Set of New/Updated Occupational Profiles

Deliverable 4.1



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Table of Contents

1. Introduction 4
   1.1 Purpose and Context 4
   1.2 Eldicare 2.0 Project Overview 5
   1.3 WP4 Objectives 7
   1.4 Structure of the Deliverable 8
2. Methodological Framework 9
3. Analysis of Existing Occupational Profiles (EU Level) 15
   3.1 Summary Table of ESCO Profiles, EQF Levels, and Key Skills 16
   3.2 Summaries of Each Profile 17
      PROFILE 322 — Nursing & Midwifery Associate Professional 17
      PROFILE 1343.1 — Elderly Home Manager 18
      PROFILE 1344.1 — Social Services Manager 18
      PROFILE 2221.2 — Nurse Responsible for General Care 19
      PROFILE 2635.3.14 — Gerontology Social Worker 19
      PROFILE 3412.4.1 — Adult Community Care Worker 19
      PROFILE 3412.4.2 — Adult Day Care Worker 20
      PROFILE 3412.4.9 — Residential Care Home Worker 20
      PROFILE 3412.4.11 — Residential Home Adult Care Worker 20
      PROFILE 3412.4.12 — Residential Home Older Adult Care Worker 20
      PROFILE 5322.1 — Home Care Aide 21
      PROFILE 5322 — Home-Based Personal Care Workers 21
   3.3 Cross-Profile Comparative Findings 22
   3.4 Recommendations for Updating ESCO Profiles 23
   3.5 Conclusion 23
4. National-Level Occupational Profiles 24
   4.1 Greece 24
      4.1.1 Summary of the National Occupational Profile: Personal Care Attendant 24
   4.2 Bulgaria 26
      4.2.1 Summary of the National Occupational Profile: Healthcare Assistant 26
         4.2.2 Summary of the National Occupational Profile: Caregiver 28

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4.2.3 Summary of the National Occupational Profile: Social Assistant – Assistance for Adults 30
4.3 Czechia 31
4.3.1 Summary of the National Occupational Profile: Caregiver (Czech Republic) 31
4.3.2 Summary of the National Occupational Profile: Nurse in Social Services (Czech Republic) 34
4.3.3 Summary of the National Occupational Profile: Social Worker (Czech Republic) 36
4.4 France 39
1. Introduction 39
2. Summaries of the 20 Occupational Profiles 40
3. Cross-Profile Skills Patterns 44
4. Cross-Profile Challenges and Gaps 45
5. Conclusions Across All 20 Profiles 45
4.5 Spain 46
4.5.1 Context 46
4.5.2 Summaries of the 11 National Occupational Profiles 47
4.5.3 Integrated Cross-Profile Analysis of All 11 Spanish Occupations 51
4.6 Austria 52
4.6.1 Summaries of the 12 National Occupational Profiles 52
4.6.2 Integrated Cross-Profile Analysis of the 12 Austrian Occupational Profiles 55
5. Final Outline of Profiles to be (Re)Designed 58
5.1 Selection Criteria 58
5.2 France – Nurse Responsible for General Care (IDE) 59
5.3 Greece – Personal Care Attendant (Home-Based Care) 60
5.4 Spain – Institutional Care Worker (CNO 5629; SISPE 56291025) 61
5.5 Austria – Nursing Assistant (Pflegeassistenz) 62
5.6 Czech Republic – Caregiver / Social Services Worker 63
5.7 Bulgaria – Social Assistant (Assistance for Adults, NAVET code: 7620402) 64
5.8 EU Profile – Home-Based Personal Care Worker (ESCO 5322) 65
5.9 EU Profile – Elderly Home Manager (Residential Care Manager for Older Adults) 65
6. Updated and New Occupational Profiles 66
6.1 Occupational Profile 1 – Nurse Responsible for General Care (France) 67
6.2 Occupational Profile 2 – Personal Care Attendant (Greece) 71
6.3 Occupational Profile 3 – Care Home Workers (Spain) 75
6.4 Occupational Profile 4 – Nursing Assistant (Austria) 83
6.5 Occupational Profile 5 – Caregiver-Worker in Social Services (Czechia) 87
6.6 Occupational Profile 6 – Social assistant - Specialization “Assistance for adults” (Bulgaria) 89

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6.7 Occupational Profile 7 – Home-Based Personal Care Worker (ESCO 5322 – EU) 93
6.8 Occupational Profile 8 – Residential Care Managers for Older Adults (ESCO 1343.1 – EU) 97
7. Validation Process and Results 103
8. Conclusions and Recommendations 105
8.1 Key Conclusions 105
8.2 Recommendations 108
8.3 Final Reflection 110
ANNEXES 111
ANNEX I ESCO Occupational Profile of older people care profession 111
ANNEX II Comparative Analysis Report 111
ANNEX III Job Profile Template 160
ANNEX IV National Occupational Profile of older people care Profession 163
ANNEX V Occupational Profile Template 163
ANNEX VI Country-Level Workshops 164
ANNEX VII EU Validation Workshop Overview 165

1. Introduction

1.1 Purpose and Context

This deliverable presents the complete set of newly developed and updated occupational profiles designed to strengthen the professionalism, consistency and future-readiness of the care workforce for older people across Europe. Its primary purpose is to modernize the care definition of key care roles in line with the findings of WP3 and WP4, address the significant skills gaps revealed through national and European consultations, and align occupational standards with emerging EU priorities, including the European Care Strategy, the Pact for Skills and the twin digital and green transitions. By updating existing profiles and introducing EU-level reference profiles, the deliverable contributes to a more coherent, comparable and competence-based framework for long-term care occupations across Member States.

The deliverable contains **eight profiles** – six national roles and two EU-level roles – selected based on cross-country relevance, sectoral impact, skills needs and the requirement to represent both managerial/coordination and frontline caregiving functions. Each profile follows a harmonized structure that clearly outlines the role's purpose, main tasks, core and optional competences, required knowledge, qualification and training pathways, digital and green skills, and alignment with ESCO and EU competence frameworks (DigComp, GreenComp and EntreComp). The profiles also incorporate extensive feedback from 18 national validation workshops and the EU-level validation event, ensuring that they reflect both national specificities and the shared challenges and expectations of the European care sector.

