Assignment of ECVET Points to Relevant Qualifications

ICARE PROJECT

Improving Mobility and Career Paths for Personal Care and Social Workers

Lifelong Learning

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ECVET points are a numerical representation of the overall weight of learning outcomes and of the relative weight of units in relation to the qualification.

The I CARE project allocates:

- 120 ECVET points to those professions which require a one year long training → Care Operator, Socio-Assistance Assistant, and Dental Assistant
- 60 ECVET points to those professions which require a shorter training → Family Assistant, Baby Sitter.

ECVET points bring to light some problems about their real meaning.

1. *Is it possible to compare different professional profiles basing on ECVET points allocated to them?*

   NO. ECVET points are allocated to a profession depending only on the length of the training.

2. *Which criterion can be used to allocate EVET points to Units of Learning Outcomes?* There are two main criteria:
   a. **TIME** required to acquire the competences included in the Unit.
   b. **RELEVANCE** of the competences included in the Unit.

3. Do points represent the absolute value of a competence?
   NO. ECVET points cannot be considered as a representation of the absolute value of a competence. There is only one exception to this rule: the **competence levels**. Levels, in fact, mean to foster transition paths between Care Operator and Socio-Assistance Assistant profile, for this reason learning outcomes which are divided in two levels allow a comparison between the profiles sharing those levels.

In the I CARE matrices there are also **EVCET SUB-POINTS** allocated to each Learning Outcome**.** This tool had been created for two main reasons:

1. Some professions included in the I CARE project are quite complex. They imply many competences and attitudes because the profiles described have to work and relate with persons in a delicate and fragile situation
2. Learning Outcomes of the professions included in the project will be assessed in Italy and in foreign countries without a previous training period. Then it is essential to carefully assess the whole matrix.

FIRST METHOD for allocating ECVET points → We tried to assign firstly sub-points to each Learning Outcome and, secondly, to sum points in the Units of Learning Outcomes. Nevertheless this method was not feasible for two reasons:

1. Using this method makes really difficult to reach 120 or 60 points for the whole profession
2. With this method we obtained awkward values for Units of LO (for instance 28 points for a Unit). Units are the main element of ECVET systems, then it is useful to have multiple of five values.

SECOND METHOD → We firstly allocated ECVET points to Units of Learning Outcomes and then to single LO:

- **75%** of the total amount of points assigned to a profile was allocated to Units including **essential competences**
- **25%** of the total amount of points assigned to a profile was allocated to Units including **basic competences**.

Sub-points were allocated to Learning Outcomes according to their relevance in the Unit and according to the total number of LO included in each unit.

Introduction

The documents of the European Union concerning the elaboration of the ECVET framework suggests that each qualification and each learning unit should be provided with a 'score', namely with ECVET points.

What stands the score for, and which is the aim of ECVET points?
'ECVET points are a numerical representation of the overall weight of learning outcomes in a qualification and of the relative weight of units in relation to the qualification.'[1]

According to this definition, and through the analysis of methodological approaches followed by ECVET projects developed up to now, we found out that ECVET points are allocated to:
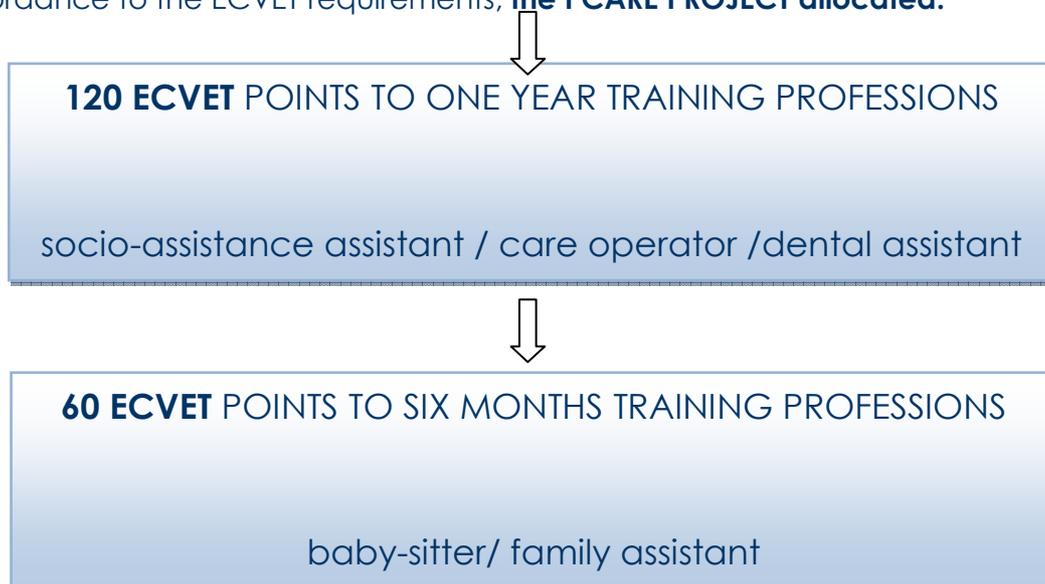
1. **A qualification**
   According the to European Union, ECVET points are allocated to a qualification basing on the following conversion: 60 points are allocated to the learning outcomes expected to be achieved in a year of formal training (obviously this definition gives a parameter that should be used also to value non-formal training). This means that, in a two-years training, a maximum of 120 ECVET points can be issued, 180 for a three-years training, etc.

2. **A Learning Unit**
   In order to determine the weight of a learning unit, its relevance for the qualification is taken into account. The relevance is then expressed in terms of percentage (the full qualification being 100%) and the percentage is rewritten according to the overall number of ECVET points for the qualification. For instance, a unit which is evaluated as quite important (30%) in a qualification of one-year training (60 ECVET points) will be provided with 18 ECVET points.

