

# ERASMUS PLUS 2015

## SECTOR SKILLS ALLIANCES

AGREEMENT No. 2015 – 3212 / 001 – 001

PROJECT No. 562634-EPP-1-2015-IT-EPPKA2-SSA



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**Deliverable Number:** D 4.6

**Title of Deliverable:** Report on Finnish pilot implementation – Presence training course

**WP related to the Deliverable:** 4

**Dissemination Level: (PU/PP/RE/CO)\*:** PU

**Nature of the Deliverable: (R/P/D/O)\*\*:** R

**Actual Date of Delivery to the CEC:** 31.3.2018

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**PARTNER responsible for the Deliverable:** Omnia

**WP starting month:** M20

**WP ending month:** M28

**Partner Contributor(s):** Omnia

**Partner Reviewer(s):** UVa-Eval, SI4LIFE

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Funded by the  
Erasmus+ Programme  
of the European Union



**\*Dissemination Level:**

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**\*\*Nature of Deliverables:**

R=Report

P=Prototype

D=Demonstrator

O=Other

## 1 ABSTRACT:

The main aim of the task 4.6 was the implementation of the Finnish pilot. National pilot in Finland was designed in T 3.4 and it was planned to include formal, non-formal and informal learning. Flexibility, optionality, individual learning and qualification pathways and validation of learning outcomes form the corner stones of the Finnish vocational qualification system. These principles are very same with the ECVET principles. All the “ECVET principles for flexible learning pathways” are in use in Finland. Practical nurses are social- and health care professionals with a protected occupational title in Finland. They have vocational upper secondary education and training (EQF 4). In Finnish pilot National Moodle activities, Transversal e-learning activities and VCP (Virtual Community of Practice) were assessed separately by each learning task. Assessment scale was pass/fail in all learning tasks. Adult students had also change to study e-learning materials informal way in their own time and without teacher provided assessment. After students had completed theory studies, they had a change for skills demonstration in actual work environment in the end of the 5 weeks period of practical training. The pilot course has been tested with 3 groups of students which started the activities in August 2017, November 2017 and February 2018. Test- group 1 managed by Sanna Hosio and Nina Kauppinen, involving 20 young and 1 adult students; Test- group 2 managed by Asta Kaitila and Jenni Nurmisto, involving 20 adult students. Test-group 3 managed by Jenni Nurmisto and Sanna Hosio, involving 16 young students. The pilot courses were planned to be optional for students and should studied mostly individually. Pilot teachers respected students by standing behind the course information they gave to the students in the beginning of the course. They didn't insert any extra materials or activities to the course against common agreement. Classroom teaching was formal learning in Finnish pilot. E-learning was formal and/or informal learning. VCP was informal and non-formal learning. Practical training instead was mostly informal and non-formal learning but formal when teacher was present at workplace. Many students achieved expected learning outcomes during the pilot. Pilot evaluation was various including official evaluation provided by Uva-Eval and informal and internal evaluation by Finnish partners and AGE Platform. According to informal evaluation, National materials were seen very beneficial for practical nurse studies and for working life. Transversal materials divided opinions and VCP was seen neutral way, but Moodle platform serves same functions already.

## 2 KEYWORDS:

Finnish VET, ECVET, VET reform, Flexible pathways, Practical nurse requirements, Finnish pilot implementation, National materials, Transversal materials, VCP, Formal learning, Non-formal learning, Informal learning, E-learning, Classroom learning, Practical training, Lifelong learning

### 3 LIST OF BENEFICIARIES (PP-RE)/PARTICIPANTS (PU-CO)\*\*\*

Ben. No.	Beneficiary Name	Short Name	Country
1	Si4Life – Scienza e Impresa Insieme per Migliorare la Qualità della Vita s.c.r.l.	Si4Life	Italy
2	Regione Liguria	Liguria Region	Italy
3	Ggallery s.r.l.	GGallery	Italy
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7	Finnish National Board of Education	FNBE	Finland
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15	United Kingdom Homecare Association	UKHCA	UK
16	Nestor Primecare Services Ltd – Allied Healthcare	Allied Healthcare	UK

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In case of dissemination level PU or CO please indicate all the partners involved in this Deliverable.

In case of dissemination level PP please indicate the names of the other subject to whom the deliverable is devoted

In case of dissemination level RE please indicate the restricted group of partners.

### 4 VERSION HISTORY and AUTHORS

VERSION	PRIMARY AUTHOR	VERSION DESCRIPTION	DATE COMPLETED
1	Jenni Nurmisto	Draft 1	9.1.2018

2	Jenni Nurmisto	Draft 2 by feedbacks from Si4Life	2/2018
3	Jenni Nurmisto	Draft 3 by feedbacks from Uva-Eval & Finnish partners	29.3.2018

SECTION	AUTHORS	PARTNER TYPE	NAME OF PARTNER

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## 6 INTRODUCTION TO FINNISH PILOT

### 6.1 Background

The main aim of the task 4.6 was the implementation of the Finnish pilot. National pilot in Finland was designed in T 3.4. Pilot was planned to include formal, non-formal and informal learning. In Finnish pilot formal learning refers to participation in education provided by the regular education system with the aim to complete a qualification. Non-formal learning refers to participation in course-form, other than education and training leading to a qualification according to the regular education system, for example in-service training arranged and sponsored by the employer, hobby and languages courses at adult education centres, vocational further education courses, driving school, dance school, etc. Informal learning is activity practised for the purpose of learning, which is less organised and structured than other education. It is not the responsibility of any organisation. It has no student-teacher arrangement, timetables or entrance requirements. It can take place almost anywhere irrespective of place; among family or friends, at workplace or in everyday life. Informal learning can be self steered or take place under the guidance of family or some other social context. (Deliverable 3.4.2 2017, <file:///C:/Users/jnurmist/AppData/Local/Temp/3.4.2.pdf>)

In Finnish pilot formal learning was planned to pursued through presence and distance learning (classroom and e-learning). Non formal and informal learning was planned to fostered through the involvement of HCCPs in Virtual Communities of Practice. As part of the formal learning paths, specific transversal e-learning modules was designed and implemented in WP4 through an e-learning platform (developed in T4.1), based on Multimedia Open Contents and learning activities (designed in T3.5 and developed in T4.2) supported by an online tutor. (Deliverable 3.4.2 2017.)

The e-learning modules were delivered through the activities of T4.3. E-learning modules were: Module 1 – "Welfare technology and ICTs for remote health monitoring and rehabilitation", Module 2 – "Team working, multi-sectoral and multi-professional approach to older adults' needs ", Module 3 - "Holistic and rehabilitation approach: frailty, multi-morbidity, multi-professional approach to older adults needs". (Delierable 3.4.1 2017, <file:///C:/Users/jnurmist/AppData/Local/Temp/3.4.1.pdf>)

While developing the national pilot, the learning objectives, methods and materials were designed in team work of qualified teachers and using guidelines in deliverable 3.4.1. They were also developed taking in consideration of regulations of practical nurses national professional qualification requirements and national curricula. (Deliverable 3.4.2 2017.)

In Finnish pilot design process it has been taken in to account that studies included in pilot are part of practical nurse vocational qualification, which is regulated by Finnish National Agency for Education. Also curricula in Omnia Vocational College has affected in designing process. All the teachers involved in designing process were very experienced in teaching practical nurse students and well aware of professional qualification requirements for practical nurse. Teachers also had regular contacts to practical nurses working in home health care practice, so demands of profession were taken in consideration too. The Finnish Union of Practical Nurses Super was also involved in discussion regarding the pilot design. Teachers involved in designing the pilot had already wide experience in different learning methods and activities, they had also previous experience in designing curricula's and learning materials. The EU framework <https://caress.gsic.uva.es/index.php> provided by Caress project was used to clarify the skill gaps of practical nurse and national challenges of home health care in Finland. (Deliverable 3.4.2 2017.)