Together, these profiles provide a comprehensive and future-oriented reference point for employers, VET providers, policymakers and accreditation bodies. They support the

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development of updated training programmes and micro-credentials, clarify job expectations and professional boundaries, enhance mobility and transparency across countries, and reinforce the attractiveness and recognition of care work. Ultimately, this deliverable contributes to building a more resilient, digitally enabled and person-centred long-term care workforce, capable of meeting Europe's evolving demographic and societal needs.

1.2 Eldicare 2.0 Project Overview

Eldicare 2.0 is the continuation of the Sector Skills Alliance project "Eldicare: Matching Skills in a growing European Silver Economy", which has been implemented from 2018 to 2021, also coordinated by AKMI S.A. Eldicare had a great impact for the older people care sector; however, the COVID-19 outbreak affected both the project activities and the older people care sector. Thus, a new synergy, focused on the post-COVID era and the EC goals related to digitalisation, green transition, entrepreneurial and soft skills of care professionals was decided to be developed.

Thus, "Eldicare 2.0: Re-defining skills in a post-COVID European Silver Economy", in line with the European Care Strategy, just developed on 7th of September 2022 that plans to make older people care in the EU more available, accessible and of better quality for all, aims at a long-term care, which is comprehensive and affordable and allows a decent standard of living for people and seeks to meet long-term older people care needs. Above that, it aims to increase the offer and mix of professional long-term care services close territorial gaps in the access to long-term care, rollout accessible digital and green solutions in the provision of care services, ensuring high-quality criteria and standards for long-term care providers through a sectoral skills long-term strategy.

Thus, Eldicare 2.0 intents to strengthen the cross-sectoral cooperation among sectorial partners and VET providers in healthcare, as well as to update the occupational profiles and competencies of professionals in the caregiving sector, providing a sectoral skills long-term strategy that will tackle skills gaps on the labor market and anticipate future skills ends.

Regarding the specific objectives of the project, these are:

- Develop a long-term skills strategy for older people care professionals, by creating a Skills Ecosystem for long-term care workforce.
- Upskill and reskill the older people care professionals, to be able to meet the growing needs of the ageing population.
- Upgrade the existing and emerging Occupational Profiles with up-to-date and essential skills for the older people care practitioners, by focusing on the principles of digital and green economy, the entrepreneurship and a patient-centered care.
- Bridge the skills gaps of older people care professionals, by analysing the skills mismatches in a post COVID era, in order to ensure a common basis for the competences.
- Establish a methodology for addressing future skills needs, by creating a skills anticipation mechanism and developing policy recommendations.
- Provide new teaching and learning approaches, by creating competence-based courses, work-based learning procedures, employers' handbook, with the use of micro credentials and the MOOC platform.

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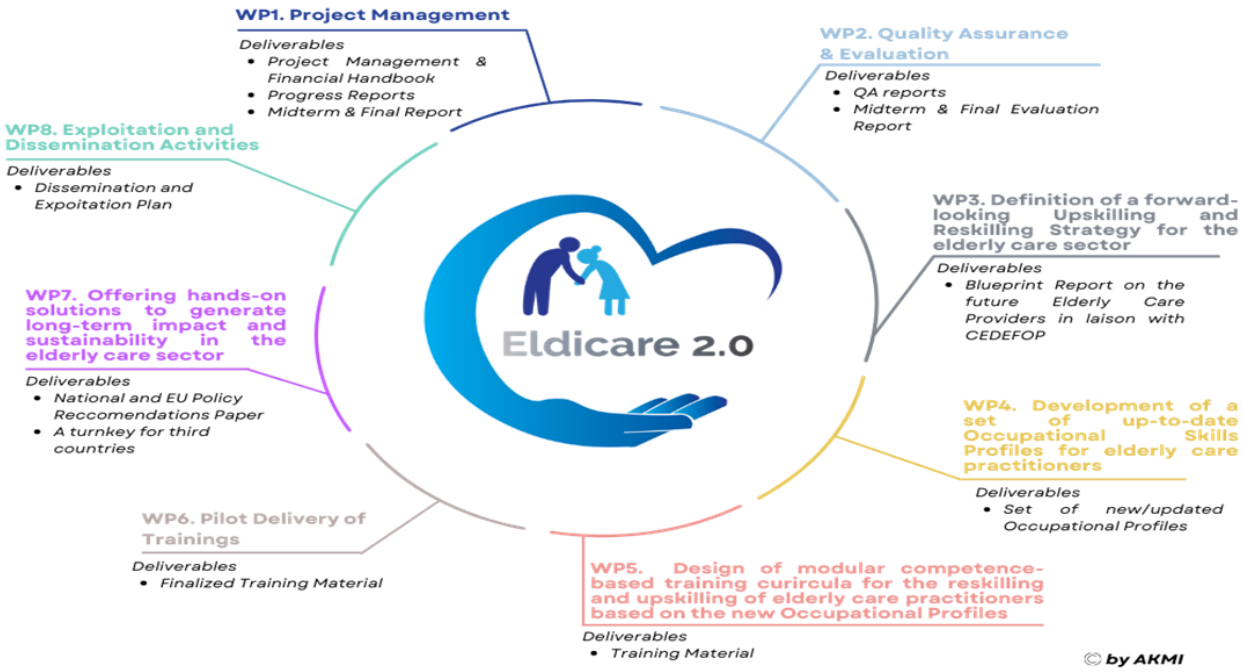
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- Bring together education actors (VET providers, HEIs) with market representatives and umbrella organisations, by mobilizing and incentivizing them to take action, in order to achieve a systemic and structural impact.
- Raise the quality and the attractiveness of training in the health care sector at a European, National, Regional and Local Level, by developing a common perception among the key stakeholders.