In accordance to the ECVET requirements, **the I CARE PROJECT allocated:**

120 ECVET POINTS TO ONE YEAR TRAINING PROFESSIONS

socio-assistance assistant / care operator /dental assistant

60 ECVET POINTS TO SIX MONTHS TRAINING PROFESSIONS

baby-sitter/ family assistant

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[1] Recommendation of the European Parliament and of the Council of 18 June 2009, Official Journal of the European Union 8.7.2009, C 155/14.

1. Deepening the Problem: ECVET Points Meaning

Before allocating points to units and professions, we must delve into the definition quoted above, answering to the following questions:

WHAT IS THE REAL MEANING OF ECVET POINTS?

1. *Is it possible to compare different professional profiles basing on ECVET points allocated to them?*
2. *Which criterion can be used to allocate EVET points to Units of Learning Outcomes?*
3. *Do points represent the absolute value of a competence, independently of the profession that comprises it?*

ANSWERS:

1. As we explained above, the **total amount of ECVET points allocated to a professional profile depends on the length of the training** required to have a formal qualification. Then ECVET points do not represent the objective value or complexity of a profession. For instance, in Italy the Care Operator profile is quite similar to the Socio-Assistance Assistant one, nevertheless the Care Operator has some skills, especially in health care, that are not required to a Socio-Assistance Assistant. However, the vocational trainings for the two profiles are both one year long (800 hours), thus the profiles received both 120 ECVET points. This means that ECVET points cannot be used to compare different professional profiles.

2. The amount of points allocated to a Unit of Learning Outcomes depends on two criteria:
   ⇨ the **TIME** required to acquire the competences included in the Unit
   ⇨ the **RELEVANCE** of the competences included in the Unit.

   Both criteria are crucial and it is really important to take into account not only the first but also the second one. In fact, it can happen that a Unit of Learning Outcomes is composed by many single LOs, then a long time is required to reach it even if the competences acquired are not essential for the profession. On the contrary, a different unit may be formed by few LOs, but these competences are the fundamental basis of the profile. Then the two units will have the same ECVET points assigned even thought they require a different time to be achieved.

3. **ECVET points cannot be considered as a representation of the absolute value of a competence**. The I CARE project does not mean to calculate the different weight of units and competences in relation to different qualifications, because it would be an extraordinarily time-consuming effort, and also because it could never be an absolute complete comparison. It is true that the elaboration of all the different weights that a competence can have in different qualifications could be very useful in order to foster worker's mobility from one job to another one which requires analogous competences, but it is also true that such an undertake could be partial in many cases. For instance, empathy and relation with the person are essential competences for both Baby Sitter and Family Assistant, but the way they relate with the person they work with is radically different, then it is meaningless to compare this competence in order to realise if empathy is more important in the first or in the second profession.

   N.B. THERE IS ONLY ONE EXCEPTION TO THIS RULE: COMPETENCE LEVELS!
   As we explained in the document '*The Vocational Qualifications Description in Relation to the ECVET Framework*', in the I CARE project two profiles (Socio-Assistance Assistant and Care Operator) share many different competences, in fact the Lombardy Region created transitional paths for those people who already have the

Socio-Assistance Assistant qualification and would re-qualify themselves attending some parts of the Care Operator training.

For this reason, four learning outcomes in the I CARE matrices are common between the two profiles. They are called **LEVEL 1** of the LO.

The same LO can also be developed in a higher degree. This second level of the competence is present only in the Care Operator profile as **LEVEL 2**.

Obviously the LEVEL 2 of a LO has a higher number of ECVET points then LEVEL 1.

> **ECVET points do not represent the objective value of a competence and cannot be compared between different professional profiles.**
> **Only LEARNING OUTCOME LEVELS shared by Socio-Assistance Assistant and Care Operator allow an objective comparison.**

2. ECVET Sub-Points

ECVET projects developed up to now generally allocated points to professions and units, but actually not all the projects used the same framework for the matrices. For instance, the matrices presented in VQTS II report, which includes the final results of a common effort made by 11 ECVET pilot projects, are not composed of Learning Outcomes or Unit of Learning Outcomes but of 'Competence Areas'.

Every projects has a different structure in relation to the specific features of the profiles considered.

Professional profiles examined by I CARE have two main features:

1. At least two of them (Care Operator and Socio-Assistance Assistant) have a quite complex structure. They imply many competences and attitudes because the profiles described have to work and relate with persons in a delicate and fragile situation

2. Competences of the professions included in the project will be assessed in Italy and in foreign countries without a previous training period. Then it is essential to carefully assess the whole matrix.

For these reasons in the I CARE matrices there are not only ECVET points allocated to Units of Learning Outcomes, but also **EVCET SUB-POINTS ALLOCATED TO EACH LEARNING OUTCOME.** This tool is fundamental in order to guarantee an accurate assessment of workers/learners.

2.1 "*Karl*" and the Competence Certification

Let clarify this problem with an example. Imagine that a Polish worker, we call him Karl, comes to Italy and wants to work as a Care Operator. He had analogous work experiences in his country and now wants to attend I CARE tests in order to certify his competences.

The Care Operator profile is composed of 5 Units of Learning Outcomes[2] and the profile has 120 points. Karl makes all the practical and theoretical tests, he is quite good in most of the competences, but he has a non-sufficient mark in three skills (he is not able to make beds, to use the automated external defibrillator and to change the stoma bag properly).

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2 See the matrix, p. 12.

What kind of certification will he obtain? He would probably gain 120 ECVET points, but with some notes that specify the skills he lacks.
This kind of certification is surely not clear and pointless.
On the contrary, by using ECVET sub-points, we could for instance allocate three points to each one of the three skills that Karl lacks. Then he could have a certification of 91 ECVET points, where the three skills he lacks are clearly specified.