To design Finnish CARESS pilot, skill gaps were found from the questionnaires of the HHCPs (n=433) in Home care and the interviews (n =9) of elderly home care clients. Based on the Finnish HHCPs` skill gaps the learning outcomes that are defined on the Framework (<http://glueps-dev.gsic.uva.es/caress2/index.php/manage-skill-gap/2183>) are: Communication and interaction, Medical

care and pharmacies, Ethical principles, Service system, organization and administration, planning care and services, Geriatric nursing, common diseases and memory diseases, Rehabilitative approach and rehabilitation, Palliative care, Welfare technology and gerotechnology, Multicultural care and services. (Deliverable 3.4.2 2017.)

## 7 PRACTICAL NURSE EDUCATION

### 7.1 VET in Finland

The Finnish National Requirements for Vocational Qualifications includes the skills requirements and assessment criteria for each unit that form the foundation for quality assurance for flexible pathways. The competence based qualification system offers for students a flexible way of demonstrating, renewing and maintaining their vocational competence. Also when duties change they have a possibility to qualifying for a new profession. In a competence based qualification a student's vocational competence can be acknowledged despite whether the skills have been acquired through working experience, studies or other activities.

(FNBE

2011

[file:///C:/Users/jnurmist/AppData/Local/Temp/140436\\_vocational\\_qualification\\_in\\_social\\_and\\_healthcare\\_2010.pdf](file:///C:/Users/jnurmist/AppData/Local/Temp/140436_vocational_qualification_in_social_and_healthcare_2010.pdf))

All Finnish vocational qualifications are composed of units of learning outcomes. Each unit of a qualification is assessed independently in real working life situations and documented properly. Provision of learning is arranged by VET providers so that it facilitates a student to achieve unit or units of learning outcomes. Recognition of prior learning is stipulated by legislation since 2006 and the recognition is based on learning outcomes, not on time. A unit based qualification is also the key to maintaining study motivation and reducing dropout rates of students. From the point of view a student it is important that they can return later to continue their studies in order to complete their qualification or update their skills. The main principle is that competences can be acquired wherever, whenever and however as long as competences meet the National Qualification Requirements. A vocational qualification also gives general eligibility for polytechnic and university studies. (FNBE 2011.)

Flexibility, optionality, individual learning and qualification pathways and validation of learning outcomes form the corner stones of the Finnish vocational qualification system. These principles are very same with the ECVET principles. All the "ECVET principles for flexible learning pathways" are in use in Finland. (FNEB 2011.) Students have opportunity to have their learning outcomes validated, irrespective of how and where they have acquired them. Assessed units of learning outcomes can be included in a qualification. (European commission (EC) 2011, <file:///C:/Users/jnurmist/AppData/Local/Temp/2010-1.pdf> .)

The reform of Finnish VET entered on January 2018 and will proceed gradually into practice. The aim is to reform Finnish VET so it could better respond to the changes in working life and meet the future competence needs. The significance of learning at workplaces will increased and a new learning agreement model will created. Quicker access to employment means that students can acquire skills in the way, which best suits them. Studies will focus on the acquisition of missing skills, which will shorten the duration of studies especially for adult students. A personal plan for competence development will draw up for every student. (Finnish Ministry of Education and Culture (FMEC) 2017, [http://valtioneuvosto.fi/en/article/-/asset\\_publisher/1410845/ammattillisen-koulutuksen-reformi-uudistaa-koulutuksen-vastaamaan-opiskelijoiden-ja-tyoelaman-tarpeita](http://valtioneuvosto.fi/en/article/-/asset_publisher/1410845/ammattillisen-koulutuksen-reformi-uudistaa-koulutuksen-vastaamaan-opiskelijoiden-ja-tyoelaman-tarpeita) )

Qualification system reform refers the qualifications will be more broad-based and there will be no need to create new qualifications if new competence needs arose. Students will have more freedom of choice within a specific qualification than nowadays. VET can be training preparing for vocational education,



training preparing for working life and independent living as well as other vocational training that does not lead to qualification.

More guided training at workplaces means training at workplaces will be arranged as apprenticeship training based on a fixed-term contract or in the form of training agreements without a contractual employment relationship. The latter will replace the current practical training. Guidance of students at workplaces will be improved through collaboration between teachers and workplace counsellors.

By the reform, students are able to enroll to vocational education and training through a flexible year-round admission system. Each spring will be dedicated primarily for comprehensive school graduates and other people without any vocational qualifications. Completed qualifications and access to employment as a basis for funding means the system would encourage education providers to reduce the number of students who discontinue their studies, increase learning at workplaces, shorten the duration of studies and to provide more education in the fields where labor force is needed the most.

Teachers' work will become more versatile. Individual study paths make the guidance and support provided for students more important than before. Teachers, as experts in pedagogy, aim to build motivating paths for students together and in cooperation with working life. Teachers will more often visit workplaces personally and provide guidance for students outside the educational institution.

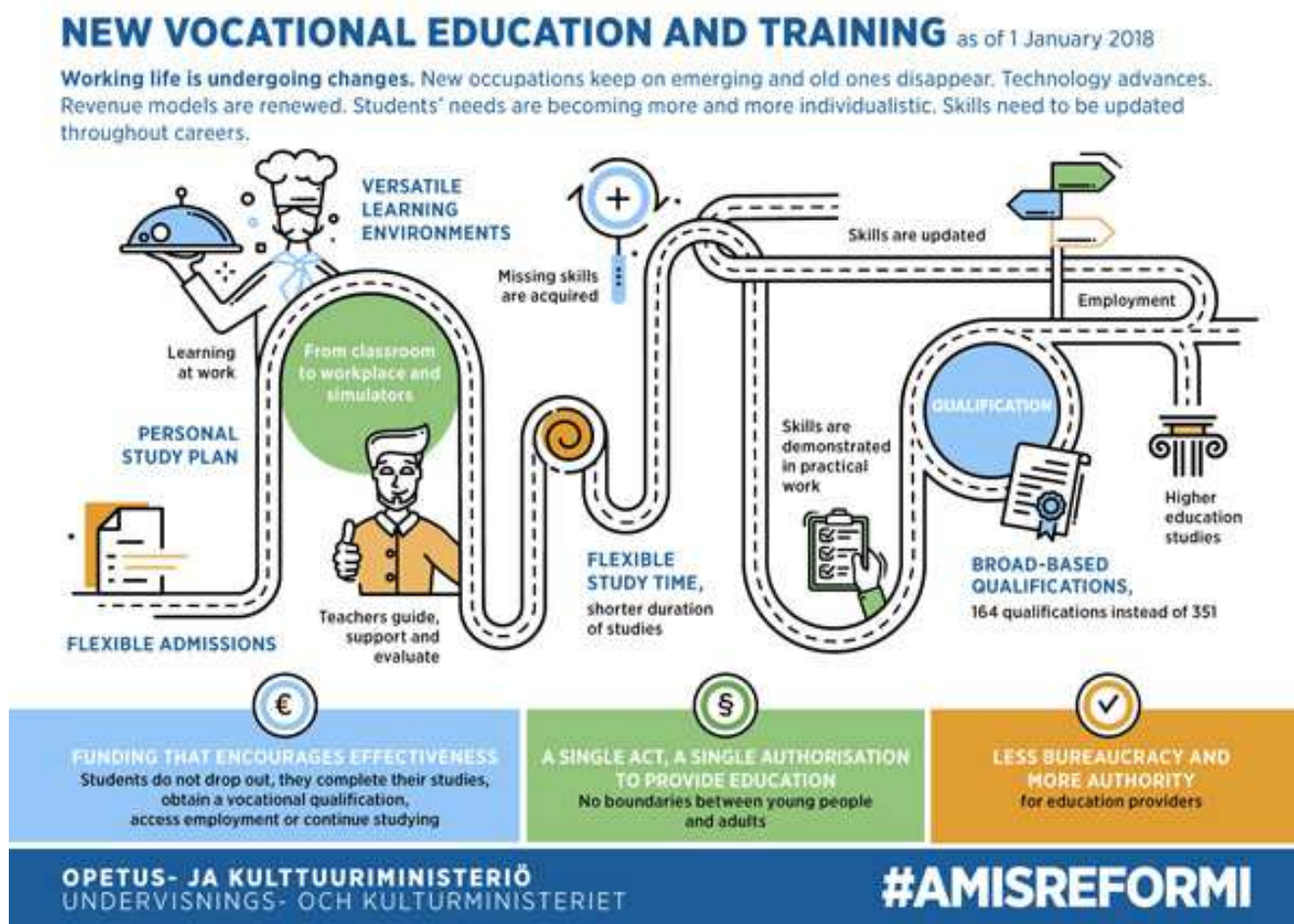


Figure 1. Finnish VET reform



## 7.2 Flexible Pathways

Flexible pathways premise is individual study plan, which includes recognition of students' previous studies and competences. Vocational Education and Training Act (Act 630/1998, section 14) contains the provision of a student's right to make individual choices in his/her studies. Vocational Education and Training Decree (Decree 811/1998, sections 3, 4 and 12a) contains the provision how to inform students considering the studies, student counselling and recognition and validation of prior skills. The education provider must prepare the student an individual study plan based on his/her individual starting point and update it throughout the studies. In order to implement individual flexible pathways, students need also more support and guidance. Supporting students learning processes as well as validation and recognition of prior learning are getting much stronger position on Finnish teachers every day work. (FNBE 2011.)