Concerning the most important expected results of the project, that Eldicare 2.0 is going to produce, during the project's lifespan, these are:

- Blueprint Report on the future older people care Providers
- Set of new/updated Occupational Profiles
- Finalized Training Material
- F2F and online trainings conducted
- MOOC Platform
- National and EU Policy Recommendations Paper
- A turnkey for third countries

In addition to the horizontal activities of WP1 – Project Management, WP2 – Quality Assurance & Evaluation and WP8 – Exploitation and Dissemination Activities, in Eldicare 2.0 these are some of the most important activities that are going to be implemented, according to the following work plan:



Target groups:

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- Sectoral Market representatives, including Nursing Homes, Community Homes and other services provided both Public and Private, covering also Social Economy: Their staff (medical or nursing) of all operations from Managers to Senior Social Care Givers, labor market associations with the intention to cover also informal carers, are also targeted, while we are going to target also the highly skilled staff and carers with more 20+ years of experience, with the intention to upskill them with modern competences 6

- Ageing related policy stakeholders, including the European Commission, European, Economic and Social Committee, Ministries of Labour, Health, Social Care, and Finance, Regional Authorities and Institutions, Pension Schemes and Associations.

- Educational providers, teachers, trainers, and staff of educational institutions, teaching associations, initial VET schools, or authorities responsible for education (EQF 3-7), are going to be able to enhance their collaboration with the market sector representatives and the relevant labour organisations, on how to adjust the current offered curricula to the changing needs of the skills and competences of the employed in the older people care Sector staff.

- Students and learners (VET and HEIs) who are going to have access to innovative new Curricula developed. On the other hand, unemployed, will also have access to continuous training and re-skilling opportunities.

1.3 WP4 Objectives

Work Package 4 aims to create a Skills Ecosystem for long-term care workforce by upgrading the existing and emerging Occupational Profiles with up-to-date and essential skills for the older people care practitioners and focusing on the principles of the digital and green economy, entrepreneurship and a person-centred care. Its core objectives are:

- To develop a long-term skills strategy for older people care professionals, to support the objectives of the health sector growth, by creating a Skills Ecosystem for older people care workforce.
- To upgrade the existing and emerging Occupational Profiles with up-to-date and essential skills for the older people care practitioners, by focusing on the principles of the digital and green economy, the entrepreneurship and a person-centred care
- To bring together education actors (VET providers, HEIs) with market representatives and umbrella organisations, by mobilizing and incentivizing them to take action, in order to achieve a systemic and structural impact.

The Work Package is divided in 2 tasks and 7 actions. In particular, the following tasks and actions have been included in the project:

T4.1 Identification of existing Occupational Profiles in the older people care sector that should be updated. - *MC, AKTIOS, BK, APSS, FNAQPA, LARES, OJAB, BLOCKS, Eurocarers, EAN, ESN, EVBB EVTA*

- A4.1.1: Identification of relevant existing occupational profiles at EU level (using ESCO)
- A4.1.2: Analysis of country-level needs in updating existing sectoral Occupational Profiles

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- A4.1.3: Final outlines of the Occupational Profiles to be re-designed or updated

T4.2 Drafting of the updated sets of Occupational Profiles – *All partners apart from ACQUIN*

- A4.2.1: Initial configuration of the set of Occupational Profiles via the organisation of country-level workshops
- A4.2.2: Development of the full set of Occupational Profiles
- A4.2.3: Validation of the produced Profiles via follow-up Workshops
- A4.2.4: Submission of updated Occupational Profiles for validation at the relevant National and EU Level Authorities

1.4 Structure of the Deliverable

The deliverable is organized into eight main sections, each building systematically from the contextual foundations of the project to the final set of validated, updated and newly developed occupational profiles.

The report opens with **Section 1: Introduction**, which outlines the purpose and context of the deliverable, provides an overview of the Eldicare 2.0 project, and clarifies the specific objectives of Work Package 4. It concludes with a description of the structure of the document to guide the reader through the subsequent sections.

Section 2: Methodological Framework details the approach used to analyze existing occupational profiles, select the national and EU profiles to be updated, and integrate findings from WP3 and WP4.1.1. This section also explains the alignment with ESCO, EU competence frameworks (DigComp, GreenComp, EntreComp), and the validation methodology involving national and EU-level stakeholders.

Section 3: Analysis of Existing Occupational Profiles at EU Level presents an overview and synthesis of relevant ESCO profiles. It includes a summary table of ESCO roles, EQF levels and key skills, followed by detailed summaries of ten selected ESCO occupational profiles. The section concludes with a cross-profile comparative analysis and recommendations for updating ESCO profiles where necessary.

Section 4: National-Level Occupational Profiles consolidates the national occupational profile analyses conducted by each partner country. For Greece, Bulgaria, Czechia, France, Spain and Austria, the section presents (a) summaries of the national profiles submitted, and (b) an integrated cross-profile analysis identifying common patterns, gaps and national priorities. The content reflects the diversity of national care systems while enabling cross-country comparability.

Section 5: Final Outline of Profiles to Be (Re)Designed explains the criteria used to select the six national and two EU occupational profiles for updating: cross-country relevance, sectoral impact, evidence of skills gaps, policy alignment and representation of different levels of responsibility. It then provides a short justification for each selected profile.

Section 6: Updated and New Occupational Profiles forms the core of the deliverable. It contains the eight fully developed profiles, each presented in a harmonized structure including role description, main tasks, required competences, training requirements, ESCO alignment and integration of digital, green and entrepreneurial skills. Profiles include roles from France, Greece, Austria, Czechia, Bulgaria and Spain, alongside two EU-level profiles.

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Section 7: Validation Process and Results presents the outcomes of the 18 national workshops—covering policy stakeholders, educational providers and labour-market representatives in each country—alongside the findings of the EU-level validation workshop. The section synthesizes stakeholder feedback, confirms areas of alignment, and explains how the insights were incorporated into the final profiles.

Section 8: Conclusions and Recommendations summarizes the overarching findings across all analyses and validation activities. It presents key conclusions regarding the state of occupational profiles in older people care across Europe, followed by strategic recommendations for policymakers, training providers, accreditation bodies and care organisations. The section closes with a final reflection on the contribution of the updated profiles to the European Care Strategy and broader workforce development efforts.

