



# Training curriculum for home helpers

Based on Volumes 1 and 2  
of the Community-based home care toolkit

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Volume 4 of *Community-based home care* toolkit

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# Table of contents

<b>Introduction</b>	<b>6</b>
<b>Tasks, knowledge, skills and attitude</b>	<b>7</b>
<b>The training course</b>	<b>14</b>
Module 1: Job management and working effectively.....	14
Module 2: Domestic assistance .....	23
Module 3: Psychosocial assistance and care.....	28
Module 4: Individual care .....	35
Module 5: Assistance in health promotion and disease prevention .....	42

# 1. Introduction

The training curriculum for home helpers reflects the minimum standards for home care helpers, and should be used in conjunction with the *Community-based home care* toolkit, Volume 1, Organization and provision of community-based home care: minimum standards for Red Cross Red Crescent National Societies and Volume 2, Basic skills and knowledge in community-based home care (CbHC).

The curriculum includes all the topics mentioned in Volumes 1 and 2. It is based on typical working situations of a semi-professional home helper. The curriculum is intended as guidance for the trainer who should develop a training course that is appropriate for the specific home care programme undertaken by the National Society. While the curriculum may be adapted for specific circumstances, all topics should be covered in order to comply with the minimum standards of care.

Training should have an adult training approach and be competence-based. The curriculum and the training should take into account that the most important resource of a home helper is his/her life experience, skills and knowledge.

The following characteristics distinguish adult learners:

- Adults prefer an informal learning environment where they feel valued and respected for their experiences.
- Adults prefer learning to be active rather than passively sitting and listening. Participation in a variety of activities is important.
- Adults will be actively engaged in learning if they can see how the training will meet their needs and be of benefit to them.
- Adults will want to be in charge of their own learning, and to have choices about the skills they learn.
- Adults learn new content when it relates to something they know already.
- Adults appreciate having an opportunity to apply what they have learned as soon as possible.
- Adults are motivated by positive encouragement.

The curriculum that follows is based on these characteristics. A variety of teaching and learning methods is suggested to the trainer, and there is clear guidance on the knowledge, skills and attitudes that participants in the training should acquire.

The curriculum is based on the five major categories of tasks to be carried out by home helpers. These are grouped into five modules:

1. Job management and working effectively
2. Domestic assistance
3. Psychosocial assistance and care
4. Individual care
5. Assistance in health promotion and disease prevention

## 2. Tasks, knowledge, skills and attitude

The tables that follow detail the tasks to be covered and show the knowledge, skills and attitude that should be developed or enhanced during the training while learning about and practising these tasks.

### MODULE 1: Job management and working effectively

Tasks	Knowledge	Skills	Attitude
Time management	Basic knowledge about setting priorities and making working plans	Prioritize duties and develop personal work schedules	Awareness of effective use of time
Stress management	Basic knowledge of causes and effects of stress and coping strategies	Ability to recognize and manage stress	Openness for requesting support
Resource management	Basic knowledge of different kinds of resources and their management	Effective use of resources Ability to use new resources	Appreciation
Confidentiality	Basic knowledge on scope and importance of confidentiality, basics on ethical principles	Distinguish between confidential and non-confidential information	Respect and reliability
Personal safety and hygiene and appearance	Basic knowledge about professional health risks in CbHC workplaces and prevention measures. Importance of appropriate appearance	Cooperation in evaluation of work place risks and application of preventive measures Apply the regulations related to appearance	Self-care
Work organization/ institutional regulations	Knowledge of work organization and institutional regulations	Ability to work with the regulations	Acceptance
Personal and professional competences and limitations	Knowledge of rights and duties (for all team members), knowledge of personal and professional limits	Ability to work within the proper competences	Acceptance and respect
Perception, observation	Basic knowledge of perception, observation and interpretation	Use the senses to observe and report appropriately	Impartiality and awareness of different views

Tasks	Knowledge	Skills	Attitude
Reporting, documentation	Knowledge of the importance of documentation and the forms used	Use of existing forms and correct terminology	Accuracy
Cooperation with relatives, informal caregivers and institutions	Basics knowledge of principles of cooperation and communication, knowledge about services available for the client	Establish and maintain constructive relationship with partners/beneficiaries	Appreciation and recognition of the contribution of others involved in care
Awareness about ethical questions	Basic knowledge of the most frequent ethical principles, questions and answers in the work field	Act in daily work on the basis of ethical principles	Sensitivity
Continuous education	Knowledge of opportunities and regulations on further training, information on career development	Application and integration of new learning in the work setting	Interest and motivation
Teamwork	Basic knowledge of principles of good teamwork	Ability to be a team player	Tolerance, fairness
How to deal with gifts	Knowledge of the risks of receiving gifts	Ability to refuse a gift politely	Respect



## MODULE 2: Domestic assistance

Task	Knowledge	Skills	Attitude
Shopping	Expiry dates of products, storage	Make a shopping list related to local opportunities (needs, plans, shops, markets, prices)	Respect of individual preferences
Cooking	Seasonal availability, healthy nutrition and preparation (small meals, warming up), basics about dietary requirements	Use of domestic appliances in the kitchen, presentation of meals, use of special devices for disabilities	Respect of individual and cultural preferences
Cleaning	Importance of hygiene in the household, cleaning materials, disposal of waste material, recycling	Cleaning different materials (tiles, wooden floors, carpets, windows, sanitary premises, dishes), cleaning special devices and working places	Aware of safety and environmental aspects
Laundry	Different materials need different care	Cleaning and ironing different textiles	Being careful with goods of the clients
Heating	Importance of the indoor climate, risks of different sources of heating (gas, wood, electric devices, ventilation, air conditioning)	Use of appliances	Respect of individual habits
Assuring safe environment	Most frequent sources of accidents in household (darkness, ladders, carpets), fall prevention	Giving advice and counselling in case of accident risk	Being vigilant to risks
Fetching water	Clean water sources	Using and/or organizing water	Awareness of the importance of clean water and water saving
Simple accounting	Basic financial management	Use of a household book for entries and expenses	Transparency and honesty

## MODULE 3: Psychosocial assistance and care

Task	Knowledge	Skills	Attitude
Social activities	Ideas on possible social activities of clients/personal interest (reading, playing, singing, etc.)	Communication in order to motivate for activity	Respect and empathy
Accompanying	Basic knowledge about how to guide a person with different kinds of limitation, basic knowledge about the legal situation (car/insurance, etc.), basic knowledge about devices supporting mobility	Use of different equipment for accompaniment Apply the personal safety rules	Recognize that accompanying is an important aspect of social inclusion
Recognition of conflict	Recognizing signs of conflict, knowing whom to address in case of conflict, different ways of handling conflict situations	Control own behaviour in case of conflict	Being neutral and respecting the opinion of all players
Building up relationship	Steps of building up professional relationship, trust as basic and essential for relationship	Behaviour and communication to build up trust and relationship Being able to end a relationship	Patience for an ongoing process
Social interaction/active listening	Verbal and nonverbal communication, methods of active listening, basics of lay counselling	Ability to use various forms of communication and active listening and provide lay counselling	Patience for listening and showing interest in the client's message
Psychosocial support to relatives and informal caregivers	Basic knowledge of family dynamics, role of relatives and informal caregivers in the individual care situation	Interact appropriately with relatives and informal caregivers Show appreciation to relatives and informal caregivers for their situation	Respect of the role and importance of relatives and informal caregivers as member of the care team
Monitoring possible violence, abuse and neglect	Typical risk factors, forms and signs of abuse and neglect, knowledge of whom to ask for assistance	Recognize signs of abuse and possible barriers in recognizing Act appropriately and recognize the proper limitations	Not ignoring the signs and not judging or blaming
Monitoring possible mental health problems	Signs of the most frequent mental health problems (depression, dementia, addiction), understand the change of behaviour as a sign of disease and know whom to ask for assistance	Recognize signs of the most frequent mental health problems, act appropriately and recognize the proper limitations	Respect and openness for different behaviours