3. Methodological Steps Used in Allocating ECVET Points

The concrete process of allocating ECVET points and sub-points have been developed through four steps:

3.1 Step 1 - Assignation of Points to Learning Outcomes

When we initially tried to allocate ECVET points, the first hypothesis was to assign firstly sub-points to each Learning Outcome and, secondly, to sum points in the Units of Learning Outcomes.

Adopting this method allowed us to allocate points to single Learning Outcomes according to their relevance in the Unit and in the whole profile.
If we could divide, for instance, Learning outcomes in **ESSENTIAL** → 5 sub-points; **IMPORTANT** → 3 sub-points; **BASIC** → 1 sub-point, every LO could have its specific value. Then, points due to each Unit could have been obtained by adding together all the sub-points.

Nevertheless, this method was not feasible for two reasons:
1. Using this method makes really difficult to reach 120 points for the whole profession. Some profiles are composed of 28 Learning Outcomes, so it is difficult to calculate the single value of a LO in relation to the whole profile
2. ECVET sub-points are a useful tool, but the main element in ECVET systems is the UNIT. By assigning firstly sub-points, we obtained awkward values for Units of LO (37 points or 13 points). Points are created to indicate a certain amount of training time, then if a worker has to attend a training period which corresponds to the learning unit he lacks, it is much more useful to assign a number of points multiple of five (15 or 30 or 20).

3.2 Step 2 - Correcting the First Approach: Assignation of Points to Units of Learning Outcomes

Once we realised that the first approach was not suitable for I CARE matrices, we decided to allocate firstly ECVET points to Units of Learning Outcomes. The criteria followed for assigning points are:
1. **75%** of the total amount of points assigned to the profession (60 or 120) had been allocated to those Units containing the **essential competences**, indispensable for practicing that profession
2. **25%** of the total amount of points assigned to the profession (60 or 120) had been allocated to those Units containing **basic competences**, included in the professional profile, but which can also be acquired in life experience, using common sense without a specific training
3. Each Unit received a **number of points multiple of five**.

3.3 Step 3 - Assignation of Sub-Points to Learning Outcomes

Starting from the points allocated to a Unit, sub-points have been assigned to single Learning Outcomes.

The main criteria used are:

1. The **relevance** of the Learning Outcome for the Unit and the profile. This criterion is the core one, because some learning outcomes may sound simple, being composed of few skills and knowledge, even if they are fundamental for the whole profile

2. The total **number of Learning Outcomes included in a Unit**. Obviously, we had to pay attention to how many LOs were comprised in each Unit because in a Unit of three LOs, each LO could receive a higher number of points than the one received by a LO included in a Unit of seven LOs.

3.4 Step 4 - Correction of Eventual Imbalances

It was not easy to balance criterion 1 and 2 in allocating sub-points. Sometimes it happened that important competences received a low number of points because they were included in a Unit composed of many LOs.
For this reason it had been necessary to reconsider the points allocated in order to correct eventual imbalances.

In the final point allocation there are still particular situations.
For instance, in the Care Operator profile the LO '*Using techniques to assist a patient in daily activities in order to satisfy the basic needs and according the type of client*' has 3 ECVET sub-points and the LO '*Informing the client about services*' has 3 sub-points as well.

The first LO is surely more essential then the second one, but this fact does not put at risk the global meaning of ECVET points allocation for two main reasons:

1. It is true that the two LOs have the same number of points even if they do not have the same relevance, but the main unit of measurement of an ECVET system is a Unit. The LO '*Informing the client about services*' is comprised in the Unit '*Carrying out the care operator role within the welfare network*', which has 10 ECVET points. The LO '*Using techniques to assist a patient in daily activities in order to satisfy the basic needs and according the type of client*' is comprised in the Unit '*Direct assistance to the patient*', which has 30 points. **Then we can conclude that the global equilibrium is respected**

2. The second reason that allows the point allocation proposed in the I CARE project is the principle we repeatedly mentioned above: **ECVET points do not represent the objective value of a competence and cannot be compared between different professional profiles.** The point allocation should help in establishing the training period necessary to complete the professional profile, but does not express the 'real weight' of a competence in different contexts.

4. I CARE MATRICES WITH ECVET POINTS ALLOCATED

The first column of the grid indicates the ECVET points allocated to each Unit of Learning Outcomes. The fourth column indicates the ECVET sub-points allocated to each Learning Outcome.

Care Operator (OSS) Matrix
Total ECVET Points: 120

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
25	*Carrying out the care operator role within the organisation structure and service and cooperate with the caring staff*	Working in team	7	• He/she knows team-working: dynamics, roles, functions • He/she knows structure and dynamics of the organization system in which he/she works.	• He/she can work in team • He/she can recognize and respect different roles • He/she can recognize the organisational context of services.
		Handling and understanding file, charts, and forms to record what is observed during the service	5	• He/She knows the main instruments and communication tools in different operative contexts and their use.	• He/She can cooperate to define procedures and protocols related to his/her tasks of caregiving, housekeeping and health-hygienic interventions • He/she can work according to his/her competencies and respecting the procedures and protocols defined by the working team
		Cooperating to verify the quality of the service	6	• He/she knows the main tools for quality monitoring and evaluation	• He/she can cooperate to define care projects and to verify their results • He/she can cooperate to verify the properness and quality of services
		Using common computer tools	1	• He/she knows basics of information technology	• He/she can carry out basic computer operations • He/she can use the software at a basic level under specific training