In the registered professions in social and health care, the student is required to participate in preparatory practical training or apprenticeship training in consistently with his/her individual study plan. The assessment takes place in the end of training by demonstrating skills of a qualification unit in real working life situations. If necessary, the student must demonstrate the correspondence of his/her skills with the skills requirements of the qualification in question. The assessment criteria defined in the requirements for the competence-based qualification are in use when assessing skills demonstration. The assessment scale for learning outcomes is issued by Government decree. There is no separate grade between theory and practice. There is no final examination at the end of the studies for a qualification. (FNBE 2011.)

Assessment must cover all the targets listed in the Requirements of competence-based qualifications. A students' learning outcomes are assessed by comparing them to the national qualification requirements. Based on this assessment process, each unit of learning outcomes is graded. The possibility to acquire separate units of learning outcomes makes it possible to move between school and work according to the needs of the student and the working life. (FNBE 2011.)

The representative of working life and teacher carries out a careful and comprehensive tri-partite assessment. To the student must give an opportunity to self-assessment. Teacher must draw up minutes of the assessment of the module, which must be signed by the assessors. The student is given to provide feedback as part of a good assessment process. Every student completing a qualification must learn the assessment criteria. The teacher and employer who assessing the qualification of student's vocational skills are to have good vocational skills themselves in the area of the competence-based qualification they are assessing. (FNBE 2011.)

## 7.3 Social and health care basic qualification

Practical nurses are social- and health care professionals with a protected occupational title. They have vocational upper secondary education and training (EQF 4), achieving a competence-based qualification or through apprenticeship training while being employed. Practical nurse education is possible after the comprehensive school level, in the 180 competence points training program. (FNBE 2011.)

Vocational Qualification consist of vocational units and common units. The vocational units are either compulsory or optional. A compulsory unit strengthens the shared competence base of students who have acquired a particular qualification. Compulsory units guarantees that all students holding a qualification have the core vocational competence. Optional units helps meeting the different and sometimes very diversified competence needs in working life as well as it also serves students enabling them to make choices according to their individual needs and to build flexible study pathways. (FNBE 2011.)

Practical nurses who have completed the Vocational Qualification in Social and Health Care work with people. They know how to meet clients and patients of different ages and promote their health and well-being. Practical nurses work with nursing, care, education and rehabilitation tasks in the social and health care sector. They can help and guide clients and patients, based on their resources, individually and equally

in everyday situations. Practical nurse can guide clients and patients to maintaining their functional abilities, as well as regular lifestyle, for example nutrition, physical exercise and life management. They can guide and support clients and patients in applying for and using different welfare services and refer clients/patients to various peer support organizations. (FNBE 2011.)

Practical nurses can use their extensive social and health care competence in working with clients and patients with different cultural backgrounds, as well as with their families. The practical nurses' extensive competence in social and health care enables them to move flexibly between different working tasks. In their work, they exploit more specialized skills according to their study program or specialization. Practical nurses can make choices and decisions creatively in their work. They are able to recognize, deal with, solve ethical problems in their everyday work and engage with vocational ethics. Practical nurses also work in a responsible and fair manner according to their rights and obligations. They are primarily accountable for clients and patients, but also to the society. Practical nurses look after their own ability to function and work, their occupational well-being and the constant development of their vocational skills. (FNBE 2011.)

Practical nurse requirements includes also key competences for lifelong learning. They are taken to mean such competence as is needed in continuous learning and coping with the changing working life environment. They are an important part of vocational skills and reflect a student's intellectual flexibility and ability to manage in different situations. They increase civic readiness needed in all fields and help the students to keep up with the changes in society. They also play a major part in student's quality of life and development of personality. (FNBE 2011.)

The key competences for lifelong learning are included in the objectives of the requirements of vocational qualification modules and their assessment criteria. The key competences for lifelong learning are assessed separately and consist of the following: learning and problem solving, interaction and cooperation, vocational ethics and health, safety and ability to function. Other competences for lifelong learning are Initiative and entrepreneurship, Sustainable development, Aesthetics, Communication and media skills, Mathematics and natural sciences, Technology and information technology, Active citizenship and different cultures. (FNBE 2011.)

<b>Practical Nurse</b> <b>Vocational Qualification in social and health care</b> <b>180 competence points</b>	
<b>VOCATIONAL UNITS</b> 135 competence points	<b>COMMON UNITS</b> 35 competence points
<p><b>Compulsory units, 70 cps</b></p> <p>Support and guidance of growth 20 cps</p> <p>Nursing and care 30 cps</p> <p>Rehabilitation and support 20 cps</p> <p>Practical training and skills demonstration included</p>	<p><b>Communication and interpersonal skills 11 cps</b></p> <ul style="list-style-type: none"> <li>- Mother tongue</li> <li>- Second national language: Swedish</li> <li>- Foreign languages</li> </ul> <p><b>Mathematics and science skills 9 cps</b></p> <ul style="list-style-type: none"> <li>- Mathematics</li> <li>- Physics and chemistry</li> <li>- Information and communication technologies</li> </ul>
<p><b>COMPETENCE AREAS 50 cps (From one below)</b></p> <p>Care and Rehabilitation for Older People</p> <p>Pedicure</p> <p>Children's and Youth Care and Education</p> <p>Mental Health and Substance Abuse Welfare Work</p> <p>Nursing and Care</p> <p>Oral Care</p> <p>Care for the Disabled</p> <p>Emergency Care</p> <p>Practical training and skills demonstration included</p>	<p><b>Society and workplace skills 8 cps</b></p> <ul style="list-style-type: none"> <li>- Society skills</li> <li>- Work place skills</li> <li>- Business and entrepreneurship activities</li> <li>- Maintaining work ability</li> </ul> <p><b>Social and cultural skills 7 cps</b></p> <ul style="list-style-type: none"> <li>- Cultural knowledge</li> <li>- Arts and crafts</li> <li>- Ethics</li> <li>- Psychology</li> <li>- Environmental knowledge</li> <li>- Other common units</li> </ul>
<p><b>OPTIONAL UNIT 15 cps</b></p> <p>Practical training and skills demonstration included</p>	<p><b>FREE CHOICE MODULES 10 cps</b></p>

Table 1. Structure of curricula in practical nurse studies

## 8 PARTICIPANTS

### 8.1 Recruitment

As to the recruitment, pilot teachers Sanna Hosio, Nina Kauppinen and Asta Kaitila informed other teachers and students by e-mail about the possibility of participating in the pilot course to study national home care materials. As a matter of fact, the pilot course is offered in Omnia to practical nurse students as an one option of vocational studies; in Finland it is compulsory to accomplish one optional vocational study course (of 15 study points), out of 4 optional studies course are offered to practical nurses. Obligations of participating to the course was that all the compulsory studies have been done before attending to the course. Teachers introduced the course to students (mainly 3rd year students) who were interested and came to hear more information about the course.