Finally, the **Annexes** provide comprehensive supporting materials, including the ESCO profiles table, all profile templates used in the project, national occupational profile documents, workshop agendas and documentation, and a comparative matrix aligning ESCO, WP3 findings, national profiles and the final updated profiles.

2. Methodological Framework

The methodological framework of the Work Package was initially developed in a document developed by AKMI and distributed to partners, which provided for the step by step guidelines to be followed, in order to successfully complete the Work package objectives. The methodology was structured around the Work Package Tasks and Actions, providing specific steps for each. In specific:

TASK 4.1 Identification of existing Occupational Profiles in the older people care sector that should be updated

The primary goal of the 4.1 task was to identify and analyze existing occupational profiles for older people care professionals at the EU level. Partners reviewed the European Skills, Competences, Qualifications, and Occupations (ESCO) database in order to understand its structure.

Action 4.1.1 Identification of relevant existing occupational profiles at EU level (using ESCO)

In particular, and based on the preliminary research conducted, the partners focused on the following profiles:

- 1343.1: older people care home manager - AKTIOS
- 1344.1: social services manager - OJAB
- 222: nursing and midwifery - FNAQPA
- 322: nursing and midwifery associate professionals. - LARES
- 2635.3.14: gerontology social worker - OJAB
- 3412.4.1: adult community care worker - BLOCKS
- 3412.4.2: care home worker - BLOCKS
- 3412.4.9: residential care home worker - BLOCKS
- 3412.4.11: residential home adult care worker - AKMI
- 3412.4.12: residential home older adult care worker - AKMI
- 5322.1: home care aide - APSS

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- 5322: Home-based personal care worker - APSS

In cases where during the course of the research some occupational profiles identified within ESCO may be classified as obsolete, or where new occupational profiles may be identified, partners were expected to conduct further desk research to explore how these profiles could be updated and made relevant to current industry needs. Thus, partners were expected to include in their research recommendations regarding the updating of the profiles. In this context, partners were based on several tools apart from ESCO, such as the Skills Panorama, EntreComp, DigComp2, GreenComp, European Skills Agenda, and Pact for Skills.

Partners were guided to identify all occupational profiles that are related to older people care. For each profile, the following details were recorded, using the template in the annexes section (ANNEX I):

- Profile Title
- ESCO Code
- Description of the Profile
- Skills and Competences Required
- Educational Requirements
- EQF Levels (if available)*

*The European Qualifications Framework (EQF) is a common reference framework developed by the European Union to promote understanding and comparison of qualifications across different European countries. It aims to facilitate the recognition of qualifications and promote mobility of learners and workers throughout Europe. The EQF was established to bridge the gaps between the various national education and training systems and promote lifelong learning opportunities. Key features and principles of the European Qualifications Framework (EQF) include:

- ***Levels of Qualifications:*** The EQF consists of eight levels, ranging from Level 1 (basic) to Level 8 (doctoral). Each level is defined by specific learning outcomes, competencies, and qualifications descriptors, allowing for easy comparison of qualifications across countries.
- ***Learning Outcomes:*** The EQF places a strong emphasis on learning outcomes, which describe what a learner knows, understands, and is capable of doing after completing a learning process. This focus on learning outcomes helps facilitate the recognition of competencies and skills attained in formal, non-formal, and informal learning settings.
- ***Lifelong Learning:*** The EQF promotes the idea of lifelong learning, acknowledging that learning and acquiring new skills can happen at various stages of life and through different learning pathways.
- ***Qualification Frameworks in Member States:*** Each European country aligns its national qualifications framework with the EQF, relating its own qualifications levels to the EQF levels. This process is known as referencing.
- ***Recognition of Prior Learning (RPL):*** The EQF encourages the recognition of prior learning, which means acknowledging and valuing knowledge, skills, and competencies gained through work experience, non-formal education, and informal learning.
- ***Transparency and Mobility:*** The EQF enhances transparency and mobility by providing a common language to describe qualifications. This facilitates the recognition of qualifications across European countries, making it easier for learners and workers to move between countries for study or work.
- ***European Credit System for Vocational Education and Training (ECVET) and European Credit Transfer and Accumulation System (ECTS):*** The EQF is

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complemented by ECVET and ECTS, which are credit systems that enable the transfer, recognition, and accumulation of learning outcomes and credits between different qualifications and educational institutions.

The implementation of the EQF and the referencing of national qualifications frameworks to the EQF have been significant steps in promoting harmonization, comparability, and mobility of qualifications across Europe. It has also contributed to the development of a European Area of Skills and Qualifications (EASQ) to support the needs of individuals, employers, and societies in a globalized world. There are several projects and initiatives related to EASQ, aiming to further support the goals of enhancing skills and qualifications recognition, promoting lifelong learning, and facilitating mobility within the European labour market.

European Quality Assurance in Vocational Education and Training (EQAVET) and European Credit System for Vocational Education and Training (ECVET) aimed to improve the quality of vocational education and training (VET) systems across Europe, by establishing a common quality assurance framework. These initiatives promoted mutual trust and transparency in VET qualifications, supporting the recognition and validation of VET qualifications within and between European countries and tried to create a common ground for the transfer, recognition, and accumulation of learning outcomes in vocational education and training, making it easier for learners to build upon their skills and qualifications acquired in different countries.

Partners had to select up to 20 skills, competences, and knowledge areas that they considered most important for the described occupational profile. To accurately identify these, they conducted thorough desk research.

As a next step, Metropolitan College, along with BK and the Umbrella Organisations, further searched for these profiles and analyzed the list of findings. In particular, Metropolitan College, based on the template provided from BK, implemented a comparative analysis with the identified ESCO profiles and the skills and competences documented in WP3, noting any matches, gaps, or discrepancies between the ESCO profiles and WP3 findings. The purpose of the comparative analysis was to highlight areas where the ESCO profiles do not fully capture the skills and competences identified in WP3, as these could indicate a need for updating or redesigning the profiles. This comparative analysis report is in the annexes section (ANNEX II).

