualifications	<p><b>Course delivery:</b> online</p> <p><b>Duration:</b> 240 hours –</p> <p><b>Course structure:</b></p> <ul style="list-style-type: none"> <li>- Geriatrics and psychology of adult development</li> <li>- The role and tasks of the caretaker of the elderly</li> </ul> <p><b>Assessment:</b> final exam</p> <p><b>Fee: around 210 Euro</b></p>	<b>Provider:</b> National Medical Institute

#### 4.5.2 Social care of elderly in a social welfare home and disabled (qualifying vocational course)

<b>EQF Level</b>	Completed high school and people working with elderly people who	<p><b>Course delivery:</b> online</p> <p><b>Duration:</b> 80 hours –</p> <p><b>Course structure:</b></p>	<b>Provider:</b> Continuing Education Center Wrocław
------------------	--	--	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

	want to improve their qualifications	<ul style="list-style-type: none"> <li>- Pre-medical first aid</li> <li>- Processes related to the aging of the organism</li> <li>- Psychological aspects of working with an elderly person</li> <li>- Nursing and observation of the elderly and disabled</li> <li>- Hygienic service for bedridden, obese and disabled people</li> <li>- Decubitus prevention</li> <li>- Elderly diseases</li> <li>- Labor market for care services in Poland and abroad</li> </ul> <p><b>Fee: around 150 Euro</b></p>	
EQF Level	Completed high school and people working with elderly people who want to improve their qualifications	<p><b>Course delivery:</b> Class, practice</p> <p><b>Duration:</b> 2 years</p> <p><b>Course structure:</b> In accordance with the qualification requirements set out by the Ministry of Education and Science in Poland</p> <p><b>Assessment:</b> final exam <b>free of charge</b></p>	<p><b>Providers:</b> Post-secondary Żak School Post-secondary Cosinus School Post-secondary school of Medicine Post-secondary school Pascal Study of Medical and Social Workers</p>

#### 4.5.3 Social worker Diploma for Social service workers – Bachelor Degree

EQF Level 6	Completed high school	<p><b>Course delivery:</b> class-practice, stationary, part-time, on-line</p> <p><b>Duration:</b> 3 years</p> <p><b>Course structure:</b> Selected items</p>	<p><b>Providers:</b> Studies in the field of social work or specialization can be undertaken in Poland at 33 public universities and 11</p>
-------------	-----------------------	--	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<ul style="list-style-type: none"> <li>• Sociology of social problems.</li> <li>• Psychology of human development, psychopathology, family therapy.</li> <li>• Special education.</li> <li>• Theories and methods of social work.</li> <li>• Practical classes in institutions.</li> </ul> <p><b>Assessment:</b> final exam</p> <p><b>free of charge, stationary</b> <b>fee for part-time studies around 1000 Euro for the year</b></p>	<p>non-public (private) universities in full-time (full-time), part-time and online modes</p>
--	--	---	---

#### 4.5.4 Social worker Diploma for Social service workers – Master’s Degree

EQF Level 7	High school graduation - Bachelor Degree	<p><b>Course delivery:</b> Class, practice, stationary, part-time, on-line</p> <p><b>Duration:</b> 2 years</p> <p><b>Course structure:</b> The studies equip them with the competences - knowledge and skills - necessary for professional help in various professions and helping professions, in which the methodologies of professional help developed in the area of social work (helping professions) are used.</p> <p><b>Assessment:</b> final exam</p> <p><b>free of charge, stationary</b> <b>fee for part-time studies around 1000 Euro for the year</b></p>	<p><b>Providers:</b> Studies in the field of social work or specialization can be undertaken in Poland at 24 public universities and non-public (private) universities in full-time (full-time), part-time and online modes</p>
-------------	--	---	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.5.5 Course for Healthcare and social workers

EQF = 6	Completed high school or High school graduation	<b>Course delivery:</b> Online, webinar <b>Duration:</b> 3 hours <b>Course structure:</b> depending on the subject <b>Fee:</b> ~30 EURO za kurs	<b>Providers:</b> Annexe MM Publishing house Legal Mizer
---------	---	---	---

#### 4.5.6 Bachelor Degree

EQF = 6	Completed high school	<b>Course delivery:</b> Class, practice stationary, part-time, on-line <b>Duration:</b> 3 years <b>Course structure:</b> the number of hours of classes, including apprenticeships, cannot be less than 4,720, Knowledge in the area of, inter alia, nursing, general medical knowledge, pharmacology, psychology, sociology, obstetrics and dietetics.  <b>fee - free full-time, part-time costs from 1200 to 1750 Euro for the year of study</b>	<b>Providers:</b> Studies in the field of nursing or specialization can be undertaken at 57 public universities and 31 non-public (private) universities in full-time (full-time), part-time and online modes
---------	-----------------------	--	--