Most of the adult students were recruited to the pilot course in classroom at hands pilot teachers Asta Kaitila and Jenni Nurmisto. This specific pilot course included national and transversal e-learning materials but also VCP. Pilot teacher Jenni Nurmisto recruited students for transversal e-learning and VCP course by sending introduction of the course to other teachers who forwarded information to their students.

Students' age varied between 18 and 51. Students studied in different competence areas: Care and Rehabilitation for Older People, Nursing and Care and Rehabilitation care (in old curricula). For many of them Finnish wasn't their mother tongue. Some of the students has acquired competence for certain modules or units before the pilot course, which meant individualizing in the beginning and during a pilot course.

### 8.2 Assessment

National Moodle activities, Transversal e-learning activities and VCP were assessed separately by each learning task. Assessment scale was pass/fail in all learning tasks. Nursing teachers Sanna Hosio and Nina Kauppinen assessed tasks considering nursing and Asta Kaitila assessed tasks considering social science studies in National online course. Pilot teacher Asta Kaitila assessed transversal e-learning tasks with adult students and Jenni Nurmisto with young students. In addition pilot teacher Jenni Nurmisto assessed VCP use for all students participated in pilot.

Adult students had also change to study e-learning materials informal way in their own time and without teacher provided assessment. That refers they picked up from the e-learning materials the information they needed based on their self-assessment. After students had completed theory studies, especially National materials they had a change for skills demonstration in actual work environment in the end of the 5 weeks period of practical training. Finnish National Agency of Education provided assessment criterions and assessment scale. Assessment scale was 1=satisfactory, 2=good, 3 excellent.

## 9 PILOT COURSE

### 9.1 Learning Modules and materials

Nationally developed materials, transversal materials and VCP were in use during Finnish pilot. Material for the National Moodle course has been designed in D3.4 and developed in spring 2017, taking into account Finnish recommendations for older people home care. Super, The Finnish union of practical nurses representatives was actively in together with Omnia teachers when choices were done considering learning materials for nationally developed e-learning materials. Super also provided material developed by their union for e-learning platform and they were downloaded to platform at hands Omnia teachers.

National e-learning Modules included different kind of materials and activities: experience stories of HHCP's, discussion groups, links for informative pages and materials, questions to answer based on provided information, videos, reports of good practices, quality recommendations, students experience sharing, case studies, knowledge test, links to Finnish Medical Society (Duodecim) e-learning courses, patient education task, example pictures, video lecture, article, skills demonstration plan and criterion. All of the national modules were tested in pilot.

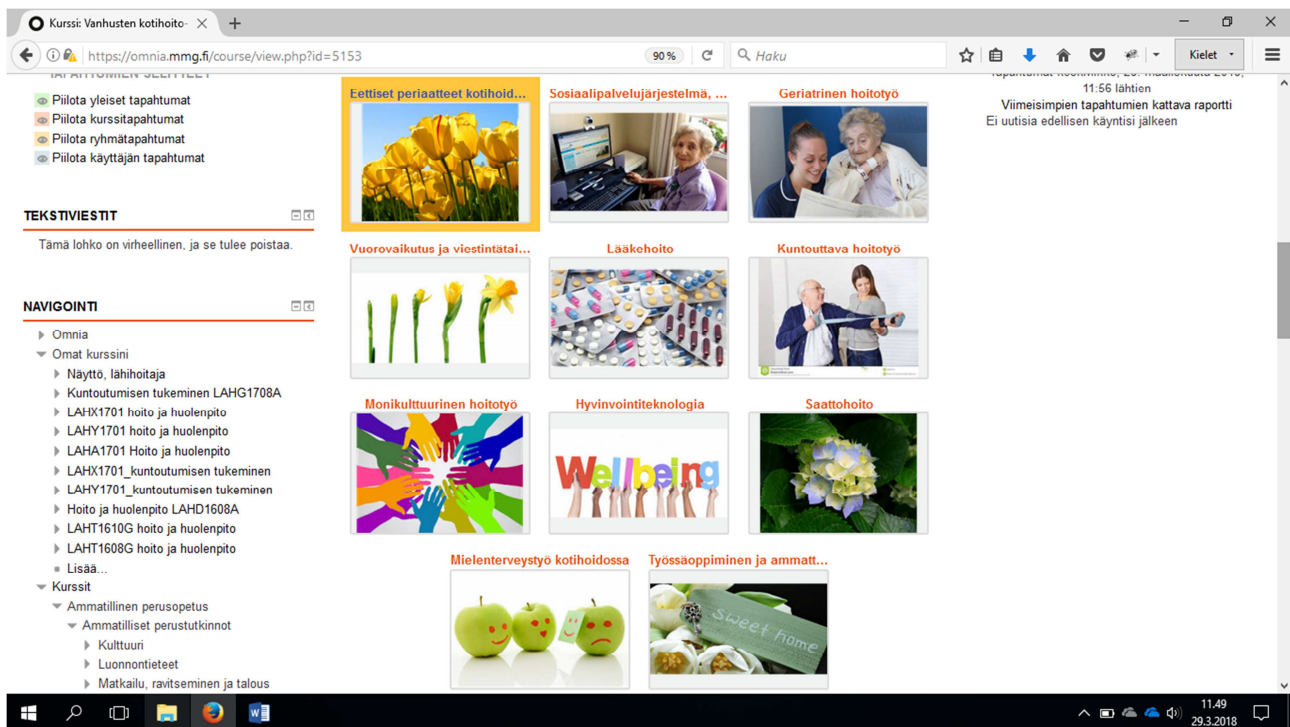


Figure 2. Moodle platform and Modules for national pilot course

Transversal materials and modules were selected to the pilot (see table in Annex II student training pact). Almost all of the modules were used in pilot. Exceptions were made when content of materials weren't suitable level relative to requirements of Finnish National broad of education or against Finnish law. Omnia pilot teachers and Super working life representatives made decisions together which transversal materials are suitable for Finnish practical nurse students. VCP was tested in pilot completely. All of the modules in national and transversal materials and their expected learning outcomes are described in Annex II (Students training pact).

## 9.2 Activities and methods

The pilot course has been tested with 3 groups of students which started the activities in August 2017, November 2017 and February 2018.

- Test- group 1 managed by Sanna Hosio and Nina Kauppinen, involving 20 young and 1 adult students;
- Test- group 2 managed by Asta Kaitila and Jenni Nurmisto, involving 20 adult students.
- Test-group 3 managed by Jenni Nurmisto and Sanna Hosio, involving 16 young students

The pilot courses were planned to be optional for students and should be studied mostly individually through the National Moodle e-learning platform, and through the Transversal e-learning platform (as to the 3 transversal e-learning modules) and VCP. Pilot teachers respected students by standing behind the course information they gave to the students in the beginning of the course. They didn't insert any extra materials or activities to the course against common agreement.

Classroom teaching was formal learning in Finnish pilot. E-learning was formal and/or informal learning. VCP was informal and non-formal learning. Practical training instead was mostly informal and non-formal learning but formal when teacher was present at workplace.

### 9.3 Modifications to designed pilot

Pilot 1 was carried out mostly from August 2017 to December 2017. Few students continued pilot studies still until spring 2018. Some of the students completed their skills demonstration after their practical training in the field of home care. This pilot focused on national e-learning materials, classroom teaching and practical training. Transversal e-learning modules and VCP weren't available in August 2017 when course started. To replace missing VCP, Moodle platform was used to informal and non-formal learning by developing discussion groups for the students.

E-learning individual studying was integrated with presence lessons where students had opportunity to make questions and ask guidance or help for dealing with e-learning tasks. Pilot students studied only e-learning materials completely or both e-learning materials and skills demonstration in practical training. From 21 students seven completed both online course and skills demonstration and six students completed online modules with varying contents based on individual studying plan. Other eight students decided to discontinue pilot course. Most of the students who have completed the national pilot course succeeded to achieve excellent grade. Only one student achieved good grade. All of the students got positive feedback from employer and started to work right after graduation in same home care employer they gave their skills demonstration.