## MODULE 4: Individual care

Task	Knowledge	Skills	Attitude
Motivating client for self-support	Basic knowledge about factors influencing motivation and impact of self-support on quality of life	Ability to encourage and empower clients for self-support	Positive approach to development capacities
Assistance in getting dressed	Role of clothing in daily living, basic knowledge on physical abilities and impairments	Ability to support the client in dressing/ undressing according to need	Respect of values
Assistance in eating and drinking	Role of nutrition in daily living and dietary measures, importance of liquid balance, basic knowledge of physical abilities and impairments, basic knowledge of types, use and maintenance of devices	Ability to support the client in nutrition according to needs and appropriate use of devices	Respect of habits
Assistance in using the toilet	Role of discharge in daily living, basic knowledge of physical functions and impairments, basic knowledge of types, use and maintenance of devices and material	Ability to support the client in his discharge functions according to need, and appropriate use of devices and material	Respect sense of shame
Assistance in personal hygiene	Role of personal hygiene in daily living, basic knowledge of skin functions and risk factors, basic knowledge of techniques to assist in personal hygiene and prevention of risks	Ability to support the client in his personal hygiene (hair, mouth, nails, body, make-up etc.) according to need and appropriate use of devices and material	Respect of habits and the sense of shame
Assistance in mobility, positioning and mobilization	Role of mobility in daily living, basic knowledge of physical functions and impairment, basic knowledge of techniques of mobilization, positioning and use of devices, prevention of risks (fall, bedsore, contractures)	Ability to support the client in his/her mobility and positioning according to need and appropriate use of techniques and devices	Awareness of responsibility to avoid harm and damage

## MODULE 5: Assistance in health promotion and disease prevention

Task	Knowledge	Skills	Attitude
Assistance in taking medication	Basic knowledge of security in self-administration of medication (5R's), basic knowledge of devices to support medication intake	Ability to support self-administration	Awareness of responsibility
Simple medical check-up activities	Basic knowledge of the diagnostic information of blood pressure, pulse, temperature, respiration, blood sugar and knowledge of whom to inform about the results	Ability to measure accurately simple medical parameters with appropriate devices  Ability to inform the right person about deviations	Awareness of unforeseen results
Assistance in health promotion and disease prevention	Basic knowledge of the concept of health promotion and the prevention of the most frequent diseases	Cooperation in activities and motivation according to planned health promotion and/or disease prevention	Awareness of the home helper's role in health promotion and disease prevention plans
Assuring a safe environment	Basic knowledge of risks in the environment and the health situation of the client	Ideas of measures to be taken against health risks through the environment	Awareness of the home helper's role in risk reduction
First aid for the target group	Basic knowledge of first aid measures for the target group	Carry out first aid measures appropriately	Willingness to give first aid
Accompanying during severe illness and in the process of loss, dying and bereavement	Basic knowledge of palliative care, phases of dying and bereavement	Ability to observe the situation and to communicate appropriately with the client and the informal caregivers  Ability to cooperate with the team within a care plan	Empathy

## 3. The training course

Each of the modules is divided into eight sections, as follows:

1. An introduction to the tasks associated with the main topic of the module
2. The expected competence of home helpers following the module
3. A diagrammatic description of the topics in the module
4. A case study example to be used during the training
5. How topics build on former modules
6. Post-module self-assessment and evaluation
7. An overview of the training topics:
  - The suggested timeframe for a topic gives a guideline for the planning, but it has to be adapted to the needs of the participants. A training day will last between six and seven hours and gives space for administration issues, burning topics, recap of previous work and post-module evaluation and self-assessment activities.
  - The column reserved for the taxonomy shows if the training topic is theoretical (knowledge), practical (skills) or behavioural (attitude). The three different taxonomies should inform the choice of method.
  - The column entitled “Content and objectives for the participant” indicates the knowledge, skills and attitude that the student should show by the end of the module. These should guide the post-module evaluation.
  - The column entitled “Suggested training method” helps the trainer to prepare a variety of methods, using his/her pedagogical background and experience.
8. References and resources. Trainers are encouraged to add their own.

## Module 1

### Job management and working effectively

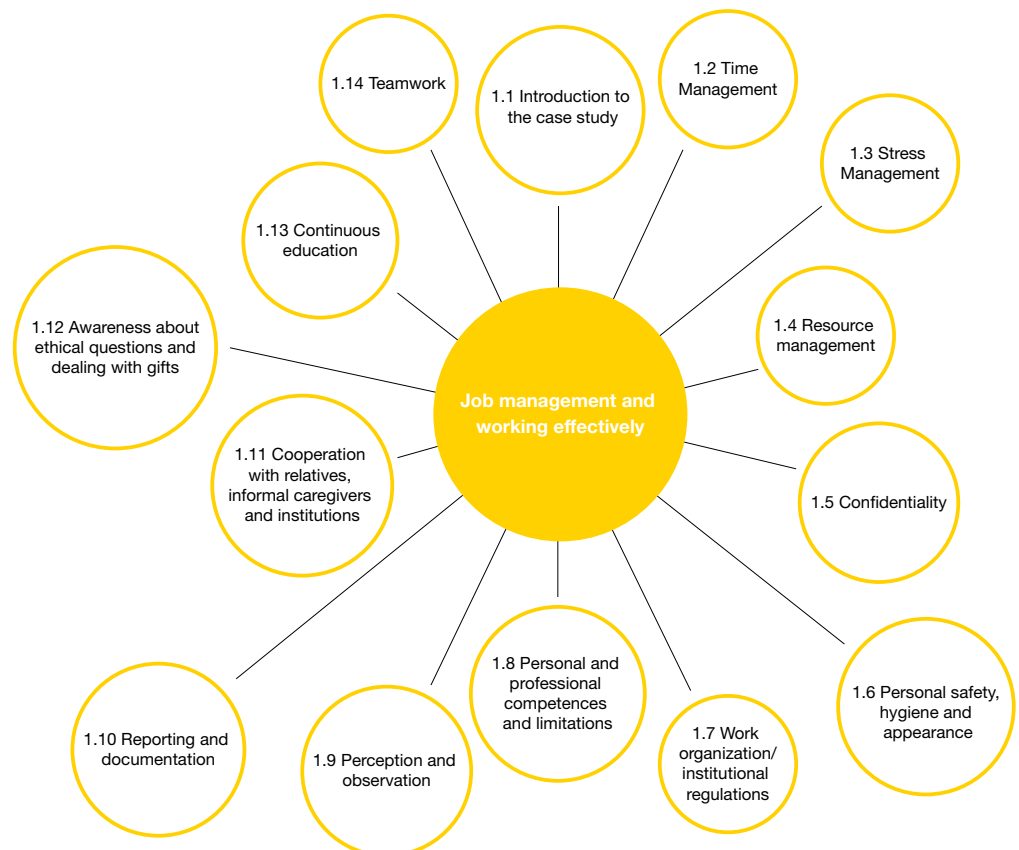
#### 1. Introduction

Home helpers (HH) are always members of a health and/or social team and as such they have to find their position in the organization and develop their attitude towards the team and towards the client and his/her surroundings. The HH is also challenged by the professional rules, the team in its development state and team members as individuals, as well as the characteristics of the different clients. After the training, as newcomers, home helpers should be prepared to develop their resources and to discover as soon as possible their role in the provision of community-based home care (CbHC).

#### 2. Competence after this module

The home helper is able to find his/her position in a team, taking into consideration his/her own resources for work-, time- and health management. He/she cooperates with other team members and clients by using his/her knowledge, skills and attitude within his/her competences and the organization's regulations.

#### 3. Topics: 24 – 30 hours



#### 4. Case study example: the beginner home helper

Ms Arslan was born in a rural area in Turkey. She has been living in Austria for the last 25 years, and is now 40 years old. Recently she finished the home helpers' training at the Viennese Red Cross branch and started her work as a home helper two months ago. In the first two weeks she received information from her line manager concerning reporting and documentation of her work, how the organization works and the institution's regulations. In the beginning she was exhausted every day, because there were so many regulations and sometimes she did not understand why things should be done a particular way, but slowly, she realized that all the topics she had learnt during the training were becoming useful and helping her to find the right orientation.

A special emphasis was put on confidentiality within her work. Additional to the material received from her line manager, she received information and support from her mentor. The mentor explained aspects of personal safety and hygiene. In the first team meeting in which Ms Arslan participated, several specific cases of clients were discussed and ethical issues and proper stress management were addressed. This team meeting was very important for her, because she could talk with her colleagues about a client who was very unfriendly towards her and she felt discriminated against because of her origin. Also she felt insecure because in her tradition it is not usual for a woman to support a man in his daily activities like washing, going to the toilet, etc.

After two months' work she realized that working with older people at home is very challenging and she needs continuous education and regular participation in the team meeting to support her job.