#### 4.5.7 Master's Degree

EQF = 7	High school graduation - Bachelor Degree	<b>Course delivery:</b> Class, practice, stationary, part-time, on-line <b>Duration:</b>	<b>Providers:</b> Studies in the field of nursing or specialization can
---------	--	--	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<p>2 years</p> <p><b>Course structure:</b> the number of hours of classes and internships cannot be less than 1300</p> <p><b>fee - free full-time, part-time costs from 1200 to 1750 Euro for the year of study</b></p>	<p>be undertaken at 57 public universities and 31 non-public (private) universities in full-time (full-time), part-time and online modes</p>
--	--	---	--

#### 4.5.8 Care Medical

EQF level	Completed high school	<p><b>Course delivery:</b> Class, practice, stationary, part-time</p> <p><b>Duration:</b> 1,5 years</p> <p><b>Course structure:</b> care and hygiene activities related to nutrition, movement, changing clothes and daily hygiene <b>Assessment:</b> final exam</p> <p><b>free</b></p>	<p><b>Providers:</b> ProCivitas Kielce Medical Post-Secondary School Post-secondary Cosinus School Study of Medical and Social Workers</p>
-----------	-----------------------	---	--

#### 4.5.9 Course for Healthcare and social workers

EQF level	Completed high school, High School and all those who work with the elderly	<p><b>Course delivery:</b> closed training, dedicated to employees of Nursing Homes</p> <p><b>Duration:</b> to be agreed</p> <p>Course for Healthcare and social workers</p> <p><b>Training topics</b></p> <ol style="list-style-type: none"> <li>1. Nursing Home as a place of residence and place of work.</li> <li>2. Rights and obligations of a DPS resident - principles of cooperation.</li> <li>3. Individual Support Plan - practical rules and procedures.</li> <li>4. Individual Support Plan and Directions for Conducting Therapy</li> </ol>	<p><b>Providers:</b> INVESIS POLSKA Center for the Development of Education and Competence</p>
-----------	--	---	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<ol style="list-style-type: none"> <li>5. Activation and support of the DPS residents and training of communication skills.</li> <li>6. The process of adaptation of a DPS / ŚDS resident.</li> <li>7. Organization of the care and therapeutic team in the DPS.</li> <li>8. Communication skills training for DPS / ŚDS employees.</li> <li>9. Motivational training for DPS / ŚDS employees.</li> <li>10. Social skills training.</li> <li>11. Forms of therapy and methods of working with mentally disabled people.</li> <li>12. Methods of working with people who are sick.</li> <li>13. Senior-methods of work and care for the elderly.</li> <li>14. Methods of working with children with physical and intellectual disabilities.</li> <li>15. First contact employee - the role and tasks in meeting the needs of a DPS resident.</li> <li>16. Psychological debriefing - for social workers, nursing homes, community self-help homes - supportive intervention after a traumatic event</li> </ol>	
--	--	---	--

## 4.6 The UK

### 4.6.1 ATHE Level 3 Diploma in Health and Social Care

EQF Level 3	<b>Prerequisites:</b> - Age 16+ - Other related level 2 subjects/ other equivalent	<b>Course delivery:</b> Online or blended learning (learner can select one mode of study). <b>Duration:</b> available in two modes 4 months (fast track) 6 months	Gov Ofqual ATHE	London College of Professional Studies.
-------------	---	--	-----------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



	international qualifications.	<b>Course structure:</b> 6 mandatory modules Assessment: no exams, submission of coursework only. <b>Fee:</b> £1100		
--	-------------------------------	--	--	--

#### 4.6.2 OTHM Level 3 Foundation Diploma in Health and Social Care

EQF Level 3	<b>Prerequisites:</b> - Age 16+	<b>Course delivery:</b> Online or blended learning (learner can select one mode of study). <b>Duration:</b> available in three modes 3 months (fast track) 6 months 9 months <b>Course structure:</b> 6 mandatory modules <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> £900	Ofqual regulated OTHM	London College of Professional Studies.
-------------	------------------------------------	---	-----------------------	---