The umbrella organisations reviewed the final findings and gave their feedback to Metropolitan College and BK regarding the profiles. Also, based on the discrepancies and gaps identified, they suggested which occupational profiles might need updating or redesigning. Based on ESCO classification and the feedback from the Umbrella Organisations, MC, along with BK developed the job role description template, that ensured the consistency for the (re)design of the new occupation profiles.

In particular, it was recommended that the job role description template to have the following information:

Job Title:
Job Code (ESCO Classification): May include more than one ESCO Codes
Job Overview: Provision of a brief summary of the job, its purpose, and how it fits within the organisation. This section should be a high-level overview that captures the essence of the role.

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Key Responsibilities: List the primary duties and responsibilities of the role. We should be specific about what the role entails and what is expected from the person in this position.

Required Skills and Competencies: Based on the ESCO classification, we are going to list the key skills and competencies needed for the role. This can include both technical skills and soft skills.

Qualifications: Specification of the educational background, certifications, and other qualifications necessary for the role.

Experience: Outlining of the amount and type of experience required. This can include previous job roles, specific industry experience, or exposure to certain tasks or challenges.

Working Conditions: Description of the working environment, including any specific conditions or requirements such as travel, physical demands, or shift work.

Career Path and Development: Provision of an overview of potential career progression opportunities from this role. This can also include information about professional development or further training.

Additional Information: We are going to include any other relevant information or special instructions that candidates might need to know.

This template (ANNEX III) served as a general guide that can be customized to fit the specific needs and characteristics of the job role. The aim was to ensure that the description is clear, comprehensive, and aligned with the ESCO classification.

Action 4.1.2 Analysis of country-level needs in updating existing sectoral Occupational Profiles

After the initial identification of the profiles, national partners and labour market representatives, under the guidance of Metropolitan College identified and compiled existing sector-specific Occupational Profiles at national level, using the relevant template distributed by MC (ANNEX IV). These reports were comprehensive, providing sufficient data for comparison with European profiles. Following the identification of the national profiles, Metropolitan College organized and scheduled a workshop involving national partners and relevant labor market representatives, to analyze the findings of the profiles identified in order to point out discrepancies, mismatches and correlation comparing them to the EU Occupational profiles. During the workshop, MC facilitated discussions, ensuring a clear agenda that focused on analyzing the identified sectoral Occupational Profiles. An overview of the European Occupational Profiles was provided, along with the methodology for comparison. In detail, National partners presented their National Occupational Profiles during the workshop. Using the provided templates, they compared these profiles with the European Occupational Profiles to identify discrepancies, mismatches, and correlations. The findings were documented systematically, with particular attention to areas where the national profiles may require updating.

Action 4.1.3 Final outlines of the Occupational Profiles to be re-designed or updated

As a final step of action 4.1, both the EU and the National Profiles that needed update or re-designing, were listed in a specific template, for the partners to have it as a guidance for the redrafting/update procedure. More specifically, partners came up with the final list of EU/National Occupational Profiles that need updating or redesigning. MC provided a specific template (ANNEX V) to use when redrafting or updating Occupational Profiles. This template includes the following key sections:

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General Coding: A unique identifier for each Occupational Profile. This code will be used to track and reference the profile across documents and systems.
Hyperlink: A direct link to the current version of the relevant ESCO Occupational Profile, if available online. This allows for easy access to the existing document for reference.
Title: The official title of the Occupational Profile, clearly indicating the profession or job role it describes.
Educational Background: A description of the minimum educational qualifications required for the occupation. This should include specific degrees, certifications, or other relevant educational criteria.
EQF/NQF Level: The European Qualifications Framework (EQF) and National Qualifications Framework (NQF – if it is available) level associated with the occupation.
Core Skills and Knowledge: A detailed list of the essential skills and knowledge required for the occupation.
Optional Skills and Knowledge: A list of additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.
Additional Sections (if applicable): Depending on the specific occupation, additional sections may be added to the template. These could include work experience requirements, professional certifications, or specific physical or cognitive abilities necessary for the role.

Using the template, partners updated or redesigned the Occupational Profile, ensuring that all sections were filled out accurately and comprehensively. The updated profile reflects the latest standards, skills, and knowledge required for the occupation. Metropolitan College ensured that the updates are consistent with European standards and that all required sections of the template have been completed.

TASK 4.2 Drafting of the updated sets of Occupational Profiles

The main aim of Task 4.2 was to develop the updated set of Occupational Profiles and submit them for validation at the relevant National and EU level Authorities. The first step is to configure the set of Occupational Profiles via the organisation of country-level workshops.

Action 4.2.1: Initial configuration of the set of Occupational Profiles via the organisation of country-level workshops

Under MC's guidance and facilitation, in each partnering country (Greece, Bulgaria, Czechia, France, Spain, Austria) 3 country-level workshops were organized:

-One with policy stakeholders
-One with educational providers
-One with market representatives of the caregiving sector.

Umbrella organisations assisted in finding stakeholders for the workshops, but partners focused first on national participants. In this context, each responsible stakeholder organized workshops for discussing what has to be developed, based on the identified European Occupational Profiles. Partnering stakeholders gathered information regarding the following, among others:

- Are the identified Occupational Profiles at the European level relevant to the country ones?

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- What are the skills and competences that similar or same country Occupational Profile require?
- What is the EQF/EQVET level of each Occupational Profile in country level (NQF)?
- Are there significant differences in the scope or focus of the profiles?
- What specific aspects of the European Occupational Profiles do not currently exist in the national profiles? How can these aspects be integrated into the national context?
- Do the European Occupational Profiles adequately reflect the current and future needs of the national labor market?
- Are there any country-specific factors, such as cultural or socioeconomic considerations, that should influence the adaptation of these profiles?

Through the implementation of these workshops, the partners aimed to verify – on a first level – the application of the identified Occupational Profiles in the labour market of their country. Each stakeholders' workshop was comprised by at least 5 participants/ stakeholders and was held either online or face to face. Partners created an agenda for the workshops and took photos during the workshops (having first obtained the consent of the participants). A template which described the duration, content and expected results was developed and shared within the partnership before the implementation of the workshops, based also on the findings from T4.1 (see ANNEX VI).