#### 5. Topics to be built on

Tasks	Knowledge	Skills	Attitude
Learning	Meaning of learning a new profession	Personal experiences with learning	Dealing with feelings of guilt and anger by recognizing mistakes and gaps in knowledge

#### 6. Post-module self-assessment and evaluation

List own strengths and weaknesses based on the topics of the module. Define goals and decide where to put emphasis in learning.

Time: 1 hour

## 7. Contents, objectives and suggested training method

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.1 Introduction</b>			
1 hour	<b>Attitude</b>	<ul style="list-style-type: none"> <li>• Introduction to the case study in section 4</li> <li>• To get acquainted with the learning group and the trainers and to learn about participants' motivation in becoming a home helper</li> </ul>	Ask participants to turn to a neighbour and introduce themselves and say what has motivated them to become a home helper. Then ask each one in turn to introduce their partner and his/her motivation to the plenary group
<b>7.2 Time management</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To explain differences in priority setting related to:               <ul style="list-style-type: none"> <li>• Existing needs</li> <li>• Time</li> <li>• Financial resources</li> <li>• Individual goals and experiences</li> </ul> </li> <li>• To get acquainted with different systems of work plans used in home helping:               <ul style="list-style-type: none"> <li>• Daily</li> <li>• Weekly</li> <li>• Seasonal</li> </ul> </li> </ul>	<p>Lecture including different examples taken from the lives of the participants and the work of the home helper</p> <p>Demonstration of different tools and templates</p>
	<b>Skills</b>	To set and explain priorities	Groupwork with a given list of tasks for a day and a week
	<b>Attitude</b>	To reflect on the individual's use of time	Homework followed by class discussion. Record how time is used during one day and reflect on priorities and effectiveness.



TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.3 Stress management</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To explain the difference between healthy and unhealthy stress</li> <li>To describe the symptoms of unhealthy stress</li> </ul>	Discuss, using the participants' knowledge and experience and looking particularly at the case study in section 4
	<b>Skills and attitude</b>	To fill in a stress evaluation questionnaire and decide on consequences for the period of the HH training	<ul style="list-style-type: none"> <li>Individual work with a good questionnaire</li> <li>In class, work out coping mechanisms:                             <ul style="list-style-type: none"> <li>Physical</li> <li>Social</li> <li>Psychological</li> <li>Mental/spiritual</li> </ul> </li> </ul>
<b>7.4 Resource management</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To define the term "resources"</li> <li>To explain the importance of resources in care work:                             <ul style="list-style-type: none"> <li>Own resources</li> <li>Clients' resources</li> <li>Informal caregivers' resources</li> <li>Institutional/ financial resources</li> </ul> </li> <li>To reflect on advantages and disadvantages of using resources</li> </ul>	Lecture with worksheets and examples of individual and local resources
	<b>Skills</b>	To raise awareness of the HH's resources as a team member and in care work, including the resources of: <ul style="list-style-type: none"> <li>Minorities</li> <li>Gender</li> <li>Age</li> </ul>	Analyse the possible resources of the person in the case study (section 4)
	<b>Attitude</b>	To strengthen resources through appreciation and positive feedback	Apply feedback rules

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.5 Confidentiality</b>			
1 hour	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To hear basic information about confidentiality:               <ul style="list-style-type: none"> <li>Legal</li> <li>Medical</li> <li>Therapeutic</li> </ul> </li> <li>To explain scope and importance of confidentiality for HH</li> <li>To raise awareness about ethical questions</li> </ul>	<ul style="list-style-type: none"> <li>Use the law and organization's regulations for explanation of meanings</li> <li>Work with Red Cross Red Crescent principles to show how HH can meet ethical questions</li> </ul>
	<b>Skills</b>	To distinguish between confidential and non-confidential information	Use the example case study to illustrate
	<b>Attitude</b>	To be aware of traps for breaking confidentiality and how to avoid them	Use the example case study to illustrate
<b>7.6 Personal safety, hygiene and appearance</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To give basic information on professional health risks in CbHC workplaces and prevention measures:               <ul style="list-style-type: none"> <li>Backache</li> <li>Infections of the respiratory system</li> <li>Traffic accidents</li> <li>Burn-out</li> </ul> </li> <li>To describe the rules of appropriate professional appearance (dress code)</li> </ul>	<ul style="list-style-type: none"> <li>Lecture about risks and prevention with a worksheet</li> <li>Use the organization's regulations</li> </ul>
		<ul style="list-style-type: none"> <li>To evaluate health risks in the training organization and in self-care/neglect</li> <li>To explain how to apply the basic hygiene rules:               <ul style="list-style-type: none"> <li>Hand-washing</li> <li>Separation of clean and dirty items</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Evaluation through a questionnaire with defining goals and measures</li> <li>Exercises</li> </ul>

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.7 Work organization/institutional regulations</b>			
1 hour	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To be informed about the work of the organization and institutional regulations</li> </ul>	Explain the organization's regulations
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>To apply the regulations during training and be prepared to start working within the regulations</li> </ul>	Discussion about rights, responsibilities and duties
<b>7.8 Personal and professional competences and limitations</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To explain the HH's competences</li> <li>To be informed about competences of other professionals in the team</li> </ul>	Lecture
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>To apply competences in example situations</li> </ul>	Role play with situations developed from the case study in section 4
<b>7.9 Perception and observation</b>			
0.5 day	<b>Knowledge</b>	To explain the difference between perception, observation and interpretation	Short film, followed by discussion and explanation of the differences
	<b>Skills and attitude</b>	To use all senses for perception and observation: <ul style="list-style-type: none"> <li>• Oral</li> <li>• Touch</li> <li>• Smell</li> <li>• Vision</li> <li>• Hearing</li> </ul>	Give opportunities to train all senses

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.10 Reporting and documentation</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To be informed about reporting systems and their use in the organization</li> <li>To name the procedures for reporting in case of emergency and unforeseen situations</li> </ul>	Invite the head nurse of a CbHC organization to give information and show examples of the reporting system
	<b>Skills and attitude</b>	To use the forms properly and accurately for observations within the given tasks and competences	Introduction to forms for documentation
<b>7.11 Cooperation with relatives, informal caregivers and institutions</b>			
0.5 day	<b>Knowledge, skills and attitude</b>	<ul style="list-style-type: none"> <li>To explain the principles of communication and cooperation with family members and other caregivers:                             <ul style="list-style-type: none"> <li>Recognition</li> <li>Appreciation</li> <li>Transparency</li> <li>Openness</li> </ul> </li> <li>To be informed about services that might be available for the client</li> </ul>	<ul style="list-style-type: none"> <li>Discussion about experiences, expectations, contribution, limits, with examples</li> <li>List of services</li> </ul>

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.12 Awareness about ethical questions and dealing with gifts</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To raise awareness about ethical questions in daily work</li> <li>• To be informed about the basic principles of:                             <ul style="list-style-type: none"> <li>• Beneficence</li> <li>• Avoidance of harm</li> <li>• Autonomy</li> <li>• Justice</li> <li>• Deontology</li> </ul> </li> <li>• To be informed of the organization's regulations about receiving gifts</li> </ul>	Use examples from HH's work and with a written summary for principles
	<b>Skills and attitude</b>	To apply the regulations in critical situations with team members, beneficiaries and relatives	In groupwork, define solutions using case studies
<b>7.13 Continuous education</b>			
1 hour	<b>Knowledge</b>	To be informed about the regulations and opportunities: <ul style="list-style-type: none"> <li>• On the job</li> <li>• In workshops</li> <li>• In standardized trainings</li> </ul>	Lecture
	<b>Skills and attitude</b>	To receive an individual register book for continuous education	Distribution and demonstration of a register book

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.14 Teamwork</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To explain the principles of good teamwork</li> <li>• To be informed about different phases of team building:                             <ul style="list-style-type: none"> <li>• Forming</li> <li>• Storming</li> <li>• Norming</li> <li>• Performing</li> </ul> </li> </ul>	Lecture with examples from HH's work
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To define the rules of teamwork in the learning group</li> <li>• To analyse the important factors which will make the beginner HH a good team worker</li> <li>• To be aware of the importance of team meetings</li> </ul>	<ul style="list-style-type: none"> <li>• Discussion and decision about ground rules; making them visible and re-visitible during the whole training</li> <li>• Brainstorming and discussion starting with the case study in section 4</li> </ul>

## 8. References and resources

### 7.2 Stress management

[stress.about.com/](http://stress.about.com/) (accessed 01.10.15)