#### 4.6.3 ATHE Level 4 diploma in Management for Health and Social Care

EQF Level 4	<b>Prerequisites:</b> - Age 18+ - GCE Advanced Level profile with achievement in two or more subjects, plus five or more	<b>Course delivery:</b> online or blended learning, (learner can select one mode of study at their convenience). <b>Duration:</b> available in two modes 6 months (fast track) 9 months	Gov Ofqual ATHE	London College of Professional Studies.
-------------	--	--	-----------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

	<p>GCSE's at C/4 or above.</p> <p>- OR: Other related level 3 subjects/access to HE Certificate/other equivalent international qualifications.</p>	<p><b>Course structure:</b> three mandatory units (45 credits) and five optional units (75 credits).</p> <p><b>Assessment:</b> no exams, submission of assignments only.</p> <p><b>Fee:</b> £1300</p>		
--	--	---	--	--

#### 4.6.4 OTHM Level 4 Diploma in Health and Social Care Management

EQF Level 4	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>- Relevant Level 3 diploma in health and social care management.</li> </ul>	<p><b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience).</p> <p><b>Duration:</b> available in three modes 6 months (fast track) 9 months 12 months</p> <p><b>Course structure:</b> six mandatory units.</p> <p><b>Assessment:</b> no exams, submission of assignments only.</p> <p><b>Fee:</b> £900</p>	Ofqual regulated OTHM	London College of Professional Studies.
-------------	--	--	-----------------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.6.5 ATHE Level 5 Extended Diploma in Management for Health and Social Care

EQF Level 5	<b>Prerequisites:</b> - Age 18+ - Relevant Level 4 diploma in health and social care management/equivalent recognised qualification.	<b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience). <b>Duration:</b> available in two modes 6 months (fast track) 9 months <b>Course structure:</b> four mandatory units (65 credits) and four optional units (55 credits). <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> £1500	Gov Ofqual ATHE	London College of Professional Studies.
-------------	--	---	-----------------	---

#### 4.6.6 OTHM Level 5 Diploma in Health and Social Care Management

EQF level 5	<b>Prerequisites:</b> - Age 18+ - Relevant Level 4 diploma/equivalent recognised qualification.	<b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience). <b>Duration:</b> available in three modes 6 months (fast track) 9 months 12 months <b>Course structure:</b> six mandatory units. <b>Assessment:</b> no exams, submission of assignments only.	Ofqual regulated OTHM	London College of Professional Studies.
-------------	---	--	-----------------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<b>Fee:</b> £1000		
--	--	-------------------	--	--

#### 4.6.7 Level 5 Extended Diploma in Health and Social Care Management

EQF Level 5	<b>Prerequisites:</b> - Age 18+ - Relevant Level 3 diploma/equivalent recognised qualification. - GCE Advanced Level in two subjects/equivalent qualification.	<b>Course delivery:</b> Online or blended learning (learner can select one mode of study). <b>Duration:</b> not specified <b>Course structure:</b> six mandatory modules <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> £1800	Ofqual regulated OTHM	London College of Professional Studies.
-------------	---	---	-----------------------	---

#### 4.6.8 ATHE Level 6 Diploma in Healthcare Management

EQF level 6	<b>Prerequisites:</b> - Age 18+ - Relevant Level 5 diploma/equivalent recognised qualification.	<b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience). <b>Duration:</b> available in two modes 6 months (fast track) 12 months <b>Course structure:</b> six mandatory units (70 credits) and four optional units (50 credits). <b>Assessment:</b> no exams, submission of assignments only.	Gov Ofqual ATHE	London College of Professional Studies.
-------------	---	--	-----------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<b>Fee:</b> £1700		
--	--	-------------------	--	--

#### 4.6.9 OTHM Level 6 Diploma in Health and Social Care Management

EQF Level 6	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>- Relevant Level 5 diploma/equivalent recognised qualification.</li> <li>- GCE Advanced Level in two subjects/equivalent qualification.</li> </ul>	<p><b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience).</p> <p><b>Duration:</b> available in two modes 6 months (fast track) 9 months</p> <p><b>Course structure:</b> six mandatory units.</p> <p><b>Assessment:</b> no exams, submission of assignments only.</p> <p><b>Fee:</b> £1100</p>	Ofqual regulated OTHM	London College of Professional Studies.
-------------	---	---	-----------------------	---

#### 4.6.10 ATHE Level 7 Diploma in Health Care Management

EQF level 7	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>- An honours degree in a related subject or UK level 6 diploma or an equivalent overseas qualification.</li> </ul>	<p><b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience).</p> <p><b>Duration:</b> available in two modes 8 months (fast track) 12 months</p> <p><b>Course structure:</b> six mandatory units (95 credits) and two optional units (25 credits).</p>	Gov Ofqual ATHE	London College of Professional Studies.
-------------	---	--	-----------------	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