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
25	*Carrying out the care operator role within the organisation structure and service and cooperate with the caring staff*	Carrying out the working activities respecting privacy regulations	3	• He/she knows the regulations about communication/information.	• He/she can manage his/her activities confidentially and ethically • He/she can identify the ways of upgrade his/her knowledge through self-training and refresher courses.
		Cooperating for the realisation of training of support operators and for their evaluation	3		• He/she can recognize and apply safety at work regulations to protect his/her health and the patient's health • He/she can assist the student during the training period and transmit knowledge • He/she can give an evaluation of the student assisted in the training.
10	***Carrying out the care operator role within the welfare network***	Recognising services and their functions on the territory	3	• He/she knows the welfare network • He/she knows elements of social and health laws (national and regional)	• He/She can identify the organization of social and health services and the one of informal networks • He/she can involve informal networks, can relate to social, health, socio-sanitary, recreational, cultural structures on the territory (operate and cooperate)
		Informing the client about services	3	• He/She knows the welfare network • He/she knows elements of social and health laws (national and regional).	• He/she can carry out specific activities to counsel the client and the family about the services on the territory
		Supporting the client and the family to get access to services	4	• He/she knows the main social and health bureaucratic procedures	• He/she can accompany the patient to get access to services • He/she can handle simple bureaucratic procedures

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Indirect assistance through activities of housekeeping, hygiene and comfort of the environment*	Using techniques of domestic intervention	7	**LEVEL 1** • He/she knows elements of environmental hygiene at home and in facilities • He/she knows elements of home economics • He/she knows elements of dietetics and food hygiene	**LEVEL 1** • He/she can operate and cooperate with the patient and the family for the housekeeping and the maintenance of the living space • He/she can operate to maintain environmental hygiene • He/she can cooperate with the patient and the family for the hygiene and change of personal and bed linen, for purchases • He/she can operate and cooperate with the patient and the family in assisting during the preparation of meals, also following particular dietetic prescriptions
			2	**LEVEL 2** • He/she knows elements of personal hygiene • He/she knows elements of environmental hygiene in in structures and hospitals	**LEVEL 2** • He/she can apply techniques of environmental hygiene • He/she can carry out a correct body hygiene to the patient • He/she can carry out correct procedures of environmental hygiene in facilities and hospitals • He/she can carry out checks and verify the effectiveness of the practices of environmental hygiene
		Using techniques to ensure a patient's safety reducing at maximum risks	2	• He/She knows techniques to protect the living environment.	• He/She can identify living habits and risking/dangerous conditions for the patient.

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Indirect assistance through activities of housekeeping, hygiene and comfort of the environment*	Using techniques of environment sanification	7	**LEVEL 1** • He/she knows elements of environmental hygiene and prophylaxis • He/she knows elements of domestic hygiene • He/she knows how to use hygienic, sanification and sanitization products	**LEVEL 1** • He/she can handle procedures for the sanification and sanitization of the environment • He/she can clean and cleanse the environment • He/she can carry out checks and verify the effectiveness of the practices of environment sanification and sanitisation
			3	**LEVEL 2** • He/she knows elements of environmental hygiene in facilities and hospitals • He/she knows modalities of using sterilisation products	**LEVEL 2** • He/she can carry out all the steps of cleaning, cleansing, disinfection and prepare the material to be sterilized and its storage • He/she can carry out all the operations to prepare a sterile field
		Using techniques of hotel intervention	3	• He/she knows elements of environmental hygiene and prophylaxis • He/she knows elements of food hygiene	• He/she can prepare the environment for meals and cooperate to food distribution • He/she can supply and change linen, can transport and dispose dirty or infected linen
		Using techniques to make beds	5	• He/she knows different types of bed	• He/she can make beds (free or occupied beds, stretchers, cradles)

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Indirect assistance through activities of housekeeping, hygiene and comfort of the environment*	Applying techniques to organise, use and eliminate materials	**6**	• He/she knows ways of disposing materials	• He/she can use material resources respecting the cost-effectiveness criteria • He/she can guarantee adequate supplies, can promptly inform about damages occurred, can express opinions about the effectiveness of the use of resources • He/she can handle the preparation of materials to be eliminated/recycled • He/she can guarantee the collection and storage of different types of waste according to established protocols in relation to the operational context

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance to the patient*	Using techniques to assist a patient in daily activities in order to satisfy the basic needs and according the type of client	3	• He/she knows the basics of caregiving • He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology • He/she knows psycho-relational aspects and caring interventions according to the person.	• He/she can involve the patient, the family and other figures as resources in the care within the living context • He/she can identify the different stages of drawing up a project of personal assistance • He/she can recognise, in different contexts, the proper relationship dynamics in order to relate with a suffering patient • He/she can recognise environmental situations and a patient's conditions for which it is necessary to apply different technical competences • He/she can identify, through observation, the most common symptoms and signs which indicate variations in a patient's clinical conditions (pallor, sweating, agitation and confusion), risking situations (reddening of skin, total or partial refusal of food, self-harm behaviours, harmful behaviours) to inform the professional operators • He/she can recognize the ways of collecting, reporting and communicating general and specific problems of a patient • He/she can recognize the conditions of risk and the most common syndromes due to prolonged bed rest and immobilization • He/she can make simple interventions regarding health education for patients and their families

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance to the patient*	Assisting a patient in his/her physiological functions	6	**LEVEL 1** • He/she knows the basics of caregiving • He/she has a basic knowledge of elements of caregiving (feeding, movement, hygiene) • He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology	**LEVEL 1** • He/she can handle the hygienic care of the patient (partial and total), the change of clothing and of absorbing surfaces • He/she can cut nails of hands and feet • He/she can help the patient have meals according to dietetic indications and report any discrepancies • He/she can help the patient for natural output of feces and urine • He/she can monitor the collection bag of urine output • He/she can help the patient to get proper temperature control and right positioning for proper breathing and blood circulation
			2	**LEVEL 2** • He/she has a deep knowledge of caregiving (feeding, movement, hygiene)	**LEVEL 2** • He/she can carry out the change of the stoma bag (definitive or temporary) • He/she can change the urine collecting bag
		Assisting a patient in ambulating	4	• He/she knows elements of mobilization • He/she knows elements of basic caregiving (movement)	• He/she can help the patient walk and change postures • He/she can apply procedures to make the patient learn and maintain correct postures and the positioning and mobilization of a non self-sufficient person