### 7.12 Ethics

[www.nursingworld.org/mainmenucategories/ethicsstandards/resources/ethics-definitions.pdf](http://www.nursingworld.org/mainmenucategories/ethicsstandards/resources/ethics-definitions.pdf) (accessed 01.10.15)

### 7.14 Teamwork

[www.kent.ac.uk/careers/sk/teamwork.htm](http://www.kent.ac.uk/careers/sk/teamwork.htm) (accessed 01.10.15)

[www.dummies.com/how-to/content/ten-qualities-of-an-effective-team-player.html](http://www.dummies.com/how-to/content/ten-qualities-of-an-effective-team-player.html) (accessed 01.10.15)

[www.who.int/patientsafety/education/curriculum/who\\_mc\\_topic-4.pdf](http://www.who.int/patientsafety/education/curriculum/who_mc_topic-4.pdf) (accessed 01.10.15)

## Module 2

### Domestic assistance

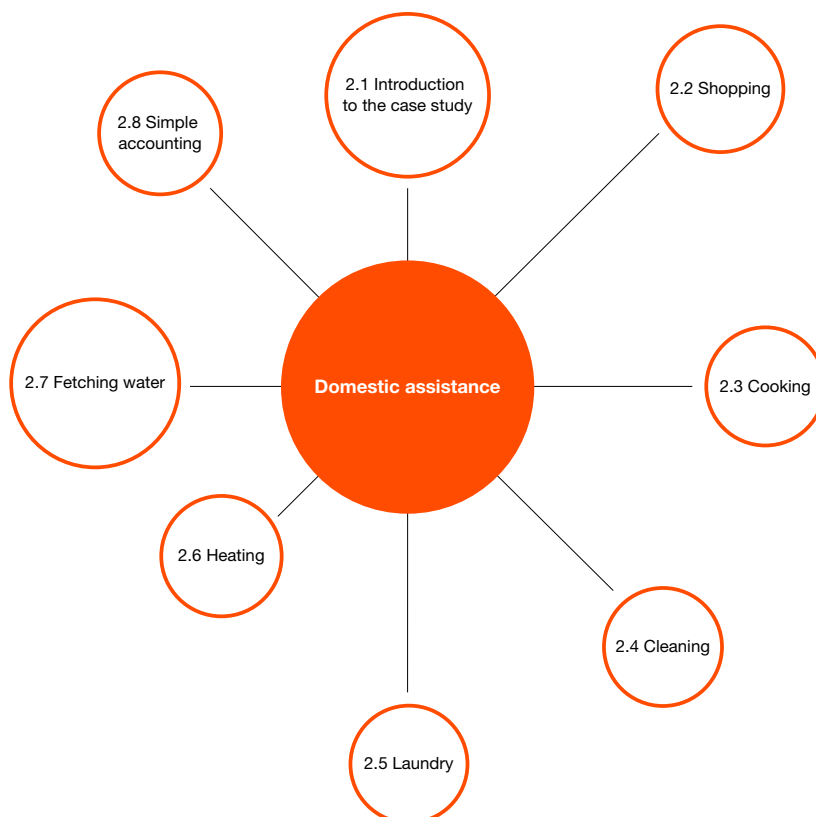
### 1. Introduction

Domestic assistance is the most important activity and responsibility of the home helper (HH). The vulnerability of elderly people increases with the characteristics of age like difficulties in moving, in sight and hearing, and dependence on outside support for shopping and meal provision. In areas where the Red Cross Red Crescent is providing services, elderly people often live alone or as frail couples with fewer resources than the average population. Adequate household assistance will therefore be crucial for a dignified life and improved quality of life.

### 2. Competence after this module

At the end of this module, the HH is able to fulfil household activities for individuals/ couples, involving their resources and values appropriately. She/he can estimate the needs of a week and organize required tasks effectively.

### 3. Topics: 24 – 30 hours



#### 4. Case study example: the elderly woman living on her own far from family

Mrs Abramovic lives alone in a village in a rural area. During the summer months, her daughter and her two grandchildren (10 and 12 years old) live with her, but at the end of September they move back to the town which is about 30 kilometres away. Now, at the end of October, the days are already cool and she asked the manager of the local Red Cross if somebody could help her with heating (preparing wood for the stove) and sometimes with shopping. The first assessment visit of the visiting nurse shows that she also has difficulties with housework and cooking. Mrs Abramovich is grateful that a home helper will come to assist her twice a week. Mrs Bielova, the home helper, will come for two hours, Tuesday and Friday, and on the way to the private house, she will do the necessary shopping.

Every second weekend, the daughter, Mrs Vika drives along to see her mother. She does the big laundry for her and brings any medication from the pharmacy in town. She is very concerned about her mother living alone and she feels somehow guilty leaving her in such a situation, but Mrs Abramovic is strictly against moving to town to her daughter's family.

#### 5. Topics to be built on former modules

Tasks	Knowledge	Skills	Attitude
Time management	Basics about setting priorities and making working plans	Prioritize duties and develop personal work schedules	Awareness of effective use of time

#### 6. Post-module self-assessment and evaluation

Write a short report to inform Mrs Abramovic's daughter about what was done and what you will do at your next visit by consulting your work plan and your notes on the topics on domestic assistance.

Time: 1 hour



## 7. Contents, objectives and suggested training method

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.1 Introduction</b>			
		<ul style="list-style-type: none"> <li>• Introduction to the case study (section 4)</li> <li>• To plan activities</li> </ul>	Elaborate a work plan (groupwork) for the two hour visit (built on knowledge from Module 1, Job management and working effectively)
<b>7.2 Shopping</b>			
0.5 day	<b>Knowledge</b>	To list the criteria for priorities in shopping: <ul style="list-style-type: none"> <li>• Basic needs</li> <li>• Financial means</li> <li>• Local market</li> <li>• Seasonal products</li> <li>• Storage possibilities</li> <li>• Expiry date</li> <li>• Personal preferences</li> <li>• Health preconditions</li> </ul>	Elaborate using participants' knowledge and experience
	<b>Skills and attitude</b>	To prepare a shopping list together with the client on the basis of resources, needs and preferences	Role play with the case study (section 4) as a starting point and evaluation related to criteria for priorities
<b>7.3 Cooking</b>			
1 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To describe:               <ul style="list-style-type: none"> <li>• The nutritional pyramid</li> <li>• Nutritional principles for elderly people</li> <li>• Ways of providing/preparing/warming meals</li> </ul> </li> <li>• To name basic dietary requirements for persons:               <ul style="list-style-type: none"> <li>• With diabetes</li> <li>• With obesity</li> <li>• With high blood pressure</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Nutritional pyramid as a puzzle</li> <li>• Lecture with work-sheet</li> <li>• Lecture with examples</li> <li>• Lecture and written examples of menus</li> </ul>
	<b>Skills and attitude</b>	To prepare a menu plan for a week	<ul style="list-style-type: none"> <li>• Work in groups using the above example and the nutritional principles</li> <li>• Share plans (and recipes)</li> </ul>

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.4 Cleaning</b>			
1 day	<b>Knowledge and attitude</b>	<ul style="list-style-type: none"> <li>To explain the importance of hygiene measure:               <ul style="list-style-type: none"> <li>To protect yourself</li> <li>To protect the client</li> </ul> </li> <li>To describe the different most-used cleaning materials</li> <li>To name recycling possibilities</li> <li>To explain why waste disposal is necessary</li> </ul>	<ul style="list-style-type: none"> <li>Show sources and ways of contamination</li> <li>Demonstration and focus on understanding the usage instructions</li> <li>Invite a specialist/waste collector, show a waste management institution</li> </ul>
	<b>Skills</b>	<ul style="list-style-type: none"> <li>Explain/demonstrate how different materials in the household are cleaned correctly:               <ul style="list-style-type: none"> <li>Tiles</li> <li>Wooden floors</li> <li>Carpets</li> <li>Windows</li> <li>Sanitary premises</li> <li>Stoves</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Experiment with different materials</li> <li>Elaborate checklists</li> <li>Show ecologically harmless alternatives</li> </ul>
	<b>Knowledge and attitude</b>	<ul style="list-style-type: none"> <li>Name the principles of safe storage of cleaning materials</li> <li>Elaborate a list for periodic cleaning and revision (weekly, monthly, annually)</li> </ul>	<ul style="list-style-type: none"> <li>Show good and bad examples</li> <li>Use checklists</li> </ul>
<b>7.5 Laundry</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>Explain the care needs of different textiles</li> <li>Explain appropriate care for clothes using different means and procedures</li> </ul>	Use examples and list of material care symbols
	<b>Skills</b>	Demonstrate how to clean and to iron skirts, blouses, trousers	Exercises (perhaps with a small competition)
	<b>Attitude</b>	Show how to care for the goods of the client by taking into consideration his/her wishes and experiences in caring for clothes and other materials	Use the case study to work with good and bad examples