		<b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> £1300		
--	--	---	--	--

#### 4.6.11 OTHM Level 7 Diploma in Health and Social Care Management

EQF Level 7	<b>Prerequisites:</b> - Age 18+ - An honours degree in a related subject or UK level 6 diploma or an equivalent overseas qualification.	<b>Course delivery:</b> flexible delivery methods including online, blended learning, distance learning and in-class teaching (learner can select one mode of study at their convenience). <b>Duration:</b> available in two modes 6 months (fast track) 9 months <b>Course structure:</b> six mandatory units. <b>Assessment:</b> no exams, submission of assignments only. <b>Fee:</b> £1300	Ofqual regulated OTHM	London College of Professional Studies.
-------------	---	--	-----------------------	---

#### 4.6.12 Level 2 Diploma in Care

EQF Level 2	<b>Prerequisites:</b> - Age 16+ - four GCSE's D/3 or a above including maths and English	<b>Course delivery:</b> variable. <b>Duration:</b> 12 months <b>Course structure:</b> six mandatory units. <b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies. <b>Fee:</b> Variable (employers may be eligible for a refund from the workforce development fund upon completion).	Skills for Care endorsed learning providers: see below.
-------------	--	--	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.6.13 Level 2 Diploma in Care courses UK

Course: BIIAB Level 2 Diploma in Care

Certified by: BIIAB (Qualification No: 603/252/5)

Course: City & Guilds Level 2 Diploma in Care

Certified by: City & Guilds (Qualification No: 603/2660/8)

Course: FAQ Level 2 Diploma in Care

Certified by: Future Quals (Qualification No: 603/2797/2)

Course: Gateway Qualifications Level 2 Diploma in Care

Certified by: Gateway Qualifications (Qualification No: 603/2826/5)

Course: Highfield Level 2 Diploma in Care (RQF)

Certified by: Highfield ABC (Qualification No: 603/2825/3)

Course: ICQ Level 2 Diploma in Care

Certified by: ICQ (Qualification No: 603/2761/3)

Course: Innovate Awarding Level 2 Diploma in Care (RQF)

Certified by: Innovate Awarding (Qualification No: 603/2524/0)

Course: NCFE CACHE Level 2 Diploma in Care (England)

Certified by: NCFE CACHE (Qualification No: 603/2611/6)

Course: NOCN Level 2 Diploma in Care (England)

Certified by: NOCN (Qualification No: 603/3609/2)

Course: Pearson BTEC Level 2 Diploma in Care (England)

Certified by: Pearson (Qualification No: 603/2762/5)

Course: Skills First Level 2 Diploma in Care (RQF)

Certified by: Skills First (Qualification No: 603/2806/X)

Course: TQUK Level 2 Diploma in Care (RQF)

Certified by:

Training Qualifications UK (Qualification No: 603/2554/9)

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.6.14 Level 3 Diploma in Adult Care

EQF Level 3	<b>Prerequisites:</b> - You must be employed in the health and social care sector, within a senior or team leader role.	<b>Course delivery:</b> variable. <b>Duration:</b> 12-18 months <b>Course structure:</b> wide range of optional units to support areas of specialism. <b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies. <b>Fee:</b> Variable (employers may be eligible for a refund from the workforce development fund upon completion).	Skills for care endorsed learning providers: see below.
-------------	--	---	---

#### 4.6.15 Level 3 Diploma in Adult Care courses UK:

Course: BIIAB Level 3 Diploma in Adult Care

Certified by: BIIAB (Qualification No: 603/2523/9)

Course: City & Guilds Level 3 Diploma in Adult Care (RQF)

Certified by: City & Guilds (Qualification No: 603/2662/1)

Course: Focus Awards Level 3 Diploma in Adult Care (RQF)

Certified by: Focus Awards (Qualification No: 603/2939/7)

Course: FAQ Level 3 Diploma in Adult Care (RQF)

Certified by: Future Qualls (Qualification No 603/2798/4)

Course: Gateway Qualifications Level 3 Diploma in Adult Care (RQF)

Certified by: Gateway Qualifications (Qualification No: 603/2819/8)

Course: ICQ Level 3 Diploma in Adult Care

Certified by: ICQ (Qualification No: 603/2763/7)

Course: Highfield Level 3 Diploma in Adult Care

Certified by: Highfield ABC (Qualification No: 603/2674/8)