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance to the patient*	Assisting a patient to use correctly devices, aids and equipment	3	• He/she knows the functioning of devices, aids and prosthesis	• He/she can operate to support a non self-sufficient person in his/her daily life activities also using aids and devices under indication of health operators
		Assisting a patient in activities aimed at maintaining the residual psycho-physical capabilities, re-education and functional recovery	3	• He/she knows the basics of diagnostics, therapy and rehabilitation	• He/she can carry on activities aimed at the reactivation of the functionalities defined in the person's care plan • He/she can carry on the entertainment activities that promote socialization, recovery and maintenance of manual and cognitive skills, as per the person's care project
		Using techniques to assist a patient with medical and therapeutic prescriptions	4	**LEVEL 1** • He/she knows elements of pharmacology (ways of administration, elimination, storage only as far as it is required by the involved skills)	**LEVEL 1** • He/she can cooperate to ensure the correct taking of drugs according to medical prescriptions

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance to the patient*		4	**LEVEL 2** • He/she knows the basics of diagnostics, therapy and rehabilitation • He/she knows elements of physiological anatomy, physical, psychic and sensorial applied pathology	**LEVEL 2** • He/she can cooperate in the diagnostic activity only as regards the collection of biological material samples, which are excreted naturally • He/she can transport biological, sanitary, supplying materials according to established protocols and withdraw reports • He/she can cooperate in therapeutic activities also using simple medical devices, administrating medicines enterally or by aerosol, giving eye or ear drops, putting ointments or transdermal preparations, changing simple wound dressings • He/she can cooperate during first aid operations and call professional health operators • He/she can cooperate in monitoring the infusion therapy, notifying particular signs of pouring off indicating that the bottles need to be transferred or replaced
		Using techniques to observe signs and symptoms of variations of a patient's physical conditions and the rising of situations of risk	3	• He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology	• He/she can properly observe a patient's health condition • He/she can identify and report risking situations • He/she can verify the vital parameters and use the reflectometer to get glycaemia levels

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance to the patient*	Using techniques to take care of corpse	1	• He/she knows techniques and procedures to take care of the corpse.	• He/she can apply techniques for the hygiene of the corpse • He/she can take care of the corpse and carry out the transport.
		Using devices for BLSD	2	• He/she knows the criteria to assess the state of consciousness • He/she knows the patient positioning techniques	• He/she can correctly apply techniques of mouth-to-mouth breathing or mouth-to-mask breathing • He/she can use the automated external defibrillator (EAD) • He/she can perform the external cardiac massage (ECM).
15	*Communicating and relating with the patient and the household together with the caring staff*	Managing the relationship with a patient	4	• He/she knows strategies and techniques of a relationship with a patient	• He/she can support the patient with empathy • He/she can handle conflicts within the assigned tasks • He/she can recognise the relationship dynamics according to the characteristics of the person
		Respecting the individual's self-determination	2	• He/she knows strategies and techniques of a relationship with a patient	• He/she can recognize the general conditions of the patient (psycho-physical, social) • He/she can recognize the persons who are important to the patient • He/she can foster the patient's autonomy

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
15	*Communicating and relating with the patient and the household together with the caring staff*	Applying techniques of welcoming, presenting and informing about role and service	2	• He/she knows theories and techniques of verbal and non-verbal communication	• He/she can welcome the patient and his family, can counsel and foster their access to services, can promptly inform about services and resources • He/she can ask for and organize events of socialization, providing support for the participation in cultural and recreational activities at home or on the territory
		Using techniques to involve a patient and his/her family in realizing the assistance service in daily life context	7	• He/she knows theories and techniques of verbal and non-verbal communication • He/she knows techniques to communicate properly with different types of clients	• He/she can relate with patients and family, communicating empathically in all activities of daily living assistance, can reply thoroughly involving and stimulating the dialogue acting diplomatically • He/she can operate using communication methods according to different cultural contexts, to different situations of care and in case of decrease of the patient's communication skills (aphasia, hearing loss, cognitive deficits, altered sensorium)

Socio-Assistance Assistant (ASA) Matrix
Total ECVET Points: 120

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
25	*Carrying out the assistance operator role within the organisation structure and service co-operating with the caring staff*	Carrying out the assistance operator role within different operative contexts	3	• He/she knows structure and dynamics of the organization system in which he/she works • He/she knows the main aspects of professional ethics • He/she knows his/her role and relational implications	• He/she can prefigure the expectations of his/her own role • He/she can act according to the assigned tasks • He/she can relate with the clients and the organization respecting roles and functions • He/she can apply and recognize the basics of professional ethics
		Working in team	6	• He/she knows team-working: dynamics, roles, functions	• He/she can work in team.
		Handling and understanding file, charts, and forms to record what is observed during the service	4	• He/she knows the main instruments and communication tools in different operative contexts and their use • He/she knows the way of working in socio-sanitary field (drawing up of intervention projects, planning tools)	• He/she can cooperate to define procedures and protocols related to his/her tasks • He/she can work according to his/her competencies and respecting the procedures and protocols defined
		Cooperating to verify the Individual Assistance Plan	2	• He/she knows the way of working in socio-sanitary field (drawing up of intervention projects, planning tools)	• He/she can cooperate to define care projects and to verify their results