Pilot 2 was officially carried out from November 2017 to December 2017. National pilot materials has been in use for classroom teaching since September 2017. This pilot suffered very much lack of time because course contents wasn't planned based on students needs. Selected part of national and transversal materials were initially planned for these students but VCP didn't fit to their studies. After information received from PC in November that national materials, transversal materials and VCP activities should have been carried out with same pilot group of students, teachers had to plan new pilot structure very quickly. Only option was considerate to adult students even it was known it would be difficult. At that time, young students were in practical training what made new pilot with them impossible. It was also more likely adult students would be easier to engage rather than young students for studies which aren't planned according to their individual needs. Despite of recognized challenges teachers and students succeeded to pilot something from each asked activity with varying contents.

Students had access in both national and transversal materials and they had change to study these materials as much as they wanted from November 2017 to January 2018. In the end, only four students decided to benefit from e-learning materials. In classroom learning, all of the students solved case studies (M2U6 & M3U5), first in small groups with other students and afterwards together with the teacher. Case studies weren't available in transversal e-learning platform, so classroom teaching was good option instead. Materials from M1U1 and M3U4.2 were studied in classroom using different kind of activities as well: lecture, discussions, videos, example pictures and experience sharing. During the pilot students had also wonderful change to experience home care visit by learning task with Virtual Reality glasses.

VCP was carried out very fast because of lack of time. In fifteen to twenty minutes, students send their requests to platform, waited Ggallery to accept their requests and did "Discovery VCP" activity planned by



Si4Life as much as they could in remaining time. Students were guided to participate in three discussions in Finnish CARESS pilot – Lähihoitaja, but only seven students participated. Group discussions “Holistic approach to prevention and rehabilitation” and “Communication and interaction with the older adult and his/her family” weren’t available when course introduction was given to the students 21.11.2017, so these discussions left out from the pilot 2. Teachers assessed all of the national and transversal materials, which were used in classroom teaching, and experiences/opinions shared in VCP discussion groups and they produced at least acceptable learning outcomes for participated students. There was other teachers outside of the pilot who assessed students skills demonstration, so pilot teachers can’t be sure about it’s learning results.

Pilot 3 was carried out from February 2018 to March 2018. It turned out that Omnia had graduating young practical nurse students who were in need of competence points for their optional studies. Omnia pilot teachers Jenni Nurmisto and Sanna Hosio decided to plan course for CARESS project because they still had plenty of resources for T4.3 (transversal materials) and for T5.2 (VCP). This pilot focused on transversal e-learning materials and VCP. Students needed maximum five competence points so it wasn’t possible to involve national materials to the course anymore.

During a pilot students had a change for individual guidance once in a week. To achieve 1 cps student had to conclude “Discovering VCP” activity and took part in classroom teaching. To achieve 2 cps student was obligated to provide summary from topic she/he saw the most interesting/important in transversal materials. To achieve 3 cps students described what she/he has learned from the videos and slides provided in e-learning platform. To achieve 4 or 5 cps student solved case studies.

Students started their journey with VCP by doing “Discovery VCP” activity. Paula Sovio from Super was present in classroom in addition to teachers to support students carry out the activity. Group “VCP practice for Finnish students was deleted in the end of February from VCP platform which mean some of the students’ didn’t do the activities considering it. They took part in three discussion in-group “Finnish CARESS pilot - Lähihoitaja” in Finnish language. Sari Erkkilä from Super took part in discussion groups from working life point of view and activated students to share comments. Students discussed also in two thematic (international) groups “Holistic approach to prevention and rehabilitation” and “Communication and interaction with the older adult and his/her family” as well.

Students wrote to their Experience diaries at least two times. Most of the students wrote more than twice. They wrote to Experience diary what they have learned and what they think about the videos they watched in transversal e-learning platform. They also shared in Experience diary their approximately half page summaries for co-operative reading based on three different modules and gave feedback for developing materials and activities. In the end, some of the students decided to do that by sending e-mail to teacher. Tracking reports were downloaded and sent at hands of students to teacher after pilot course. In the end of the course, teachers received nine Tracking reports from students that showed student has participated in all of the required learning tasks.

Students took part in two case studies (M2U6 & M3U5) in transversal e-learning platform. After students had completed case studies in e-learning platform, cases were also processed in classroom with teacher to make conclusions. Other units in transversal e-learning platform, students studied independently. After independent studying there was classroom learning for all of the three modules processed separately. The activities were the same with all of the three modules in classroom teaching: learning café and co-operative reading.

According to students’ self-assessment in their Experience diaries and discussions/activities carried out in classroom, they achieved expected learning outcomes for transversal materials. Situation appeared differently with VCP pilot- and thematic discussion groups. Students’ comments were too short and superficial for teacher to interpret, are students able to manage contents described in expected learning outcomes. Afterwards VCP discussion topics get deeper review when teacher arrange discussion groups in classroom for same themes. After this activity, expected learning outcomes were achieved.



## 9.4 Evaluation

Uva-Eval carried out official pilot evaluation that is based on systematically gathered data from pilot students and teachers using questionnaires and interview frame. Details of official evaluation are described in D 6.3. Finnish partners implemented also evaluation even it wasn't initially planned. Evaluation was various and took place informal way at hands of students, teachers, Super and FNBE sharing feedback about pilot materials and activities for Finnish pilot coordinator. In addition, AGE Platform took part in pilot evaluation process by observing pilot 2 classroom teaching and providing feedback according to it.

In total 4 teachers and 16 students in Omnia, 2 working life representatives from Super, a specialist from Finnish national board of education and a specialist from AGE Platform took part in informal pilot evaluation. Teachers, students and working life representatives evaluated materials in national- and transversal e-learning platform as well as VCP platform. FNBE representative evaluated only national materials and e-learning platform. Activities and methods were evaluated by teachers, students and representative from AGE Platform.

### Evaluation of modules and materials

Students' evaluated national materials interesting and clear. On the other hand, they felt materials were too wide, compared to competence points they could achieve. Working life representatives from Super evaluated national e-learning materials responses very good to skill gaps identified in CARESS project. Representative of FNBE continued contents of the modules are suitable and current and technical possibilities were used aptly. In contents it's possible to see especially knowledge based learning. It would be better to use verb that describes the activity instead of expression "can". They also pointed out at least in some parts it would be good to talk about social and health care because in Finland they go side by side. In addition, spell check would be good to carry out at some point. Teachers saw also materials are still necessary to develop and some of the instructions are actually already developed based on students' response.

Transversal materials included videos and students liked to watch them. They described videos very educational, clear and practical and they included new information. Students experienced other transversal materials were nice and interesting to read, they were simple, timely and important information for working life. Material is relevant for practical nurse students but too self-clear for graduated students. Some of the contents were familiar for students too. Transversal materials remain too general level and there are too many slides to keep students motivation until the end thought representatives from Super. Pilot teachers saw transversal e-learning materials confused and there is too much text in the slides for Finnish students, but case studies and other collaborative activities are good in principle. Gap between theory and practice was too big in some transversal materials. Our students would have needed more material that is practical. It's challenging to response to working life needs basis of transversal materials because of cultural differences; employees range of responsibility and functions in field are different between different countries. The structure of e-learning platform is also confused and it is not seen online course in Finnish VET point of view. Both transversal e-learning materials and platform needs modification to make it more accessible for Finnish students. In materials students level (EQF4) should take better into account. Students should also have clear guidance how to find specific contents and activities from the platform, described one of the pilot teachers.

### Evaluation of activities and methods

In pilot 1 students experienced activities versatile and they described them positive way. They also find platform was easy to navigate. Teachers thought national online course is very flexible for both students and teachers. All activities are in platform, which enables students to study where, and whenever and teachers do assessment where and when ever. Teachers experienced checking and assessing students

learning tasks considering national materials in Moodle- platform was laborious. It wasn't possible to choose one and only student and her/his learning tasks to assess. Teachers solved the problem by sharing "responsibility folders" between three teachers the way every teacher assessed only tasks which students returned to teachers "responsibility folder". Teachers still think folders must be modify for future courses to simplify teachers' assessment work. Another challenge in future will be if licenses closing down in e-learning courses provided by Finnish Medical Society (Duodecim) and what comes to other web links updating. Online course included many kind of activities from teachers point of view. There would be more students who would like to enroll to the course but right now Omnia don't have resources for it. Some of the teachers outside the pilot have started to exploit tested materials in their teaching. At the beginning, there were many students taking part for the course despite of the fact that they didn't necessarily have enough self-management skills and language skills to complete the tasks. During the pilot, the teachers had to lead some of the students to take part for the optional courses with presence teaching methods.