Course: Innovate Awarding Level 3 Diploma in Adult Care (RQF)

Certified by: Innovate Awarding Organisation (Qualification No: 603/2535/5)

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



Course: NCFE CACHE Level 3 Diploma in Adult Care (RQF)  
 Certified by: NCFE CACHE (Qualification No: 603/2618/9)  
 Course: NOCN Level 3 Diploma in Adult Care (England)  
 Certified by: NOCN (Qualification No: 603/3610/9)  
 Course: Pearson BTEC Level 3 Diploma in Adult Care (RQF)  
 Certified by: Pearson BTEC Qualification No: 603/2764/9  
 Course: Skills First Level 3 Diploma in Adult Care (RQF)  
 Certified by: Skills First Qualification No: 603/2807/1  
 Course: TQUK Level 3 Diploma in Adult Care (RQF) Training Qualifications UK Certified by: Qualification No: 603/2553/7

#### 4.6.16 Level 4 Diploma in Adult Care

EQF Level 4	<b>Prerequisites:</b> - Age 18+ - Other related level 3 subjects/ other equivalent international qualifications.	<b>Course delivery:</b> variable. <b>Duration:</b> 12-18 months <b>Course structure:</b> wide range of optional units to support areas of specialism. <b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies. <b>Fee:</b> Variable (employers may be eligible for a refund from the workforce development fund upon completion).	Skills for care endorsed learning providers: see below.
-------------	--	---	---

#### 4.6.17 Level 4 Diploma in Adult Care courses UK:

Course: BIIAB Level 4 Diploma in Adult Care  
 Certified by: BIIAB (Qualification No: 603/2877/0)  
 Course: City & Guilds Level 4 Diploma in Adult Care (England)  
 Certified by: City & Guilds (Qualification No: 601/5641/7)  
 Course: FAQ Level 4 Diploma in Adult Care (RQF)

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

Certified by: Future Awards (Qualification No: 603/4986/4)  
 Course: Highfield Level 4 Diploma in Adult Care (RQF)  
 Certified by: Highfield ABC (Qualification No: 603/2829/0)  
 Course: ICQ Level 4 Diploma in Adult Care (RQF)  
 Certified by: ICQ (Qualification No: 603/3181/1)  
 Course: IAO Level 4 Diploma in Adult Care  
 Certified by: Innovative Awarding Organisation (Qualification No: 603/2517/3)  
 Course: NCFE CACHE Level 4 Diploma in Adult Care  
 Certified by: NCFE CACHE (Qualification No: 603/2614/1)  
 Course: Pearson BTEC Level 4 Diploma in Adult Care (England)  
 Certified by: Pearson BTEC (Qualification No: 603/2780/7)  
 Course: Skills First Level 4 Diploma in Adult Care  
 Certified by: Skills First  
 (Qualification No: 603/2809/5)  
 Course: TQUK Level 4 Diploma in Adult Care (RQF)  
 Certified by: Training Qualifications UK (Qualification No: 603/2554/9)

#### 4.6.18 Level 4 Certificate in Principles of Leadership and Management for Adult Care

EQF Level 4	<b>Prerequisites:</b> - Age 18+ - Other related level 3 subjects/ other equivalent international qualifications.	<b>Course delivery:</b> variable. <b>Duration:</b> 12-18 months <b>Course structure:</b> eleven mandatory units. <b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies. <b>Fee:</b> Variable (employers may be eligible for a refund from the workforce development fund upon completion).	Skills for care endorsed learning providers: see below.
-------------	--	--	---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

#### 4.6.19 Level 4 Certificate in Principles of Leadership and Management for Adult Care courses UK:

Course: Highfield Level 4 Certificate in Principles of leadership and Management for Adult Care (RQF) Certified by: Highfield (Qualification No: 603/0974/X)

Course: Innovate Awarding Level 4 Certificate in the principles of leadership and management for adult care Certified by: Innovate )Qualification No: 603/0672/2)

#### 4.6.20 Level 5 Certificate of Fundamental Knowledge in Commissioning for Wellbeing

EQF Level 5	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> <li>- Demonstrate that you can manage higher level independent study and therefore qualified to at least level 3.</li> <li>- significant experience in the care and support sector in either a local authority or NHS setting, or related areas such as housing or the voluntary and community sectors.</li> </ul>	<p><b>Course delivery:</b> Variable</p> <p><b>Duration:</b> 9-12 months</p> <p><b>Course structure:</b> Variable</p> <p><b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies.</p> <p><b>Fee:</b> £2000-2300 (If you work in social care, you may receive £700 towards the cost of the qualification. It may be possible for local authorities and adult social care employers to claim back up to £1300 per learning from the workforce development fund upon completion).</p>	<p>Skills for care endorsed learning providers:</p> <p><b>Course:</b> Level 5 Certificate in Principles of Commissioning for Wellbeing</p> <p><b>Certified by:</b> Highfield (Qualification No: 603/0969/6)</p>
-------------	---	---	---