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.6 Heating</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• Explain the importance of the indoor climate with respect to well-being</li> <li>• Explain the risks of different heating systems</li> </ul>	Discussion led by trainer
	<b>Skills and attitude</b>	Describe how to use and to control: <ul style="list-style-type: none"> <li>• Their own heating system</li> <li>• The heating system of the person in the case study</li> <li>• Individual preferences</li> </ul>	Use the different experiences of the participants
<b>7.7 Fetching water</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• Explain the importance of having enough clean water</li> <li>• Compare with the local situation</li> </ul>	<ul style="list-style-type: none"> <li>• Use statistics about the availability of water</li> <li>• Lecture about the physiological need for water</li> </ul>
	<b>Skills and attitude</b>	Give examples of how to provide clean water: <ul style="list-style-type: none"> <li>• Filter</li> <li>• Disinfectant (chloride, sunlight, etc.)</li> <li>• Tap, well</li> <li>• Boiled water</li> <li>• Rainwater</li> </ul>	<ul style="list-style-type: none"> <li>• Demonstration material</li> <li>• Video</li> </ul>
<b>7.8 Simple accounting</b>			
0.5 day	<b>Knowledge and attitude</b>	Basic financial management: <ul style="list-style-type: none"> <li>• Responsibility of the HH</li> <li>• Use of money/credit card for somebody else</li> </ul>	<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Written rules for HH</li> </ul>
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• Elaborate a simple budget for shopping</li> <li>• Explain how to show accountability</li> </ul>	Use the case study in section 4 and check the prices with different providers

## 8. References and resources

[www.wikihow.com/Sterilize-Water-With-Sunlight](http://www.wikihow.com/Sterilize-Water-With-Sunlight) (accessed 01.10.15)

## Module 3

### Psychosocial assistance and care

#### *1. Introduction*

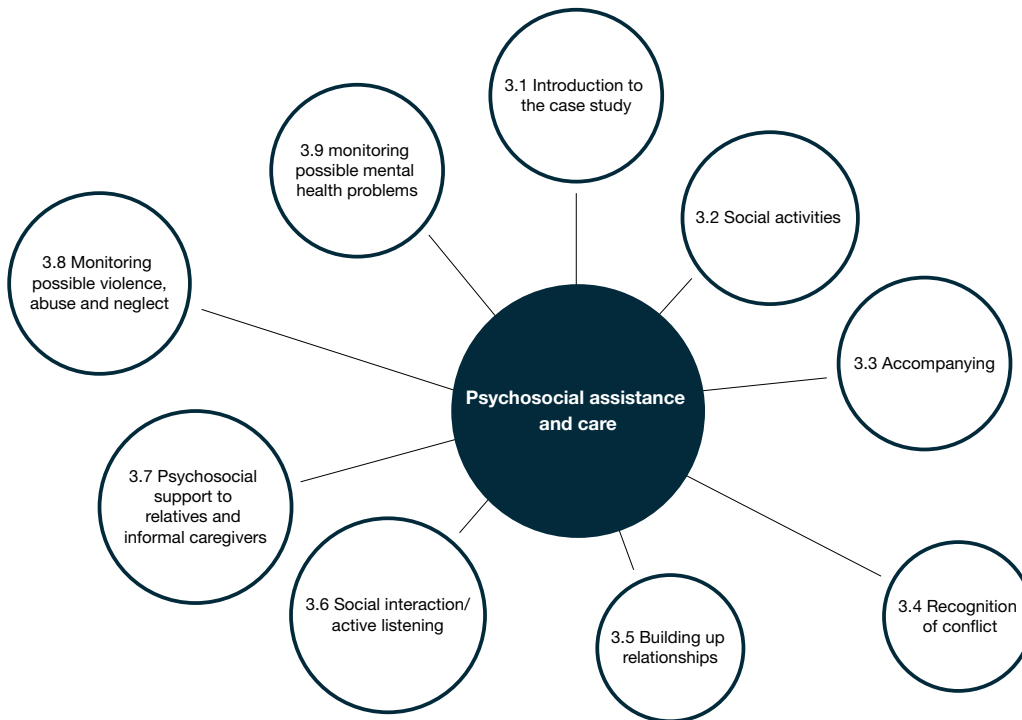
Older vulnerable people sometimes experience that they become less and less capable of assuming their daily duties and habits. They feel lonely and as if no one cared for them, even in cases where family members look after them. The feeling of sadness appears when a person is ill and dependent on others and when the person allows others to organize their lives. This feeling can lead to “extraordinary incapability” in daily life. The feelings of sadness and despondency can worsen existing health problems. If two persons suffer from the same disease, out of whom one is depressed and the other is not, it is more likely that the depressed person will be less able to look after him/herself than the one who is not depressed.

People who are in a state of sadness do not see the purpose of their life and see no reason to continue living. In addition, they may also feel as if they have lost control over their life. What they used to do, as a routine and completely independently, now becomes the work of the caregivers (who decides when and how something will be done, what the person will eat, how long the person will sleep, when the person will take a bath, etc.). In such a situation, the elderly person feels emotionally frustrated and less capable than before. This is why a good way of helping the person to fight sadness is to encourage a certain degree of independence.

#### *2. Competence after this module*

The home helper (HH) is able to communicate appropriately with clients and informal caregivers as well as with team members. She/he takes into account influencing factors for assistance and care like the client’s biography and needs, the care plan and dynamics in the care system. At the same time, she/he is aware of her/his own role and its limits in dealing with situations like violence and neglect, conflict and mental health problems.

### 3. Topics: 24 – 30 hours



### 4. Case study example: lack of mobility and depression in the elderly man

In the last year, Lazar, who is 78 years old, suffers from increasing limitation of his mobility, due to arthrosis in legs and hands. Besides the pain in his joints, he feels that independence in his daily life is continuously decreasing. Before the problems came up, he used to lead a rather active life, carrying out different activities with his family, and in the “pensioners’ club”, where he used to go daily with his old friends. Since his physical problems started, he has suffered great losses: he has difficulties in communicating with people and difficulties in moving around. His social life has drastically decreased: he sees his friends less, he no longer cooks which was his great hobby, and he does not read newspapers since he finds it difficult. In one word, his daily pleasures, which made him feel good, have significantly decreased. He says that he currently feels without any desire to do anything, that he is tired, melancholic and mopey. His family members contacted a doctor, because they feel helpless about this change of behaviour and were told that it is likely he is suffering from depression.

### 5. Topics to be built on former modules

Tasks	Knowledge	Skills	Attitude
Perception and observation	The difference between perception, observation and interpretation	Use the senses for observation, report about appropriately	Impartiality and awareness of different views

## 6. Post-module self-assessment and evaluation

Describe four supportive interventions of the HH for the man in the example case study and give reasons why they will/can be helpful.

Time: 1 hour

## 7. Contents, objectives and suggested training method

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.1 Introduction</b>			
1 hour	<b>Knowledge and attitude</b>	To be informed about the interdependence of social, physical, psychological and mental well-being	Lecture to introduce the case study
<b>7.2 Social activities</b>			
2 hours	<b>Knowledge</b>	To explain how biography influences social activities in old age: <ul style="list-style-type: none"> <li>• Professional work</li> <li>• Living situation</li> <li>• Family/friends</li> <li>• Hobbies</li> <li>• Culture</li> <li>• History</li> </ul>	Interview with an old person (text from literature, film, experience)
	<b>Skills</b>	<ul style="list-style-type: none"> <li>• To analyse the case study for influencing factors which can create loss of social activities</li> <li>• To find options for social activities (challenging different senses) for different target groups: <ul style="list-style-type: none"> <li>• Men</li> <li>• Women</li> <li>• Intellectual</li> <li>• Practical</li> </ul> </li> </ul>	Use the key words from above for analysis in groups
	<b>Attitude</b>	To develop respect and empathy towards elderly people's possibilities for social activities	Visit to a pensioners' club