Students' individual learning needs were difficult to pay respect to especially during pilot 2 because of lack of time. Instructions and guidance came out too late for this pilot. In spring 2017, timetables were done for next fall studies and finalize all the plans for fall. In practice, it's impossible to change plans anymore later on. Besides, of that teachers still thinks students were quite motivated. VCP didn't motivated them though. Teachers evaluated what effected to students' motivation was that VCP tasks were oversized to their resources and possibilities to carry out tasks alongside other more important school tasks. It would have been nice to have a change to orientate to VCP with better time. Multicultural case and other discussion about it was especially good experience for students.

From pilot teachers point of view VCP as an activity was useful in pilot 3. Both students and teachers experienced VCP platform slightly confused because of its navigation. There were many different paths and it was hard to figure out how to find the specific activities. Although students find VCP interesting and they liked to study in internet. They thought course was well planned and teacher guidance was easy and it was possible to have enough. In the end students get familiar with VCP platform and navigation felt easier. They were also motivated because they saw course short enough compared to competence points they achieved. Students wanted to recommend pilot 3 course for practical nurse students who are interested about home care and are in need of competence points for their optional studies. Students still don't believe they would ever go to the VCP site after they have graduated.

Teachers thought how much there will be use for all of the activities on VCP platform because most of the functions are already possible to use in Moodle platform. Working life representative saw overlapping between VCP and Moodle platform as well. That's why VCP was unnecessary from their point of view. Students had change for more high-quality information on Omnia's Moodle platform. One of the teachers was also skeptical how well VCP can serve its actual goal, non-formal learning, from students' point of view. VCP is still usable for HHCPs' when they want communal thinking about ethical issues or information about home care in different cities or countries.

## Conclusions

National e-learning material is suitable for practical nurse studies in Finland because it's developed from Finnish national board of education requirements considering homecare qualification taking into account identified skill gaps in CARESS project. Multiple representatives in Finnish education field also evaluated materials and saw them suitable and usable for practical nursing studies.

National e-learning materials are relevant for many competence areas in practical nurse studies according to requirements of Finnish national board of education. Relevant competence areas according to teachers for national e-learning course are Care and Rehabilitation for Older People, Mental Health and Substance Abuse Welfare Work, Nursing and Care and Care for the Disabled. Considerable is that home care studies will be mandatory for competence areas Care and Rehabilitation for Older People and Nursing and Care from August 2018. Omnia will benefit developed pilot materials when carrying out these studies. Teachers

wanted to point out national online course requires self-direction skills from a student and fluency in Finnish language.

It seems that students experienced transversal materials were better, what teachers and working life representatives imagined initially. It also has to take into account that teachers and working life representatives have evaluated transversal materials and chose the most suitable materials for students before students started to study them. It is presumable this made them saw materials very different way.

VCP platform and activity was seen as an average. Students, teachers and working life representatives had in the end quite neutral opinions and experiences using VCP. Possibility to use Moodle platform, which is familiar for students, can limit motivation to choose VCP platform instead. On the other hand, as working life representative expressed, VCP can be useful for HHCP's who want to find information from other cities and countries HHCP's.

Philippe Seidel from AGE Platform who observed pilot 2 in December 2017 suggested for the continuation of the project and for the learning modules beyond the project duration could be:

- To allow more time to learn about the possible uses of the Virtual Community of Practice
- To develop activities that allow learners to exchange with learners from other pilot countries, bearing in mind the difficulties linked to the language barriers
- Propose teaching content that allows students to go deeper on the selection of topics for the learning modules
- Better integrate the online tools (e-learning and VCP) into existing online learning tools of the partners
- Allow for more flexibility to adapt presentations and online learning tools for individual teachers

Teachers will modify and develop materials and methods taking into account all the feedback and suggestions gathered from students and partners.

## 10 ANNEX I Table of Pilot structure

Table of pilot structure								
	Number of students	Time devoted to the pilot	Teachers	Responsible teacher for each thematic unit	Type of activities performed	Chronogram of activities	Type of assessment of the activities	Level of involvement of the students
Pilot 1	Started 21. Completed 7	16.8.2017-22.12.2017	Sanna Hosio, Nina Kauppinen, Asta Kaitila	Sanna Hosio and Nina Kauppinen for national e-learning (nursing materials). National e-learning (social science materials).	Classroom: individual guidance E-learning: experience stories of HHCP's, discussion groups, links for informative pages and materials, questions to answer based on provided information, videos, reports of good practices, quality recommendations, students experience sharing, case studies, knowledge test, links to Finnish Medical Society (Duodecim) e-learning courses, patient education task, example pictures, video lecture, article, skills demonstration plan and criterion.	In the table below	Pass/Fail, but skills demonstration Excellent/ Good/ Satisfactory/ Fail	In classroom low involvement. In e-learning high involvement
Pilot 2	20	21.11.2017-25.2.2018	Asta Kaitila, Jenni Nurmisto	Asta Kaitila for Mod 1 Unit 1, Mod 2 Unit 6,	Classroom teaching: lectures, collaborative learning, VR-homevisit, case studies.	In the table below	In classroom teaching -> pass/fail	In classroom teaching high involvement.

				<p>Mod 3 Unit 4.2, Mod 3 Unit 5 and National e-learning (social science materials).</p> <p>Sanna Hosio and Nina Kauppinen for national e-learning (nursing materials)</p> <p>Jenni Nurmisto for VCP and international e-learning</p>	<p>VCP: discussions.</p> <p>E-learning: independent</p>		<p>In national e-learning -&gt; self assessment or if students requires pass/fail</p> <p>In VCP and e-learning -&gt; self assessment</p> <p>Skills demonstration -&gt; excellent, good, satisfactory, fail</p>	<p>In VCP discussion 7 students and in e-learning 5 students</p>
Pilot 3	16	12.2.-23.3.2018	Jenni Nurmisto, Sanna Hosio	<p>Jenni Nurmisto for all of the units and activities</p>	<p>In classroom: course planning, individual guidance in small groups, case studies, collaborative reading, learning cafe</p> <p>VCP: Discovery VCP, discussion groups, experience diary, Tracking report</p> <p>E-learning: case studies, summaries</p>	In the table below	<p>Pass/Fail, but skills demonstration</p> <p>Excellent/ Good/ Satisfactory/ Fail</p>	

Deliverable 4.6

	Timetable	Date	Face to face
<b>Pilot 1</b>			
Presentation	14-16	16.8.2017	X
Individual guidance	13-16	27.9.2017	X
Individual guidance	13-16	25.10.2017	X
Individual guidance	13-16	22.11.2017	X
Individual guidance and sum upp	13-16	20.12.2017	X
<b>Pilot 2</b>			
Presentation	12.30-13	21.11.2017	X
Module 1 Unit 1	8.30-12	14.12.2017	X
Module 2 Unit 6	8.30-12	13.12.2017	X
Module 3	8.30-12	1.12.2017	X
Unit 4.2	12.30-15	13.12.2017	X
Unit 5			
<b>Pilot 3</b>			
Presentation	13-16	12.2.2018	X
Module 1	8.15-11.45	19.3.2018	X
Module 2	8.15-11.45	20.3.2018	X
Module 3	8.15-11.45	21.3.2018	X
VCP & E-learning	13-16	12.2.2018	X
Discovery VCP	14-16 x 4	2.3.-12.3.2018	X
Individual guidance			

## 11 ANNEX II Students training pact

ERASMUS PLUS 2015  
SECTOR SKILLS ALLIANCES  
AGREEMENT No. 2015 – 3212 / 001 – 001  
PROJECT No. 562634-EPP-1-2015-IT-EPPKA2-SSA