#### 4.6.21 Level 5 Diploma in Leadership and Management for Adult Care

	<p><b>Prerequisites:</b></p> <ul style="list-style-type: none"> <li>- Age 18+</li> </ul>	<p><b>Course delivery:</b> Variable</p> <p><b>Duration:</b> 12-18 months</p> <p><b>Course structure:</b> Variable</p>	<p>Skills for care endorsed learning providers: see below.</p>
--	--	---	--

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

	<p>- Other related level 4 subjects/ other equivalent international qualifications.</p>	<p><b>Assessment:</b> assessment methods test knowledge and proven workplace abilities. Assessment methods include direct observations and witness testimonies.</p> <p><b>Fee:</b> £2000-2300 (If you work in social care, you may receive £700 towards the cost of the qualification. It may be possible for local authorities and adult social care employers to claim back up to £1500 per learning from the workforce development fund upon completion).</p>	
--	---	--	--

#### 4.6.22 Level 5 Diploma in Leadership and Management for Adult Care courses UK:

Course: Level 5 Diploma in Leadership and Management in Adult Care Certified by: BIIAB (Qualification No: 603/3518/X)

Course: City & Guilds Level 5 Diploma in Leadership and Management for Adult Care

Certified by: City & Guilds (Qualification No: 603/3462/9)

Course: FAQ Level 5 Diploma in Leadership and Management for Adult care (RQF)

Certified by: Future Quals (Qualification No: Not Listed)

Course: Gateway Qualifications Level 5 Diploma in Leadership and Management for Adult Care

Certified by: Gateway Qualifications (Qualification No: 603/2681/5)

Course: Highfield Level 5 Diploma in Leadership and Management for Adult Care

Certified by: Highfield ABC (Qualification No: 603/3594/4)

Course: ICQ Level 5 Diploma in Leadership and Management for Adult Care (RQF)

Certified by: Innovate Awarding Organisation (Qualification No: 603/2870/8)

Course: Innovate Awarding Level 5 Diploma in leadership and Management for Adult Care (RQF) Certified by: ICQ (Qualification No: 603/4136/1)

Course: NCFE CACHE Level 5 Diploma in Leadership and Management for Adult Care

Certified by: NCFE CACHE (Qualification No: 603/2422/3)

Course: Pearson BTEC Level 5 Diploma in Leadership and Management for Adult Care (England)

Certified by: Pearson BTEC (Qualification No: 603/3496/4)

Course: Skills First Level 5 Diploma in Leadership and Management for Adult Care

Certified by: Skills First (Qualification No: 603/3534/8)

Course: TQUK Level 5 Diploma in Leadership and Management for Adult Care

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.



Certified by: Training Qualifications UK (Qualification No: 603/2564/1)

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

## 5 Case studies

---

In this final chapter we will report the summary of valuable cases of WBL, which actually were not all fortunate stories, because real cases are made up by pros and cons anytime.

We then chose to give priority to the most realistic picture of WBL in the partner Countries, rather than giving a too positive narrative of them, which could finally be deluding for Social and Health Care managers and stakeholders to proceed with their WBL activities more and more.

Each partner interviewed and reported ten different stories of WBL, which have been summarized by Country to be more concise.

The interviewees were managers, trainers, stakeholders of the Social and Health Care system, which experienced or managed to organize WBL activities in their professional career.

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.

## 5.1 Bulgaria

The elderly care delivery system in Bulgaria is mainly divided into two: residential elderly care services and community care services. The focus of community-based services is mainly on the provision of basic needs and health maintenance.

Due to the lack of sufficient staff in the field, the stress on workers is great and the need for training is extremely high. In more situations, care givers in residential services are finding it difficult to fulfil more than 1 professional role. Caregivers are also a supportive figure in the hours when experts are not available. Social workers need to have medical knowledge in order to support the clients and etc. This is just a small example of the training needs in the sector.

Choosing the profession of care giver does not always appreciate the stress factor, the different consumers and the workload that the individual will face. This leads to learning on the move and a lack of time and ability to self-reflect.