Action 4.2.2: Development of the full set of Occupational Profiles

Based on the results from the workshops conducted during A4.2.1, the consortium drafted the updated occupational profiles according to their country's needs. The template the partnership used is the one developed during A4.1.3 (ANNEX V). The new occupational profiles report includes also the methodology being followed in each country regarding the organisation of workshops and the collected input. The Umbrella Organisations took over the EU Profiles. All the implementing partners were involved in this procedure, since the drafting activity required a consensus from the labour market and the educational sector, about the skills' needs. The full set of the Occupational Profiles was developed, using the templates identified by ESCO and the recommendations of MC, for incorporating the national context in this template. 8 Occupational Profiles were updated/or redrafted (one in each implementing country and two at EU level).

For the development of the profiles, the partners were based on several tools apart from ESCO, such as the Skills Panorama, EntreComp, DigComp2, GreenComp, European Skills Agenda, and Pact for Skills. They conducted desk research on the aforementioned tools in order to identify a comprehensive view of the skills and competencies required across the older people care sector. These tools offered data-driven insights into labor market trends and skill demands across Europe. By integrating this information, the profiles were updated to reflect the latest trends, ensuring they are forward-looking and aligned with current market needs. Also, these tools provided strategic guidance on the skills needed for Europe's long-term competitiveness, social fairness, and resilience. Thus, the occupational profiles can be aligned with broader EU policy goals, ensuring they contribute to overarching economic and social objectives. By conducting desk research across these tools, partners tailored occupational profiles to better suit the specific needs of different countries and regions while maintaining consistency with EU standards.

Action 4.2.3: Validation of the produced Profiles via follow-up Workshops

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After having developed the full set of the Profiles, ESN along with all the Umbrella Organisations, organize a follow-up workshop with sectoral representatives and education partners, in order to validate the designed Profiles, according to:

- ESCO's 2 pillars: Occupations & knowledges/skills/competences (European Commission)[1]. This two-tiered structured approach enables ESCO to organize terminology for the European labor market and education/training sector in a consistent, transparent and usable way.
- older people care sector's needs,
- Educational systems of the different countries.

ESN took the lead in facilitating the follow-up workshop and was be responsible for preparing the meeting agenda. Umbrella Organisations, in collaboration with other participants, identified attendees. Incorporating the modifications and adaptations suggested by stakeholders, the workshop enabled the effective identification of relevant occupations and profiles. This process ensured the updating of the knowledge, skills, and competencies required for care professionals to meet the current and future demands of the aging and caregiving sectors (see ANNEX VII).

Action 4.2.4: Submission of updated Occupational Profiles for validation at the relevant National and EU Level Authorities

After fine-tuning the Occupational Profiles, the labour market partners will submit them in their relevant National Authorities, for a broader use of our results, while the Umbrella Organisations will submit them in the EU Authorities (i.e. ESCO, CEDEFOP, EU Skills Panorama, DG-EMPLOI).

3. Analysis of Existing Occupational Profiles (EU Level)

Work Package 4 analyzed **13 ESCO occupational profiles** relevant to older people care and compared them systematically with **WP3-identified future skills**, which include:

- Quality of service
- Problem solving
- Creativity
- Leadership/communication
- Financial awareness
- Soft skills (patience, empathy, adaptability, resilience)
- Digital skills for daily communication, animation, and administration
- Green skills (waste reduction, daily eco-practices, travel reduction)

[1] ***Occupations:*** *The ESCO occupations pillar is built on ISCO-08 which serves as the hierarchical structure for the occupations pillar. ISCO-08 provides the top four levels for the occupations pillar and ESCO occupations are located at level 5 and lower. In ESCO, each occupation is mapped to exactly one ISCO-08 code. Any occupation concepts relevant to the European labor market is allocated within this hierarchy.*
Knowledge, skills and competences: *The ESCO skills pillar distinguishes between i) skills/competences concepts and ii) knowledge concepts by indicating the skill type. There is however no distinction between skills and competences. Each of these concepts comes with one preferred term and a number of non-preferred terms in each of the 28 ESCO languages. Every concept also includes an explanation in the form of description. In ESCO v1 contains 13890 concepts and is organized in a full hierarchy.*

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- Entrepreneurial skills

Across all profiles, the analysis reveals:

Key Matches Across All Profiles

- Communication
- Empathy and emotional intelligence
- Problem-solving
- Quality-of-service orientation
- Teamwork and person-centred care

Key Gaps Across All Profiles

- Digital health/digital administration skills not explicit in ESCO, while WP3 emphasizes them strongly
- Green/sustainability skills missing or minimally referenced
- Entrepreneurial skills and financial awareness largely absent in ESCO
- EQF levels missing in several ESCO profiles, while WP3 includes no qualification guidance at all

Core Discrepancies

- ESCO focuses on current occupation-specific tasks
- WP3 focuses on future-oriented skills (innovation, sustainability, digitalization)
- Some ESCO profiles (e.g., 3412.4.9) are outdated/minimally described

Overall Recommendation

A future-skills update to all examined ESCO profiles is required to integrate system-level digital, green and entrepreneurial competences highlighted in WP3.