### “Student training pact”

V3 –December 15<sup>th</sup> 2017

T6.3 – UVA-EVAL & SI4LIFE

Funded by the  
Erasmus+ Programme  
of the European Union





# STUDENT TRAINING PACT

**OMNIA**

## GENERAL INFORMATION

COURSE TITLE	Older people home care, pilot 2
STARTING DATE-CLOSING DATE	21.11.2017-25.2.2018
LEVEL OF QUALIFICATION (EQF)	4
RESPONSIBLE TEACHERS	Asta Kaitila, Jenni Nurmisto
CONTACT INFORMATION ( teachers e-mail)	asta.kaitila@omnia.fi, jenni.nurmisto@omnia.fi
PLACE	Omnia, the Joint Authority of Education in Espoo Region
DEPARTMENT/INSTITUTIONS INVOLVED	Vocational qualifications in social- and health care

### COURSE CONTEXT

Finnish pilot course Elderly home care will start on 21.11.2017 and will end on 25.2.2018. Asta Kaitila is the responsible teacher of classroom teaching and national e-learning materials and Jenni Nurmisto of VCP and international e-learning materials. During a pilot classroom teaching, practical training and skills demonstration are mandatory. In classroom teaching will be at least Discovery VCP practice , Module 1 Unit 1, Module 2 unit 6, Module 3 unit 4.2. Prepare themselves for classroom teaching students must first study e-learning materials. Only numeral assessment in course will be after practical training in 5 days skills demonstration.

### PRE-REQUISITES

In Finnish pilot course target students are adult students. All of the students has passed basic studies in their practical nurse education and they are accomplishing their third and last year of studies in practical nurse education.

### COMPETENCIES AND OBJECTIVES/COURSE GOALS:

Student will be able to

- respect home care clients privacy, habits and property
- plan, implement and evaluate home living clients care and service taking into account clients resources and participation
- Work together with home care client, significant others and networks
- able to be in professional interaction with home care client and significant others
- support and guide home living clients in her/his daily functions taking into account her/his resources

- Notice home care clients physical, psychological and social wellbeing and function changes and prevent functions which impair them
- guide and support home care client and her/his significant others to maintain and promote physical, psychological and social wellbeing and function
- guide and support home care client and her/his significant others with different social services
- guide and support home living client in different stages of care path
- implement home living clients medical care
- use at clients home own working tools and technology considering safety, social interaction, information and statistics and guide clients and their significant others how to use them aswell
- help client taking care of and/or take care of clients nutrition
- help client taking care of and/or take care of clients home cleaning and cloth maintenance
- taking care of things for client outside of home and/or help client to do business outside of home
- work in area of responsibility in home care part of working group
- benefit own professional knowledge when working in home care
- develops her/his own working based on feedback and evaluate her/his own competence
- solve home care clients weekday problems and working in suprisingly situations at clients home
- working according to social- and health ethic principles at clients home
- promotes own wellbeing at work and working safety when working in home care
- works according to basis of sustainable development in clients home

#### COURSE SCHEDULE

	IMPLEMENTATION/ DURATION	STARTING DATE/ CLOSING DATE
		21.11.2017-25.2.2018
PRESENCE LEARNING ACTIVITIES  LESSONS AND STUDY	Classroom teaching: 16 h  Autonomous work: Optional, depends on a student	21.11.2017/14.12.2017
TRAINEESHIP/ WORK-BASED LEARNING	8 weeks  4 days per week= 16 to 20 hours per week	2.1.-25.2.2018
E-LEARNING	At least 2-3 hours. This will happen in preparation for classroom learning. At another time students must assess themselves how much more they'll need to study e-learning materials to succeed in practical training skills demonstration.	From 1.12.2017 to end of March 2018.
INFORMAL LEARNING  (VCP)	<b>Participation in the Virtual Community of Practice cannot be measured in terms of "time", but in terms of "meaningful contributions". Students are supposed to provide meaningful contributions to the VCP throughout the duration of the activity</b>	"Discovery VCP" 1.12.2017  End in 25.2.2018

#### TEACHING METHODOLOGY

Explain the teaching methods that are going to be used during the course (e.g., theoretical classrooms, project based learning, collaborative learning, autonomous work etc.)

In classroom: Lectures, collaborative learning, case studies, VR-homevisit

E-learning: Autonomous work

In a work place: Practical training and Skills demonstration

## LEARNING OUTCOMES AND CONTENTS

### PRESENCE LEARNING

MODULE NAME/NUMBER	TARGETED COMPETENCES
Introducing welfare technology /Mod 1 Unit 1	basic knowledge about Welfare Technology
Multicultural communication and interaction/ Mod 2 Unit 6	multicultural issues in homecare
Introduction to older adults abuse/ Mod 3 Unit 4.2	skills for enhancing quality care, such as skills about older adults abuse detection
Quality care – Mental health in older adults / Mod 3 Unit 5	skills for enhancing quality care, such as skills about ethical issues management in older people mental health problems

### E-LEARNING CARESS TRANSVERSAL MODULES

3 Modules have been set-up on CARESS e-learning Platform. These modules will be at your disposal until March 31<sup>st</sup> to deepen your competences about homecare.

All of them include Interactive Learning Materials which can be studied individually in any time and any place, accessing the platform with your own account. Some of them also include specific learning activities to be carried out in forum discussions.

Check in the assessment section of this agreement which Units and which activities will be taken into account for final assessment.

MODULE NAME/NUMBER	TARGETED LEARNING OUTCOMES
MODULE 1 - Welfare technology and ICTs for remote health monitoring and rehabilitation	<ul style="list-style-type: none"> <li>• basic knowledge about Welfare Technology</li> <li>• basic knowledge about the underlying concepts and ethical issues of the use of ICTs for health monitoring;</li> <li>• basic knowledge and skills about the main ICT/mobile solutions for home-monitoring and prevention;</li> <li>• basic knowledge and skills about the main ICT/mobile solutions for treatment, assistance and rehabilitation</li> </ul>
MODULE 2 - Team working, multi-sectoral and multi-professional approach to older adults' needs	<p>Basic knowledge and skills about:</p> <ul style="list-style-type: none"> <li>• the communication with the patient;</li> <li>• team working and professional group dynamics;</li> <li>• a multi-professional approach to older adults' needs assessment;</li> <li>• local and territorial networks which older adults can rely on;</li> </ul>

MODULE 3 - Holistic and rehabilitation approach: frailty, multi-morbidity, multi-professional approach to older adults needs	<ul style="list-style-type: none"> <li>• multicultural issues in homecare.</li> <li>• specific skills concerning the proactive approach to ageing, such as skills for frailty detection and treatment , active and healthy ageing and falls prevention;</li> <li>• skills for enhancing quality care, such as skills about ethical issues management and older adults abuse detection (Unit 4) or skills about basic counselling techniques;</li> <li>• specific geriatric nursing skills, both at general/theoretic level (chronic diseases epidemiology, multimorbidity, impact of lifestyles, older adults empowerment) and at practical level (pressure ulcers management).</li> </ul>
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### OTHER E-LEARNING MODULES

Finnish national e-learning modules

MODULE NAME	TARGETED COMPETENCES – STUDENT IS ABLE TO
Ethical principles in home care	benefit own professional knowledge when working in home care  develops her/his own working based on feedback and evaluate her/his own competence  solve home care clients weekday problems and working in suprisingly situations at clients home  working according to social- and health ethic principles at clients home  promotes own wellbeing at work and working safety when working in home care
Social service system	guide and support home care client and her/his significant others with different social services  guide and support home living client in different stages of care path
Geriatric nursing	Notice home care clients physical, psychological and social wellbeing and function changes and prevent functions which impair them  guide and support home care client and her/his significant others to maintain and promote physical, psychological and social wellbeing and function  help client taking care of and/or take care of clients nutrition  help client taking care of and/or take care of clients home cleaning and cloth maintenance
Communication and interaction	Work together with home care client, significant others and networks  be in professional interaction with home care client and significant others

	work in area of responsibility in home care part of working group
Medical treatment	implement home living clients medical care
Rehabilitative nursing	<p>plan, implement and evaluate home living clients care and service taking into account clients resources and participation</p> <p>support and guide home living clients in her/his daily functions taking into account her/his resources</p> <p>taking care of things for client outside of home and/or help client to do business outside of home</p>
Multicultural nursing	<p>take into account clients cultural background</p> <p>respect home care clients privacy, habits and property</p>
Welfare technology	use at clients home own working tools and technology considering safety, social interaction, information and statistics and guide clients and their significant others how to use them aswell
Palliative care	<p>Understands principles of palliative care</p> <p>Knows care course of conduct and the meaning of it</p> <p>Competence for passing away patients care practice and holistic approach</p>
Mental health work in home care	<p>Notice home care clients physical, psychological and social wellbeing and function changes and prevent functions which impair them</p> <p>guide and support home care client and her/his significant others to maintain and promote physical, psychological and social wellbeing and function</p>

### VIRTUAL COMMUNITY OF PRACTICE (VCP)

Participation in VCP will allow for the development of specific skill through an informal learning process.