Training in the sector is crucial to maintain the quality of service provided but also to motivate and care for those working. Information about specific mental health conditions and specific illnesses is needed not only for professionals but also for care givers to reduce anxiety levels and feel more confident that they are providing the care needed for their service users.

In the cases reviewed there is an acknowledgement of the need for work-based learning on the part of both staff and employers but techniques are needed to plan, identify and validate it.

## 5.2 Cyprus

Training is recognized as an important aspect of staff development. Its practice can be segmented in the two following tiers

- ad-hoc practices, i.e., training from the old and experienced to the newly employed. This is a ubiquitous practice
- regular subscription to seminars organized by training centres as well as training sessions organized on the site by invited external experts

Training is, in most cases, planned centrally, a responsible person is assigned and a quality certification is in place mandating clear procedures and assessment requirements

Tele-training does not seem to be a popular practice. The empirical and experimental nature of training does not allow much ground for virtual schemes.

WBL is understood as old to young and on the site training by external experts. The term is generally not recognized as something distinct.

Soft skills are very much appreciated yet they do not appear to form a distinct part of any type of training. They are rather considered a matter of broader education or innate characteristics.

Training activities address such issues only implicitly and not in a direct and central way.



Professional qualifications in place are strictly observed.

### 5.3 Greece

In Greece, Elderly care is either provided by the public or the private sector. However, there are significant differences in service provision between the two sectors. The private sector offers a wide variety of services such as full-time residential care in Nursing Homes or Elderly Care Units, care-at-home services and day-care centres where the beneficiary and their family are responsible to pay for the provided services. In private Care services, 24/7 medical and nursing surveillance, cognitive empowerment, physiotherapy & psychotherapy sessions and creative employment services are provided. On the other hand, the public sector is represented mostly by KAPI (Open Protection Centres for the Elderly) where they provide free-of-charge day-care services daily 09:00-14:00. These centres only cover basic needs such as creative employment and basic health monitoring. No specialized nursing or medical services are provided. In addition, a few Nursing Homes operate under the supervision of the Church while the costs are covered mostly by donations, the Church and some State funding. Last but not least, some NGOs provide free-of-charge services such as care-at-home or day-care services but not residential care.

During our research, it was identified that the turnover rates in care workers are really high and some reasons behind that are the exhausting long shifts (10-12 hours), insufficient training opportunities, insufficient professional development opportunities and the nature of the job. Caregivers' duties include lifting immobile beneficiaries, assisting in bathing, feeding etc. However, they cover other roles as well when experts are not present such as night shifts. As a result, it is considered to be a tough job.

To continue, many care workers admit that this is not the profession of their choice but instead they work as caregivers just because there are no requirements to be hired as one in contrast with Nurses where they are required to have some sort of education or certification before working.

Care managers and leaders agree that training both on-the-job and class-based is vital to maintain the high quality of the provided services. Nonetheless, information regarding mental health and ways to avoid burn out is almost non-existent inside the workplace thus resulting in very high caregivers' stress levels.

Based on the conducted interviews, work-based learning is very important in all Care roles but especially in caregivers since most of them come from unrelated professional fields or have no previous experience. Furthermore, based on care leaders & managers, many care professionals are not willing to be trained outside of working hours or in the workplace which makes training very difficult; hence the need for innovative and efficient work-based learning programmes.

### 5.4 Italy

Adult social care consists of helping adults to lead fulfilling lives, including home and residential care facilities, as well as providing counselling, adaptations and aids for the home and support for

---

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.





carers. In Italy, the OSS takes care of the patient's basic needs and interfaces with the patient more than the doctors and nurses themselves, being on the front line alongside doctors and nurses in dealing with all the consequences that the Covid-19 pandemic has brought in the last two years.

With Covid there was a great stress in terms of workloads, also linked to the lack of medical and nursing staff, especially in the Assisted Living Residences where the OSS was heavily relied upon to compensate for the lack of a healthcare worker, increasing an already considerable pre-pandemic stress that then became unsustainable.

Fatigue and physical stress are particularly common situations for carers of elderly patients and people with disabilities. Most caregivers, in fact, very often underestimate the consequences of the inevitable emotional overload, regardless of their own ability to contain the difficulties. This is another reason why caregiver training is extremely necessary: to help someone in a functional way, it is essential to know every shade of the problem.