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
25	*Carrying out the assistance operator role within the organisation structure and service co-operating with the caring staff*	Cooperating to verify the quality of the service	4	• He/she knows the main tools for quality monitoring and evaluation	• He/she can give information to verify care projects and their results • He/she can identify his/her needs of training regarding his/her professional profile and tasks in a propositive way
		Using common computer tools	1	• He/she knows basic software (spread sheets, word-processing, e-mail, Internet)	• He/she can carry out basic computer operations • He/she can use the main functions of Windows • He/she can use the software at a basic level under specific training
		Carrying out the working activities respecting privacy regulations	1	• He/she knows the main aspects of professional ethics • He/she knows privacy regulations	• He/She can manage his/her activities confidentially and ethically, respecting relative regulations.
		Carrying out the working activities respecting safety regulations	4	• He/she knows safety regulations;	• He/she can identify the environmental situations of risk for his/her health and for the patient's health • He/she can use devices and aids necessary to properly protect his/her health and the patient's health

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
10	*Carrying out the assistance operator role within the welfare network*	Knowing the organizational, institutional and informal contexts of sanitary network	4	• He/she knows the welfare network.	• He/she can identify the appropriate references according to the situation and can interact with them • He/she can involve informal networks, can relate to social, health, socio-sanitary, recreational, cultural structures on the territory
		Informing the assisted person about available services	3	• He/she knows the welfare network	• He/she can carry out specific activities to counsel the patient, the family and other caregivers about the services on the territory
		Supporting the patient, the family and other people who work as assistants to get access to services	3	• He/she knows the main procedures for sanitary and social bureaucratic practices	• He/she can accompany the patient to get access to services • He/she can handle simple bureaucratic procedures related to services
35	*Direct assistance: help in domestic activities, hygiene and comfort of the home environment*	Using techniques of domestic intervention	7	**LEVEL 1** • He/she knows elements of environmental hygiene at home and in facilities • He/she knows elements of home economics • He/she knows elements of dietetics and food hygiene	**LEVEL 1** • He/she can operate and cooperate with the patient and the family for the housekeeping and the maintenance of the living space • He/she can operate to maintain environmental hygiene • He/she can cooperate with the patient and the family for the hygiene and change of personal and bed linen, for purchases • He/she can operate and cooperate with the patient and the family in assisting during the preparation of meals, also following particular dietetic prescriptions

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance: help in domestic activities, hygiene and comfort of the home environment*	Managing emergencies	7	• He/she knows safety and protection general rules.	• He/she can identify situations of risk to the safety of the person • He/she can react promptly to reduce the risk • He/she can enable the involvement of professional actors
		Using techniques of environment sanification	7	**LEVEL 1** • He/she knows elements of environmental hygiene and prophylaxis • He/she knows elements of domestic hygiene • He/she knows how to use hygienic, sanification and sanitization products	**LEVEL 1** • He/she can clean and cleanse the environment • He/she can handle procedures for the sanification and sanitization of the environment • He/she can carry out checks and verify the effectiveness of the practices of environment sanification and sanitisation
		Using techniques of hotel intervention	5	• He/she knows elements of home economics • He/she knows elements of food hygiene	• He/she can prepare the environment for meals and cooperate to food distribution • He/she can supply and change linen
		Using techniques to prepare beds and to tidy up the living space	5	• He/she knows the different types of bed	• He/she can make beds and tidy up the home environment

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Direct assistance: help in domestic activities, hygiene and comfort of the home environment*	Applying techniques to organise, use and eliminate material	**4**	• He/she knows how to eliminate materials	• He/she can cooperate in using material resources respecting the cost-effectiveness criteria • He/she can guarantee adequate supplies, can promptly inform about damages occurred, can express opinions about the effectiveness of the use of resources • He/she can handle the preparation of material to be eliminated/recycled • He/she can guarantee the collection and storage of different types of waste according to established protocols in relation to the operational context

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Patient direct assistance*	Using techniques to assist a patient in daily activities according to needs and type of client	6	• He/she knows the basics of caregiving • He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology • He/she knows psycho-relational aspects and caring interventions according to the person	• He/she can involve the patient, the family and other figures in the care within the living context • He/she can identify the different stages of drawing up a project of personal assistance • He/she can recognise the relationship dynamics according to the characteristics of the person • He/she can observe the patient and the environment • He/she can recognise the key signs/symptoms of discomfort • He/she can recognise the conditions of risk and the most common syndromes due to prolonged bed rest and immobilisation • He/she can report data to professional operators • He/she can make simple interventions regarding health education for patients and their families • He/she can handle errands and bureaucratic procedures

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Patient direct assistance*	Using techniques to assist a patient in his/her physiological functions	6	**LEVEL 1** • He/she knows the basics of caregiving • He/she has a basic knowledge of elements of caregiving (feeding, movement, hygiene) • He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology	**LEVEL 1** • He/she can handle the hygienic care of the patient (partial and total), the change of clothing and of absorbing surfaces • He/she can cut nails of hands and feet • He/she can help the patient have meals according to dietetic indications and report any discrepancies • He/she can help the patient for natural output of feces and urine • He/she can monitor the collection bag of urine output • He/she can help the patient to get proper temperature control and right positioning for proper breathing and blood circulation
		Using techniques to assist a patient in ambulating and in finding right positioning	6	• He/she knows elements of diagnostics, therapy and rehabilitation • He/she knows elements of rehabilitation and mobilization	• He/she can cooperate to help the patient walk and change postures • He/she can apply procedures to make the patient learn and maintain correct postures and the positioning and mobilization of non-self-sufficient persons
		Applying techniques to assist a patient with devices, aids, equipment	5	• He/She knows the functioning of aids, devices, prosthesis	• He/She can cooperate to support the non self-sufficient person in his/her daily life activities also using aids and devices under indication of health operators