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.3 Accompanying</b>			
6 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To explain how to guide a person with limitations:                             <ul style="list-style-type: none"> <li>Visually impaired</li> <li>Hearing impaired</li> <li>Mobility problem</li> </ul> </li> <li>To be informed about the legal situation of people with mobility, visual or hearing disability</li> </ul>	<ul style="list-style-type: none"> <li>Lecture with demonstration</li> <li>Summary of rights for disabled people</li> </ul>
	<b>Skills</b>	To guide a person (with and without devices) with limitations, ensuring: <ul style="list-style-type: none"> <li>Security</li> <li>Autonomy</li> <li>Well-being</li> </ul>	<ul style="list-style-type: none"> <li>Case situations with self-organized groupwork with roles of client, caregiver, observer</li> <li>Use of crutches, wheelchair, walkers</li> </ul>
	<b>Attitude</b>	To recognize that accompanying is an important aspect of social inclusion	<ul style="list-style-type: none"> <li>(Homework). Observation in daily life, how many persons with limitations are seen in the street – accompanied, not accompanied, with equipment, without equipment?</li> <li>Discussion about the observations. Why – why not?</li> </ul>
<b>7.4 Recognition of conflict</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To be informed about frequent conflict situations in CbHC and how to recognize the signs</li> <li>To name whom to address in case of conflict</li> <li>To get ideas how a conflict can be handled</li> </ul>	<ul style="list-style-type: none"> <li>Lecture with examples</li> <li>Explanation of official and unofficial channels in case of conflict, and possible solutions</li> </ul>
	<b>Skills</b>	To control own behaviour in case of conflict: <ul style="list-style-type: none"> <li>Fight reaction</li> <li>Flight reaction</li> </ul>	Reflection on own conflict reaction
	<b>Attitude</b>	Raising awareness of a neutral position in a conflict situation	Discussion about the meaning of “neutrality”

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.5 Building up relationships</b>			
2 hours	<b>Knowledge</b>	<p>To be aware about different phases of relationship, e.g.:</p> <ul style="list-style-type: none"> <li>• First phase: orientation</li> <li>• Second phase: identification</li> <li>• Third phase: use</li> <li>• Fourth phase: separation</li> </ul>	Explain a model (e.g. Peplau) of relationship using the case study as an example
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To find options for appropriate communication in all four phases</li> <li>• To show interest and understanding for ongoing process</li> </ul>	Discussion and filling in a worksheet
<b>7.6 Social interaction/active listening</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To explain different types of communication: <ul style="list-style-type: none"> <li>• Verbal communication</li> <li>• Non-verbal communication</li> <li>• Active listening</li> </ul> </li> <li>• To be informed about the basics of lay counselling</li> </ul>	Lecture with role play (two trainers), observing the principles of perception, observation and interpretation from module 1
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To use various forms of communication and active listening</li> <li>• To be able to provide lay counselling in situations of daily assistance</li> </ul>	<ul style="list-style-type: none"> <li>• Role plays in groups (HH, client and observer)</li> <li>• Role play in the plenary class (respecting participants' competences and limits)</li> </ul>



TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.7 Psychosocial support to relatives and informal caregivers</b>			
3 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To be informed about basics of family dynamics:               <ul style="list-style-type: none"> <li>Roles and functions of family and family members</li> <li>Roles and functions of volunteers and professionals in the family system</li> <li>Ways of responding to illness, disability and stress</li> </ul> </li> <li>To be informed about institutions and organizations for psychosocial support</li> </ul>	<ul style="list-style-type: none"> <li>Show and explain the possible dynamics with the example case study</li> <li>Hand out a list of organizations and the services offered by them</li> </ul>
	<b>Skills and attitude</b>	To apply supportive approaches in communication: <ul style="list-style-type: none"> <li>Interest</li> <li>Appreciation</li> <li>Empathy</li> <li>Information</li> </ul>	Analysis of experiences or examples
<b>7.8 Monitoring possible violence, abuse and neglect</b>			
2 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To be informed about basics of violence, abuse and neglect:               <ul style="list-style-type: none"> <li>Risk factors</li> <li>Forms</li> <li>Signs</li> <li>Ways of getting support</li> </ul> </li> <li>To be informed of the procedures of the organization in case of suspicion of violence, abuse or neglect</li> </ul>	<ul style="list-style-type: none"> <li>Lecture with written information</li> <li>Information about organizational procedures</li> </ul>
	<b>Skills and attitude</b>	To show opportunities and limits in HH's assistance	Discussion

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.9 Monitoring possible mental health problems</b>			
3 hours	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To be informed about the most frequent mental health problems, e.g.                             <ul style="list-style-type: none"> <li>• Depression</li> <li>• Dementia</li> <li>• Addiction</li> </ul> </li> <li>• To be informed about how to understand changes of behaviour as a sign of disease</li> </ul>	Lecture and interview with an expert
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• Recognize signs of the most frequent mental health problems</li> <li>• Show respect and openness for different behaviour</li> </ul>	Discussion on experiences with the participants' acquaintances

## 8. References and resource

Peplau Hildgard E, Interpersonal relationship in care, 1995. See: [en.wikipedia.org/wiki/Hildegard\\_Peplau](https://en.wikipedia.org/wiki/Hildegard_Peplau) (accessed 01.10. 15)

## Module 4

### Assistance in individual care

### 1. Introduction

Sometimes, the home helper (HH) is involved in individual care in the framework of a care plan and in cooperation with medical professionals. They both share the responsibility of assuring well-being through careful assistance in daily living activities. At the same time, the HH is aware of potential problems that can occur and of the importance of observation of changes.

### 2. Competence after this module

The HH will be able to provide individual care in the main activities of daily living like personal hygiene, eating, dressing, going to the toilet and being mobile. She/he will take into account the client's habits and values and is able to motivate him/her for self-support. With his/her careful observation and information, the HH as a member of the CbHC team contributes to avoid complications of the client's health status.

### 3. Topics: 24 -30 hours



#### 4. Case study example: the bedridden man and his wife not coping well

Mr Brown lives at home with his wife. For a year now, he has been mostly confined to bed, due to a stroke and pneumonia causing him to lose mobility. During hot days, he sweats and this is a risk for developing bedsores. The care plan instructs changing his position in the bed every three hours and keeping records of how much he drinks. Whenever possible, Mr Brown likes to sit in the chair and look out of the window at his beloved garden.

Due to her own physical weakness and emotional strain his wife is no longer able to take care of him. Nevertheless, she is still able to assist him with eating and drinking as well as taking his medication. The administration of the medication, however, has started causing her problems and has already led to a few errors. Often she is unable to grasp the preventive measures and the implementation of therapeutic activities and shows signs of mental overload. Mrs Brown tends to panic whenever her husband develops physical changes such as coughing fits, cramps or fever.

After two decades of self-sacrifice to care for her younger daughter and her grandchildren, she has suffered from several collapses and has now passed on the housekeeping to a home helper.

In the past few months, there has been an accumulation of problems in the house. The telephone is temporarily out of order and for the second time, the heating broke down because Mrs Brown forgot to order new heating oil. Due to a power failure, all food stocks defrosted in the freezer.

The interior design and all facilities of the house are designed for the needs of a disabled person. It is possible to give him a shower in a special wheelchair whenever his general condition permits this. Once per week, the daughter comes for two to three hours to help managing the administration and the shopping and to care for her father when Mrs Brown has medical and other appointments.

#### 5. Topics to be built on former modules

Tasks	Knowledge	Skills	Attitude
Perception, observation	Difference between perception, observation, interpretation	Observation with all senses and reporting	Accuracy

#### 6. Post-module self-assessment and evaluation

Describe three causes of bedsores and explain how they can be prevented.  
 Demonstrate how to move a client from bed to a chair  
 Time: 1 hour

## 7. Contents, objectives and suggested training method

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANTS	SUGGESTED TRAINING METHOD
<b>7.1 Introduction</b>			
0.5 day		<ul style="list-style-type: none"> <li>• To be informed about the health and medical background of:               <ul style="list-style-type: none"> <li>• Cerebral stroke</li> <li>• Paralysis</li> <li>• Risks caused by limited mobility and potential complications, like:                   <ul style="list-style-type: none"> <li>* Bedsores</li> <li>* Pneumonia</li> <li>* Malnutrition</li> </ul> </li> </ul> </li> <li>• To be aware of potential problems and tasks for the HH in the example case study</li> </ul>	<ul style="list-style-type: none"> <li>• Introduction to the case study with background information</li> <li>• Group work and discussion</li> <li>• Indication of which topics are worked through during this module</li> </ul>
<b>7.2 Motivating client for self-support</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To explain basics about factors influencing motivation:               <ul style="list-style-type: none"> <li>• Internal motivation</li> <li>• External motivation</li> </ul> </li> <li>• To be informed about various influencing factors of motivation, such as:               <ul style="list-style-type: none"> <li>• Pyramid of needs (by Maslow or other)</li> <li>• Meaningfulness of the task</li> <li>• Autonomy/self-support</li> </ul> </li> </ul>	Lecture, presenting information on the types and methods of motivation
	<b>Skills and attitude</b>	<p>To show ability to encourage and empower clients for self-support, choosing:</p> <ul style="list-style-type: none"> <li>• When to take over an activity (e.g. buttoning small buttons)</li> <li>• When to guide and support an activity (e.g. preparing breakfast)</li> <li>• When to stand back and let the client act (e.g. cleaning a table)</li> </ul>	Develop ideas in groups and discuss motivating behaviour in the plenary session (taking into account the needs of clients and informal caregivers)