Furthermore, training is important in order to be constantly and actively involved in the care of critically ill patients, i.e. those with diseases characterized by a prolonged state of clinical instability that require a high intensity of clinical and care services and constant monitoring, functional rehabilitation techniques and innovative methods such as multi-sensory stimulation and virtual rehabilitation. In these cases, caregivers contribute to outlining the care pathway, through regular meetings with the team, which are also useful for expressing the needs, requests and difficulties of family members. Training is therefore also important to foster the theoretical and practical aspects, aimed at overcoming obstacles and barriers, through the conscious use of tools and learning.

## 5.5 Poland

In Poland, social assistance is an activity of state, local government, social institutions, churches, and private individuals - enabling and facilitating the satisfaction of basic needs of people and families unable to do it on their own within the existing division of goods, services and benefits. Government and self-government administration bodies are obliged to provide this care.

Currently, social assistance activities are regulated by the Act of March 12, 2004, which is the second act on social assistance in post-war Poland.

The main objective of social assistance activities is to lead, as far as possible, to the independence of individuals and families and their integration with the environment. However, a large group of people who receive the social assistance they are entitled to are the elderly and the disabled, whose chances for independence and independence from social assistance in the current conditions are rather small (the low profitability of these social groups makes it impossible to meet the needs on the commercial market by purchasing appropriate services). . Social assistance offers these people, apart from financial support, various types of services, which vary depending



on the place of provision and their scope for care services provided at the place of residence of the recipient of these services, specialist care services addressed to people with chronic mental illness and mental disorders, and 24-hour services provided in nursing homes. In addition, in the local environment, apart from the offer of care services at the place of residence of the person requiring help, there are various types of support centres offering a range of day-time services and family help homes, which are a specific form of care service provided by the service provider.

Currently, the demand for care in Poland is growing due to the aging of the population and the increase in the number of adults living with disabilities. However, this sector has difficulties in providing effective care for several reasons: there is a shortage of staff, few people are interested in working in this sector due to financial constraints, and there is a permanent lack of funds for the development of social welfare institutions.

## 5.6 The UK

Adult social care involves supporting adults to lead fulfilling lives, encompassing domiciliary and residential care settings, along with provisions for advice; home adaptations and aids; and support for carers. Demand for care in the UK is increasing, due technologies and scientific advances meaning there is both an aging population, and an increase in adults living with disabilities. The sector is struggling to provide effective care for several reasons, notably due to staffing difficulties and financial constraints, exacerbated by the Covid-19 pandemic.

Stable, experienced staff are rarely seen within the sector, but when they are, they work for companies who prioritise training in role related skills. High staff turnover and staff shortages impede care provision and training opportunities, with high workloads meaning staff lack the time and inclination to undertake training, or share their training within their networks. Many care providers are unable to cope with the strain placed on their teams when staff need time off to attend training, and therefore make the decision to pass inspections by simply ensuring staff only complete mandatory compliance training, despite identifying training needs internally. As a result of the recruitment and retention crisis, some organisations have taken to values based recruitment, in an attempt to fill vacancies, in the hope that aligned values may boost employee retention, and increase future training opportunities.

Funding for adult social care has been under pressure for several years, with care commissioned and provided by numerous small organisations, thus, market competition makes collaboration difficult. Broader system constraints such as high scrutiny and limited resources often force those in leadership positions to be risk averse, as financial pressures limit the ability of leaders to pilot and evaluate training opportunities. Whilst some validated learning has been successfully introduced in certain settings, impact is limited, with barriers such as fragmentation; funding; and limitations in existing regulatory frameworks frequently cited.

## 6 Table of contents

1	Outline .....	3
2	Social and Health Care in the partner Countries .....	4
2.1	Bulgaria .....	4
2.2	Cyprus .....	5
2.3	Greece .....	8
2.4	Italy .....	10
2.5	Poland .....	11
2.6	The UK .....	12
3	WBL and qualifications in the partner Countries .....	15
3.1	Bulgaria .....	15
3.2	Cyprus .....	16
3.3	Greece .....	20
3.4	Italy .....	21
3.5	Poland .....	23
3.6	The UK .....	25
4	Care qualifications in the partner Countries .....	27
4.1	Bulgaria .....	27
4.2	Cyprus .....	30
4.3	Greece .....	36
4.4	Italy .....	37
4.5	Poland .....	42
4.6	The UK .....	48
5	Case studies .....	62
5.1	Bulgaria .....	63
5.2	Cyprus .....	63
5.3	Greece .....	64
5.4	Italy .....	64
5.5	Poland .....	65
5.6	The UK .....	66

This project has been funded with support from the European Commission. This publication [communication] reflects the views only of the author, and the Commission cannot be held responsible for any use which may be made of the information contained therein.