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Patient direct assistance*	Using techniques to assist a patient with medical and therapeutic prescriptions	4	**LEVEL 1** • He/she knows elements of pharmacology (natural ways of taking drugs, storage conditions)	**LEVEL 1** • He/she can cooperate to ensure the correct taking of drugs according to medical prescriptions
		Using techniques to assist a patient with the activities aiming to maintain the residual psychological and physical capabilities, rehabilitation and functional recovery	6	• He/she knows elements of rehabilitation	• He/she can cooperate to carry on activities aimed at the reactivation of the functionalities defined in the person's care plan • He/she can cooperate to carry on the entertainment activities that promote socialization, recovery and maintenance of manual and cognitive skills, as per the person's care project • He/she can cooperate to carry out friction and direct massage to prevent pressure sores
		Cooperating in taking care of corpse, in absence of professional operators	2	• He/she knows elements of physiological anatomy, physical, psychic and sensorial pathology	• He/she can apply techniques for the hygiene of the corpse • He/she can take care of the corpse and manage the transfer of the corpse

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
15	*Communicating and relating with patient, family and caring staff*	Managing the relationship with a patient	3	• He/she knows theories and techniques of verbal and non-verbal communication • He/she knows strategies and techniques in the relation with a patient.	• He/she can support the patient with empathy • He/she can handle conflicts within the assigned tasks • He/she can recognize the relationship dynamics according to the characteristics of the person.
		Respecting the individual's self-determination	3	• He/she knows elements of human psychology in different periods of life and in case of disability	• He/she can recognize the general conditions of the patient (psycho-physical, social) • He/she can recognize the persons who are important to the patient • He/she can foster the patient's autonomy
		Applying techniques of welcoming, presenting and informing about role and service	2	• He/she knows theories and techniques of verbal and non-verbal communication	• He/she can welcome the patient and his family, can counsel and foster their access to services • He/she can organize and take part in events of socialization and entertainment, providing support for the participation in cultural and recreational activities at home or on the territory

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
15	*Communicating and relating with patient, family and caring staff*	Using techniques to involve the patient and his/her family in realizing the assistance service in daily life context	**7**	• He/she knows theories and techniques of verbal and non-verbal communication • He/she knows techniques to communicate properly with different types of clients	• He/she can relate with patients and family, communicating empathically in all activities of daily living assistance, can reply thoroughly involving and stimulating the dialogue • He/she can observe and identify potentially critical situations • He/she can relate with the patient and with the family assistant to set a climate of collaboration with respect to the established interventions • He/she can observe and report signs of difficulty • He/she can advise the caregiver about the best ways to carry out interventions to support daily life • He/she can operate using communication methods according to different cultural contexts, to different situations of care and in case of decrease of the patient's communication skills (aphasia, hearing loss, cognitive deficits, altered sensorium)

Dental Assistant Matrix
Total ECVET Points: 120

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
20	*Communicating with patients: from welcoming to dental operation*	Welcoming patients	7	• He/she knows techniques of active listening • He/she knows different ways of approaching according to patients (elderlies, children, disabled people) • He/she knows the practices for health and dental hygiene • He/she knows chair positioning	• He/she can welcome patients • He/she can adjust the chair for maximum patient comfort • He/she can advise the patient adopting a healthy lifestyle and proper dental hygiene practices
		Assisting the dentist during the dental procedures	13	• He/she knows type of procedure • He/she knows ways of relating with patients during the procedure • He/she knows equipment	• He/she can use working tools properly • He/she can manage relations with patients • He/she can follow the dentist's indications correctly
35	*Administrative organization of the office*	Handling appointment booking	11	• He/she knows software	• He/she can read patients charts • He/she can find right times for the procedure required • He/she can use computers
		Controlling and updating patients files	8	• He/she knows how to organize archives (also using computers) • He/she knows privacy regulations	• He/she can operate carefully (also as far as administrative matters are concerned) • He/she can manage his/her activity confidentially and ethically, respecting relative regulations

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Administrative organization of the office*	Keeping contacts with suppliers and external co-operators	8	• He/she knows materials, their handling and storage • He/she knows tools, instruments and how to use them	• He/she can relate with people • He/she can handle an order • He/she can organise the planning for co-operations • He/she can pick out technical problems of the equipment
		Handling daily administrative activities (also using information technology)	8	• He/she knows types of instruments • He/she knows administrative techniques • He/she knows ways of filing the main documents in a dental surgery	• He/she can use common office equipment (fax, personal computer, …).
65	***Assistance to the dentist: preparation and implementation of the operation, tidying up of the area and of the tools used***	Preparing the area of dental operations	21	• He/she knows types of instruments and materials • He/she knows types of dental procedures • He/she knows patient medical situation • He/she knows type of assistance • He/she knows elements of hygiene and safety	• He/she can prepare the right tools according to dental treatments • He/she can organize one's workplace and the dentist's office • He/she can keep the rooms under safety and hygiene conditions according to the relevant regulations
		Handling, preparing and storing dental materials	21	• He/she knows dental materials • He/she knows tools	• He/she can prepare the right materials according to dental treatments • He/she can use instruments properly

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
65	*Assistance to the dentist: preparation and implementation of the operation, tidying up of the area and of the tools used*	Tidying, cleaning, disinfecting, sterilizing and preparing tools, equipment and working environment	**23**	• He/she knows main health and hygiene conditions required according to used instruments • He/she knows disinfection and sterilisation techniques • He/she knows elements of hygiene	• He/she can Operate under safety and hygiene conditions • He/she can verify health and hygiene conditions (in conformity with regulations) • He/she can use sterilization supplies • He/she knows techniques of tools disinfection • He/she knows correct use of disinfection products