3.1 Summary Table of ESCO Profiles, EQF Levels, and Key Skills

ESCO Code	Title	EQF Level (where available)	Key ESCO Skills & Competences
322	Nursing & Midwifery Associate Professional (older people care Focus)	EQF 4–5	Clinical care, monitoring, infection control, digital health records, empathy, teamwork, hygiene, sustainable care
1343.1	Elderly Home Manager	Recommended EQF 6–8	Leadership, budget management, policy influence, quality assurance, risk analysis, communication
1344.1	Social Services Manager	EQF 6–7	Leadership, safeguarding, holistic care, data literacy, sustainability, systems thinking
2221.2	Nurse Responsible for General Care	EQF 6	Advanced clinical care, care planning, risk assessment, digital monitoring, palliative care

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ESCO Code	Title	EQF Level (where available)	Key ESCO Skills & Competences
2635.3.14	Gerontology Social Worker	EQF 6–7	Person-centred care, crisis intervention, digital literacy, systems thinking, sustainability
3412.4.1	Adult Community Care Worker	Recommended EQF 4	Person-centred care, independence promotion, legislation, safeguarding
3412.4.2	Adult Day Care Worker	Recommended EQF 4	Activity planning, social inclusion, personal care, monitoring, team coordination
3412.4.9	Residential Care Home Worker	Recommended EQF 4	Personal care, well-being monitoring, inclusion, safeguarding (inferred)
3412.4.11	Residential Home Adult Care Worker	EQF 3–4	Personal care, health monitoring, infection control, communication
3412.4.12	Residential Home Older Adult Care Worker	EQF 3–4	Personal hygiene, mobility, nutrition, social engagement, reporting
5322.1	Home care aide	Not specified	Person-centred care, assistance, record-keeping
5322	Home-based personal care workers	Not specified	Personal care, safeguarding, communication

3.2 Summaries of Each Profile

Below is a synthesized summary of each profile and its comparison to WP3.

PROFILE 322 — Nursing & Midwifery Associate Professional

ESCO Summary

A support-level nursing role focused on basic clinical and personal care for elderly people.

Key ESCO Skills

- Basic clinical skills
- Monitoring and observation
- Infection control
- Emotional support & empathy
- Digital health literacy (EHR)
- Sustainability in care settings

Comparison with WP3

✓ Strong matches: communication, empathy, problem-solving, quality of service
✕ Gaps: WP3 lacks clinical skills, infection control, digital health tools
✕ Discrepancy: WP3 emphasizes creativity and financial awareness, not emphasized in ESCO

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Overall Finding

Profile requires substantial augmentation with WP3's digital and green skills.

PROFILE 1343.1 — Elderly Home Manager

ESCO Summary

Manager responsible for operations, compliance, staff, budgets, and strategic planning in elderly homes.

Key Skills

- Leadership and staff supervision
- Budget and funding management
- Quality assurance
- Marketing and policy influence

Comparison with WP3

✓ Matches: leadership, communication, financial awareness, problem-solving
✗ Gaps: digital management skills, sustainability leadership
✗ Discrepancy: WP3 clearly includes green skills; ESCO omits them

Overall Finding

ESCO profile is strong on operations but weak on future-oriented skill sets.

PROFILE 1344.1 — Social Services Manager

ESCO Summary

Senior manager overseeing social services, policy implementation, and cross-sector collaboration.

Notable Competences

- Systems thinking
- Data literacy
- Sustainability & ethical decision-making
- Holistic care

Comparison with WP3

✓ Matches: leadership, financial awareness, creativity
✓ ESCO has more advanced digital, green, and strategic skills
✗ WP3 provides only operational sustainability, while ESCO includes political agency & futures thinking

Overall Finding

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This is the most advanced of all profiles and already strongly aligned to WP3 future skills, but still lacks entrepreneurial dimensions.

PROFILE 2221.2 — Nurse Responsible for General Care

ESCO Summary

Clinical nurse responsible for full-cycle geriatric care.

Key Competences

- Advanced clinical care
- Evidence-based practice
- Digital health monitoring
- Mentoring junior staff
- Palliative & rehabilitative care

Comparison with WP3

✓ Matches: quality, leadership, problem solving
✗ WP3 lacks explicit clinical skills and risk management
✗ ESCO includes digital health and monitoring technologies not reflected in WP3

PROFILE 2635.3.14 — Gerontology Social Worker

ESCO Summary

Social worker specializing in ageing, biopsychosocial assessments, and holistic care planning.

Key Skills

- Case management
- Crisis intervention
- Digital literacy (privacy, data creation)
- Systems thinking & sustainability

Comparison with WP3

✓ Strong alignment: empathy, communication, leadership
✗ WP3 lacks detailed sustainability (systems thinking, political agency)
✗ ESCO includes privacy and digital governance not present in WP3

PROFILE 3412.4.1 — Adult Community Care Worker

ESCO Summary

Provides support for adults living in the community, focusing on independence and safety.

Gaps Identified

- Digital skills missing

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- No sustainability skills
- No entrepreneurial/financial skills

PROFILE 3412.4.2 — Adult Day Care Worker

ESCO Summary

Facilitates group activities and daytime care.

Comparison

✓ Soft-skill alignment strong
✗ No digital/green/entrepreneurial content
✗ Missing EQF

PROFILE 3412.4.9 — Residential Care Home Worker

Special Note

Profile described as **obsolete and minimal** in ESCO.

Findings

- Lacks detailed responsibilities
- Missing digital, green, entrepreneurial skills

PROFILE 3412.4.11 — Residential Home Adult Care Worker

Key ESCO Skills

- Personal care
- Infection control
- Emotional support
- Basic healthcare knowledge

Gaps

- Digital skills only proposed, not defined
- No green skills
- No entrepreneurial skills

PROFILE 3412.4.12 — Residential Home Older Adult Care Worker

Key Skills

- Hygiene, nutrition, mobility support
- Monitoring and reporting
- Teamwork, emotional support

Gaps

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- Digital skills only optional
- Green skills missing
- Entrepreneurial and financial skills absent

PROFILE 5322.1 — Home Care Aide

A support-level home-care role offering daily personal assistance to older adults and individuals with disabilities. Tasks include hygiene support, feeding, home maintenance, companionship, mobility support and promoting safe living at home.