A small set of pre-defined learning outcomes will be targeted and will be evaluated in the final assessment; they are listed in the table below; anyway, many other secondary and unexpected outcomes could be reached on the base of the discussion and the activities generated on the platform.

TOPIC	TARGETED LEARNING OUTCOMES
Welfare technology and ICTs for	To be aware of the types of ICTs which can support the professional in

remote health monitoring and rehabilitation	daily practice (tools for sharing documents, electronic clinical record, electronic agenda, monitoring tools, etc.) including their potentialities, their limits, their usability, their cost, etc. in order to be able to select and use the most proper ones
Team working, multi-sectoral and multi-professional approach to older adults' needs	To be aware of the importance of the quality of the communication/interaction with the older adult and his/her family and of the main elements which affect this quality, taking into consideration multicultural issues, ethics, the need to educate healthy behaviors, etc.
Holistic and rehabilitation approach: frailty, multi-morbidity, multi-professional approach to older adults needs	To be aware of the crucial role played by an holistic approach to older adults' needs analysis. To be able to consider all of the meaningful dimensions of older adults health status (biological, social, psychological) in an holistic approach to prevention and rehabilitation.

## ASSESSMENT – GENERAL

Maximum final grade is excellent

The overall assessment of the students is based on the following assessment steps.

STEP/TOOL	GRADING -
Classroom learning – Formal learning	pass/fail
Written plan for skills demonstration – formal learning	pass/fail
Informal learning – discussion on VCP diary and students tracking	pass/fail
Results of traineeship/work-based learning -> skills demonstration	excellent, good, satisfactory
Collaborative activities on e-learning platform	pass/fail (optional)
TOTAL GRADE	<b>excellent 3/ good 2/ satisfactory 1/ fail 0</b>

Here are provided details about the learning outcomes/modules which each assessment step will focus on and the assessment criteria.

### Classroom learning – FORMAL LEARNING

Assessment will do in skills demonstration and focus on

PRESENCE /E- LEARNING	REFERENCE MODULE /UNIT
<b>PRESENCE &amp; E-LEARNING CARESS TRANSVERSAL MODULES</b>	Module 1 – Unit 1
	Module 2 – Unit 6
	Module 3 – Unit 4.2
	Module 3 – Unit 5

**Written plan for skills demonstration – FORMAL LEARNING**

Assessment will focus on

PRESENCE /E- LEARNING	REFERENCE MODULE /UNIT
<b>PRESENCE</b>	Module 1 – Unit 1
	Module 2 – Unit 6
	Module 3 – Unit 4.2
	Module 3 – Unit 5
<b>E-LEARNING CARESS NATIONAL MODULES</b>	Ethical principles in home care
	Social service system
	Geriatric nursing
	Communication and interaction
	Medical treatment
	Rehabilitative nursing
	Multicultural nursing
	Welfare technology
	Palliative care
Mental health work in home care	
<b>E-LEARNING CARESS TRANSVERSAL MODULES</b>	Module 1 –Unit 1
	Module 1 – Unit 4
	Module 2 – Unit 1
	Module 2 – Unit 3
	Module 2 – Unit 4
	Module 2 – Unit 5
	Module 2 – Unit 6
	Module 3 – Unit 1
	Module 3 – Unit 3
	Module 3 – Unit 4
	Module 3 – Unit 5
	Module 3 – Unit 6

**INFORMAL LEARNING – DISCUSSION ON VCP DIARY AND STUDENTS TRACKING**

Students participation in VCP will be assessed thanks to 2 main tools:



- **Tracking Report:** it provides a list of the actions/activities carried out by the student in the VCP
- **Experience Diary Report :** it includes all of the “entries” published by the student in the diary.

**Students are supposed to print out both documents and take them to the final oral exam in order to use them as a base for the discussion.**

**Students are expected to fill in a “new entry” in the Experience Diary at least two times during pilot on the base of the provided template.**

In the VCP, the development of the specific transversal competences will be targeted, mainly through groups discussion. These competences will be the following:

TOPIC	TARGETED LEARNING OUTCOMES
Welfare technology and ICTs for remote health monitoring and rehabilitation	To be aware of the types of ICTs which can support the professional in daily practice (tools for sharing documents, electronic clinical record, electronic agenda, monitoring tools, etc.) including their potentialities, their limits, their usability, their cost, etc. in order to be able to select and use the most proper ones
Team working, multi-sectoral and multi-professional approach to older adults’ needs	To be aware of the importance of the quality of the communication/interaction with the older adult and his/her family and of the main elements which affect this quality, taking into consideration multicultural issues, ethics, the need to educate healthy behaviors, etc.
Holistic and rehabilitation approach: frailty, multi-morbidity, multi-professional approach to older adults needs	To be aware of the crucial role played by an holistic approach to older adults’ needs analysis.  To be able to consider all of the meaningful dimensions of older adults health status (biological, social, psychological) in an holistic approach to prevention and rehabilitation.

These competences will be targeted through National Discussion Groups (Finnish)

In addition specific competences will be targeted through Thematic Groups Discussions, which will be carried out in English and will involve students from different pilots.

Competences targeted through Thematic groups will be the following:

- To be able to manage multicultural issues, taking into account the user’s life history and culture
- To be able to set up the proper level of closeness/intimacy with the older adult and his/her family taking into account biological, social and psychological elements.

### RESULTS OF TRAINEESHIP/WORK-BASED LEARNING

5 days skills demonstrations will follow after 8 weeks practical training in work place. The assessment will be carried out together with the student, work place instructor and teacher based on students written plan for skills demonstration and FNBE requirements. Assessment scale is excellent, good, satisfactory, fail.

### COLLABORATIVE ACTIVITIES ON E-LEARNING PLATFORM

Students are supposed to engage in the following collaborative activities on CARESS e-learning platform. Students gets familiar with the e-learning materials considering Mod 2 Unit 2 and Mod 3 Unit 5. Case studies will do carried out in classroom teaching coordinated by pilot teacher afterwards.

E-LEARNING CARESS TRANSVERSAL MODULES	UNIT / ACTIVITY
MODULE 2 - Team working, multi-sectoral and multi-professional approach to older adults' needs	Unit 6 - Multicultural communication and interaction – Case study
MODULE 3 - Holistic and rehabilitation approach: frailty, multi-morbidity, multi-professional approach to older adults needs	Unit 5 - Mental health in older adults – Case Study

Evaluation criteria will be the following

CRITERIA	%GRADE
Participation in all of the proposed activities YES/NO	pass/fail, 100%
Participation in classroom teaching and collaborative working in a group	pass/fail

*“Meaningful contributions”* means posts/contributions to documents/contributions to discussions which provide an added value to the discussion/work/document. Contributions such as *“I agree/disagree”* with no explanations, for instance, won’t be considered as meaningful.

STUDENT NAME: \_\_\_\_\_

SIGNED FOR ACKNOWLEDGEMENT: \_\_\_\_\_