Family Assistant/Caregiver Matrix
Total ECVET Points: 60

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
5	***Carrying out the family assistant role within the living context of the assisted person***	Placing oneself in organizational, social and institutional contexts	**2**	• He/she knows workers' rights and duties and relative social institutions • He/she knows the main bureaucratic, social and sanitary procedures (requiring of health vouchers) • He/she knows the main local socio-sanitary services and ways of access (to health-care homes and day-care centres) • He/she knows responsibilities of the family assistant.	• He/she can relate with local services (doctor, municipal offices and their functions) • He/she can manage into the relative labour market (cooperatives, trade unions, social security institutions) • He/she can make purchases and run errands • He/she can exercise his/her rights and duties at work • He/she can organize his/her own work
		Cooperating with cooking and housekeeping	**3**	• He/she knows elements of environmental hygiene • He/she knows safety and prevention procedures at home • He/she knows products, tools and techniques for environment cleaning and hygiene • He/she knows elements of cooking and dietetics • He/she knows the main recipes and menus of Italian cooking	• He/she can apply house cleaning techniques • He/she apply laundry hygienisation techniques • He/she can handle clothes and wardrobe • He/she can make bed • He/she can make home spaces functional respecting the person's needs • He/she can apply safety procedures in the home • He/she can organize his/her own working activities • He/she can apply methods of cooking and food conservation, respecting the person's habits

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
20	*Direct physical and psychological support to the assisted person*	Taking care of the non-self sufficient person, recognizing needs and conditions	15	• He/she knows psycho-physical characteristics of individuals with different levels of self-sufficiency • He/she knows elements of dietetics and diet therapy • He/she knows techniques to handle and stimulate residual capabilities • He/she knows techniques of personal hygiene • He/she knows local cultural/leisure services and ways of access • He/she knows techniques and equipment to transfer the patient on mobility chairs and risks in case of wrong procedures • He/she knows techniques for right postures and positioning of the patient	• He/she can apply first aid techniques, waiting for professional people • He/she can apply techniques to facilitate the patient's • He/she can apply techniques to facilitate the person's dressing up • He/she can apply techniques to help the person eat • He/she can apply techniques to help the person with bathing and grooming • He/she can apply techniques to help the person with personal hygiene • He/she can apply procedures to take prescribed medications properly
		Relating and communicating with the person, his/her household and the caring staff	5	• He/she knows ethical aspects of care and assistance • He/she knows elements of sanitary organization • He/she knows elements of psychology (strategies • to manage relation with a patient, techniques of communication (verbal and non-verbal) • He/she knows communication techniques (specific for ALS patient)	• He/she can apply techniques to facilitate social integration • He/she can manage relations with the family • He/she can encourage the family network being involved to the improvement of the patient's welfare • He/she can handle emotions (stress • He/she can correctly communicate with health operators in case of emergency • He/she can use different communication modalities • He/she can understand the person's and the family's requests • He/she can work with discretion, respecting the rights and needs of people in fragile conditions.

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Taking care of non-self-efficient people (at different levels)*	Taking care of a person affected by Alzheimer's disease and senile dementia	18	• He/she knows ethical aspects and laws related to the assistance to patients affected by Alzheimer's disease • He/she basically knows the illness and its evolution • He/she knows the specific techniques related to Alzheimer's disease: elements of personal hygiene, food education, dietetics and diet therapy, safety rules, handling of residual capabilities, communication and social and educational assistance	• He/she can apply correct ways of managing daily life • He/she can apply simple techniques of cognitive stimulation • He/she can apply techniques to assist patients with food and fluid in taking • He/she can apply techniques to manage serious behaviour problems • He/she can apply techniques to better the home space and safety • He/she can apply communication and relation techniques with an Alzheimer's patient and an elderly person affected by senile dementia • He/she can identify physical and psychological needs and problems as well as assistance and health problems • He/she can recognise signs and symptoms of illnesses typical of elderly age and of Alzheimer's disease at different stages

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
35	*Taking care of non-self-efficient people (at different levels)*	Taking care of a person affected by ALS disease	**17**	• He/she knows legislative and ethical aspects of the work with ALS patients • He/she knows techniques to check parameters (temperature, pressure, oximetry) • He/she has a basic knowledge of the illness and its evolution • He/she knows elements of personal hygiene • He/she knows how to transfer patients to mobility chair and bed positioning • He/she knows how to prevent and care skin lesions • He/she knows regulations about sanitary and ordinary assistance and responsibilities of the assistant • He/she knows specific communication techniques with ALS patients • He/she knows how to use aids	• He/she can apply personal hygiene techniques • He/she can applying mobility techniques and right positioning in bed • He/she can apply techniques to support the patient in his physical needs • He/she can apply techniques to help the person eat • He/she can apply techniques to help the person communicate • He/she can manage emergencies waiting for professional healthcare operators • He/she can use technological devices to manage the patient at home and control the environment • He/she can valuate useful and necessary aids • He/she can watch over patients • He/she can operate respecting the profile's duties and responsibilities

Baby Sitter Matrix
Total ECVET Points:60

ECVET Points	Unit of Learning Outcomes	Learning Outcome	ECVET Sub-Points	Knowledge	Skills/Attitude
15	*Organisation of the environment: spaces and needs*	Keeping the house tidy and cosy and equipping the rooms considering children's needs	15	• He/she knows elements of environmental hygiene • He/she Knows safety and prevention at home	• He/she can apply modalities of organising places for children • He/she apply safety procedures in places for children • He/she apply rooms cleaning techniques • He/she can apply techniques to take care of toys
45	*Childcare*	Taking care of the children aged 0-3 years and promoting their socializing	45	• He/she knows elements of social and educational assistance, with reference to private services standards • He/she knows elements of personal hygiene • He/she knows elements of paediatric first aid • He/she knows elements of child psychology • He/she knows elements of paediatric nursing	• He/she can apply welcoming techniques with children aged 0-3 years • He/she can apply techniques for playing activities with children aged 0-3 years with empathy and patience • He/she can apply techniques to prepare food • He/she can apply first aid techniques • He/she can apply supporting techniques to serve meals to children aged 0-3 years with patience • He/she can apply techniques for hygiene and care of children aged 0-3 years