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANTS	SUGGESTED TRAINING METHOD
<b>7.3 Assistance in getting dressed/undressed</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To describe the role of clothing in daily living:               <ul style="list-style-type: none"> <li>• Physical</li> <li>• Social</li> <li>• Psychological</li> </ul> </li> <li>• To be informed about the most frequent impairments that need support in dressing/undressing:               <ul style="list-style-type: none"> <li>• Pain</li> <li>• Weakness/fragility</li> <li>• Paralysis</li> <li>• Arteriosclerosis/dementia</li> </ul> </li> <li>• To name the principles of supporting dressing/undressing:               <ul style="list-style-type: none"> <li>• Avoiding pain</li> <li>• Promoting self-support</li> <li>• Supporting rehabilitation</li> <li>• Showing respect of habits and values</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Brainstorming</li> <li>• Lecture</li> </ul>
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To apply different methods of dressing/undressing depending on the situation:               <ul style="list-style-type: none"> <li>• To avoid pain</li> <li>• To promote self-support</li> <li>• To support rehabilitation</li> <li>• To show respect of habits and values</li> </ul> </li> <li>• To develop ideas and knowledge about:               <ul style="list-style-type: none"> <li>• Devices to help beneficiaries in dressing/undressing and where to get them</li> <li>• Types of clothes (how to make; what can be altered in clothes so as to make them comfortable and easy to use)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Demonstration and exercise through pair work</li> <li>• Demonstration of examples/catalogues of devices</li> </ul>

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANTS	SUGGESTED TRAINING METHOD
<b>7.4 Assistance in eating and drinking</b>			
1 day	<b>Knowledge</b>	To explain nutritional principles for elderly people: <ul style="list-style-type: none"> <li>• The meaning of the nutritional pyramid</li> <li>• The concept of normal water balance and the importance of it</li> </ul>	Nutritional pyramid (e.g. as a puzzle)
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To develop a meal and drink schedule for one week, taking into account the preferences of the client</li> <li>• To fill in the client's drinking register</li> <li>• To rearrange the environment to make the process of eating and drinking easier/autonomous for the client</li> <li>• To be aware of devices to assist eating and drinking independently</li> </ul>	<ul style="list-style-type: none"> <li>• Groupwork: develop a plan with the related shopping list</li> <li>• Demonstration</li> <li>• Demonstration, taking into account the care plan for the case study (both people)</li> <li>• Presentation of the devices and how to use them (focus on understanding the instructions for use)</li> </ul>

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANTS	SUGGESTED TRAINING METHOD
<b>7.5 Assistance in using the toilet</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To know the norm of urine and bowel movements in terms of:               <ul style="list-style-type: none"> <li>Quality</li> <li>Quantity</li> <li>Colour</li> </ul> </li> <li>To explain what can create and prevent incontinence:               <ul style="list-style-type: none"> <li>Distance from toilet</li> <li>Muscular weakness</li> <li>Regularity</li> </ul> </li> <li>To explain what can create and prevent constipation and diarrhoea</li> <li>To explain devices for beneficiaries to act independently</li> </ul>	<ul style="list-style-type: none"> <li>Lecture with picture material</li> <li>List of foods preventing constipation and diarrhoea</li> </ul>
	<b>Skills</b>	<ul style="list-style-type: none"> <li>To be able to use a bedpan with client lying down or sitting</li> <li>To be able to use a urinal</li> <li>To be able to use a bedside commode</li> <li>To show how to do aftercare of client and equipment</li> </ul>	Demonstration with exercises
	<b>Attitude</b>	To show how to create a protective atmosphere and to respect the feeling of shame	Use the case study to demonstrate good and bad examples
<b>7.6 Assistance in personal hygiene</b>			
1 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>To explain the importance of maintaining personal hygiene; the effect of doing not enough or too much</li> <li>The structure of the skin and hair and appropriate care materials</li> <li>To explain the use of devices for personal hygiene</li> </ul>	<ul style="list-style-type: none"> <li>Teaching conversation</li> <li>Lecture</li> <li>Demonstration</li> </ul>
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>To show assistance for:               <ul style="list-style-type: none"> <li>Taking a shower</li> <li>Taking a bath</li> <li>Washing in bed</li> <li>Washing at the basin</li> </ul> </li> <li>To create a respectful attitude towards values and habits</li> </ul>	Exercise



TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANTS	SUGGESTED TRAINING METHOD
<b>7.7 Assistance in mobility, positioning and mobilization</b>			
1 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• Role of mobility in daily living</li> <li>• Basics on physical functions and impairment</li> <li>• Basics on techniques of:                             <ul style="list-style-type: none"> <li>• Mobilization</li> <li>• Positioning</li> <li>• Use of devices</li> <li>• Prevention of risks (fall, bedsores, contractures)</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Brainstorming and discussion</li> <li>• Lecture on categories of disabilities</li> <li>• Demonstration of handling</li> </ul>
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To apply techniques for:                             <ul style="list-style-type: none"> <li>• Mobilization</li> <li>• Positioning</li> <li>• Use of devices</li> <li>• Prevention of risks (fall, bedsores, contractures)</li> </ul> </li> </ul>	Exercises and use of instructions

## 8. References and resources

## Module 5

Assistance  
in health  
promotion  
and disease  
prevention

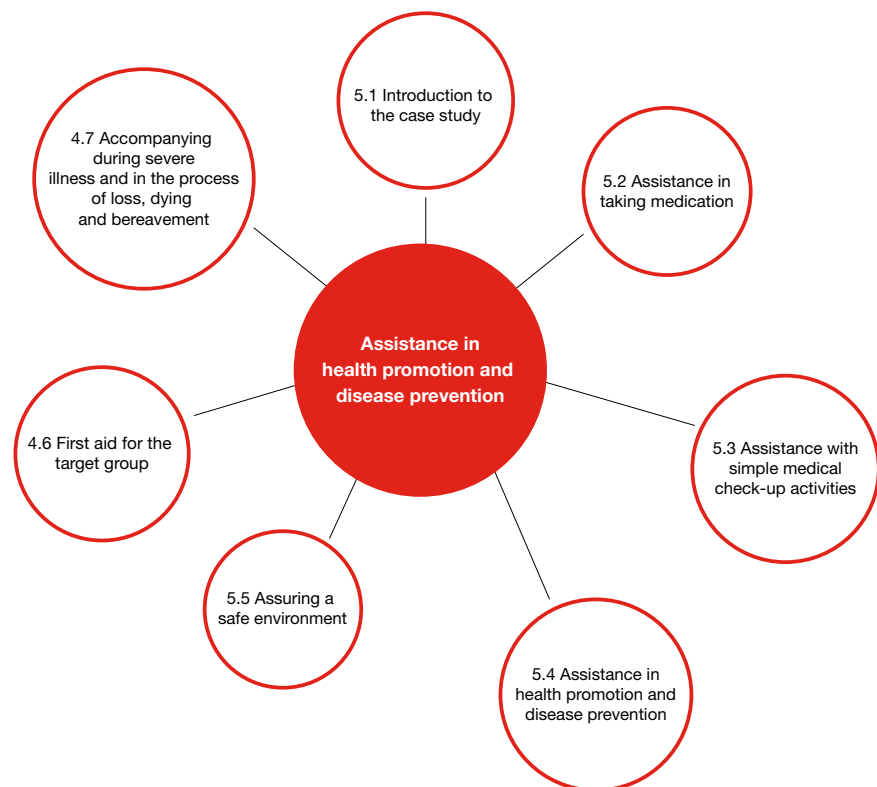
### 1. Introduction

We are aware of the increasing importance of noncommunicable diseases in all populations, but especially in elderly people. They often suffer from multiple limiting and chronic illnesses and consequently should be interested in maintaining or improving their health status. Red Cross Red Crescent programmes in CbHC therefore include knowledge and skills in health promotion and disease prevention. The home helper (HH) will not be a main player in these programmes but should be aware of his/her contribution at the level of individual care and assistance.

### 2. Competence after this module

As a member of the medical team, the HH is able to contribute to health promotion and disease prevention measures: she/he assists clients through awareness, observation, simple diagnostic activities and compliance in treatments.

### 3. Topics: 24 – 30 hours



#### 4. Case study example: the mourning woman, limited in her daily activities and in need of rehabilitation

Mrs Lionova, a daughter of Mrs Andritz, requested the Red Cross to help her mother. The mother, a 70 year old woman, had a stroke and, unfortunately, suffered hemiplegia on the right side, causing a weakness in her right leg. The right arm recovered quite well, but it is still difficult for her to apply fine motor skills. The care plan proposes to remind Mrs Andritz to take her medicines against hypertonia as she sometimes forgets, and to do frequent checks of blood pressure and pulse.

She has fallen several times because of dizziness and both mother and daughter are very much concerned about a possible hip fracture. For this reason, Mrs Andritz became quite inactive. She gained weight and developed diabetes. Accompanying her in regular walking with her walker would give her back a sense of security and involving her in preparing meals and light household work would provide a meaningful activity, promote her health and help her to overcome grief.

Previously, the family did not ask for help because her husband, together with the daughter who lives in a distant town, took care of her. Unfortunately, Mr Andritz died suddenly a month ago. During this month, the daughter looked after the mother. However, her leave is over and she has to go back to work and her family, so she cannot take care of her mother during the week.

The daughter told the HH that she is sometimes puzzled with the way her mother bursts into tears and then, a minute later, shows a sense of humour, which makes them both laugh as in earlier times.

#### 5. Topics to be built on former modules

Tasks	Knowledge	Skills	Attitude
Personal safety, hygiene and appearance (module 1)	Basic knowledge of professional health risk and prevention measures	Apply prevention measures	Self-care

#### 6. Post-module self-assessment and evaluation

Demonstrate one simple diagnostic activity: preparation, carrying out and documentation.  
Time: 10 minutes

## 7. Contents, objectives and suggested training method

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.1 Introduction</b>			
1 hour		To explore the activities of the HH using reports and documentation	Presentation of the case study (section 4) and the documentation
<b>7.2 Assistance in taking medication</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To name the rules for giving medication:               <ul style="list-style-type: none"> <li>• Right person</li> <li>• Right medication</li> <li>• Right time</li> <li>• Right dose</li> <li>• Right documentation</li> </ul> </li> <li>• To know how to report mistakes in medication intake and observation of unforeseen side-effects</li> </ul>	<ul style="list-style-type: none"> <li>• Lecture</li> <li>• Written regulations</li> </ul>
	<b>Skills and attitude</b>	To find measures to assist the client in taking medication: <ul style="list-style-type: none"> <li>• Time-wise</li> <li>• Preparation-wise</li> <li>• Easy to swallow</li> </ul>	Demonstration together with brainstorming ideas
<b>7.3 Assistance with simple medical check-up activities</b>			
1.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To explain basic principles of:               <ul style="list-style-type: none"> <li>• Blood pressure</li> <li>• Pulse</li> <li>• Blood sugar</li> <li>• Temperature</li> <li>• Respiration</li> </ul> </li> <li>• To report results correctly</li> </ul>	Lecture with schemes
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To use devices appropriately to measure:               <ul style="list-style-type: none"> <li>• Blood pressure</li> <li>• Pulse</li> <li>• Blood sugar</li> <li>• Temperature</li> <li>• Respiration</li> </ul> </li> <li>• To be aware of foreseen and unforeseen results</li> </ul>	Exercises

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.4 Assistance in health promotion and disease prevention</b>			
0.5 day	<b>Knowledge, skills and attitude</b>	<ul style="list-style-type: none"> <li>• To explain basic information on the concept of health promotion</li> <li>• To explain basic information about prevention of the most frequent noncommunicable diseases:                             <ul style="list-style-type: none"> <li>• Hypertension</li> <li>• Diabetes</li> <li>• Diseases of the circulatory system</li> </ul> </li> <li>• To be informed about the practical role of a HH in individual and community health promotion</li> </ul>	<ul style="list-style-type: none"> <li>• Lecture about health promotion:                             <ul style="list-style-type: none"> <li>• Healthy lifestyle</li> <li>• Nutrition</li> <li>• Movement</li> <li>• Psychosocial welfare</li> </ul> </li> <li>• Lecture about disease prevention:                             <ul style="list-style-type: none"> <li>• Reasons</li> <li>• Symptoms</li> <li>• Treatments</li> <li>• Prevention</li> </ul> </li> <li>• Discussion about the HH's role in health campaigns</li> </ul>
<b>7.5 Assuring a safe environment</b>			
0.5 day	<b>Knowledge</b>	To explain the risks causing the most frequent accidents in households: <ul style="list-style-type: none"> <li>• Darkness</li> <li>• Ladders, stairs</li> <li>• Carpets</li> <li>• Fire</li> <li>• Alcohol, medications</li> <li>• Dizziness, weakness</li> </ul>	Lecture with statistics
	<b>Skills</b>	To describe measures that minimize risks for accidents	Worksheet
	<b>Attitude</b>	To observe how a counsellor motivates a person to eliminate risks	Role play by the trainer or a professional counsellor

TIMEFRAME	TAXONOMY	OBJECTIVES AND CONTENTS FOR THE PARTICIPANT	SUGGESTED TRAINING METHOD
<b>7.6 First aid for the target group</b>			
1.5 days	<b>Knowledge and attitude</b>	To be informed about the most likely situations for elderly people to need first aid	Use the IFRC guidelines
	<b>Skills</b>	To carry out first aid measures appropriately in case of: <ul style="list-style-type: none"> <li>• Unconsciousness</li> <li>• Burning</li> </ul>	Demonstration and exercises, using the case study (section 4)
	<b>Attitude</b>	To minimize fear of giving first aid	Question and answers
<b>7.7 Accompanying during severe illness and in the process of loss, dying and bereavement</b>			
0.5 day	<b>Knowledge</b>	<ul style="list-style-type: none"> <li>• To be informed about palliative care and how it is perceived and implemented locally</li> <li>• To describe the phases of dying and grief: <ul style="list-style-type: none"> <li>• Ignoring</li> <li>• Dealing</li> <li>• Fighting</li> <li>• Depression</li> <li>• Accepting</li> </ul> </li> </ul>	Lecture with examples
	<b>Skills and attitude</b>	<ul style="list-style-type: none"> <li>• To cooperate with the care team in situations of severe illness</li> <li>• To search for an empathetic way of communication in different phases of grief</li> </ul>	<ul style="list-style-type: none"> <li>• Discussion with a palliative care expert nurse</li> <li>• Role play using the case study</li> </ul>

## 8. References and resources



# The Fundamental Principles of the International Red Cross and Red Crescent Movement

**Humanity** The International Red Cross and Red Crescent Movement, born of a desire to bring assistance without discrimination to the wounded on the battlefield, endeavours, in its international and national capacity, to prevent and alleviate human suffering wherever it may be found. Its purpose is to protect life and health and to ensure respect for the human being. It promotes mutual understanding, friendship, cooperation and lasting peace among all peoples.

**Impartiality** It makes no discrimination as to nationality, race, religious beliefs, class or political opinions. It endeavours to relieve the suffering of individuals, being guided solely by their needs, and to give priority to the most urgent cases of distress.

**Neutrality** In order to continue to enjoy the confidence of all, the Movement may not take sides in hostilities or engage at any time in controversies of a political, racial, religious or ideological nature.

**Independence** The Movement is independent. The National Societies, while auxiliaries in the humanitarian services of their governments and subject to the laws of their respective countries, must always maintain their autonomy so that they may be able at all times to act in accordance with the principles of the Movement.

**Voluntary service** It is a voluntary relief movement not prompted in any manner by desire for gain.

**Unity** There can be only one Red Cross or Red Crescent society in any one country. It must be open to all. It must carry on its humanitarian work throughout its territory.

**Universality** The International Red Cross and Red Crescent Movement, in which all societies have equal status and share equal responsibilities and duties in helping each other, is worldwide.