Key ESCO Skills

- Hygiene and ADL support
- Basic health monitoring
- Household tasks & meal preparation
- First response & basic emergency support
- Maintaining safe home environments
- Emotional support and companionship
- Optional: healthy lifestyle advice, isolation prevention
- Optional: task organisation and community support

Comparison with WP3

✓ **Strong matches:** personal care, communication, empathy, monitoring, social activation
✕ **Gaps:** ESCO profile lacks digital competences (documentation, secure communication, scheduling tools)
✕ **Gaps:** green competences (energy-efficient routines, safe chemical use, eco-practices)
✕ **Discrepancy:** WP3 highlights problem-solving, stress management and initiative, largely absent in ESCO
✕ **Missing:** ethical standards, GDPR/data protection, and structured organisational skills

Overall Finding

The ESCO Home Care Aide profile is functional but narrowly task-based. To align with WP3 evidence and EU priorities, it requires significant enhancement in digital skills, sustainability competences, ethical standards and entrepreneurial/organisational skills, as well as clearer EQF-level guidance.

PROFILE 5322 — Home-Based Personal Care Workers

A frontline social-care role providing personal assistance, household support and emotional care to older adults and individuals with disabilities in their homes. Responsibilities include hygiene assistance, mobility support, meal preparation, basic therapeutic tasks, monitoring and reporting, housekeeping and companionship.

Key ESCO Skills

- Personal and basic therapeutic care

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- Mobility assistance and safe handling
- Monitoring, reporting, record-keeping
- Emotional and psychosocial support
- Household management & meal preparation
- Digital communication and remote coordination (telecare)
- Sustainable household routines (eco-cleaning, waste sorting)

Comparison with WP3

✓ **Strong matches:** empathy, communication, autonomy support, activation, service quality
✕ **Gaps:** digital skills (EHR, telecare, secure communication) not covered in ESCO
✕ **Gaps:** green competences (resource efficiency, eco-routines) absent in ESCO
✕ **Discrepancy:** ESCO emphasises domestic/physical tasks; WP3 stresses digital readiness, sustainability and initiative
✕ **Missing:** organisational and administrative competences included in WP3 (scheduling, documentation, GDPR)

Overall Finding

The ESCO profile requires substantial reinforcement to reflect the digital, green and organisational competences identified in WP3. Updates should also clarify EQF levels, integrate ethical standards, and better capture the relational and autonomy-supporting nature of home care.

3.3 Cross-Profile Comparative Findings

Strongest Convergence with WP3

- Communication, empathy
- Problem solving
- Leadership
- Quality-of-service orientation

These exist across **all ESCO profiles**.

Largest Gaps

Skill Group	Gap Summary
Digital Skills	ESCO rarely includes digital tools, except clinical settings; WP3 expects universal digital engagement for communication, animation, and administration
Green Skills	Almost completely absent in ESCO; WP3 emphasizes waste reduction and sustainability

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Skill Group	Gap Summary
Entrepreneurial Skills	Financial awareness & creativity appear only in WP3
Soft Skills	Building collaboration with families and informal carers for a more integrated provision of LTC.
EQF Level Specification	Missing for many ESCO care worker profiles
Innovation Orientation	Strong in WP3, weak in ESCO

3.4 Recommendations for Updating ESCO Profiles

Add WP3 Future Skills

- Digital communication & record-keeping
- Sustainable care practices
- Building collaboration with families and informal carers for a more integrated provision of LTC.
- Entrepreneurial & financial literacy
- Creativity & innovation

Update EQF Levels Consistently

Introduce standard EQF guidance across all care roles.

Integrate Cross-Cutting Competences

- Resilience and adaptability
- Systems thinking (already present in managerial profiles)

Strengthen Digital Health Content

Especially for roles increasingly relying on telecare.

3.5 Conclusion

This comparative review shows a **systematic misalignment** between **current ESCO occupational definitions** and **future-oriented workforce needs** identified in WP3. While ESCO profiles accurately represent existing occupational requirements, they lack:

- Digitalization readiness
- Sustainability/green competences
- Soft Skills – contact and collaboration with families
- Entrepreneurial problem-solving

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- Innovation-oriented leadership

To modernize ESCO for the ageing-care sector, these cross-cutting future competences should be incorporated into all profiles.

4. National-Level Occupational Profiles

This section incorporates an overview of the National Occupational Profiles, as developed by partners in their national context. The profiles were initially developed in the template provided in ANNEX IV.

4.1 Greece

4.1.1 Summary of the National Occupational Profile: Personal Care Attendant

The **Personal Care Attendant (Επιμελητής Προσωπικής Φροντίδας)** is the only officially recognized national occupational profile in Greece specifically linked to older people care, as certified by **EOPPEP**, the national authority for qualifications and vocational guidance. It is positioned at **NQF Level 3** and is designed to support vulnerable populations—primarily older adults and individuals with disabilities—who lack full self-sufficiency and require structured assistance to remain safely and independently in their own homes. This role aims to prevent social isolation, institutionalization, and deterioration of quality of life by providing essential daily-living support within community and household environments.

Although the profile overlaps partially with ESCO's *home-based personal care worker* (5322, 5322.1), it does **not align** with broader care roles such as elderly home manager, nursing associate, social worker, or residential care worker, as the Personal Care Attendant is **exclusively home-care oriented**. The EOPPEP notes that an eventual expansion into institutional settings may occur, but this has not yet been formalized.

Scope of Work

The Personal Care Attendant provides a broad range of **primary social care services** within the service user's home. These include:

- Support with **personal hygiene**, grooming, and dignity-related routines.
- Maintaining **cleanliness** and safety in the living environment.
- **Food preparation, supply, and dietary support**, including basic nutrition knowledge.
- Managing **outside tasks** such as shopping, bill payments, or transporting goods.
- Enabling **social, cultural, and religious participation**, reducing isolation and supporting community integration.

Skills and Competence Framework

The occupational profile outlines a detailed skill set divided into **general**, **specific**, and **other competences**:

General Competences

Attendants must have basic abilities in communication, information handling, counselling, psychosocial support, personal data protection, time management, and

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assessment of the home environment. They also need foundational practical knowledge in domestic equipment use, cooking, food preservation, health and safety, first aid, basic entrepreneurship, and legal transactions.

Specific Professional Competences

These include:

- Identifying and using appropriate hygiene equipment and materials.
- Applying principles of hygiene and nutrition according to individual needs.
- Assessing and responding to daily living requirements.
- Ensuring safe mobility and supervising the person served.
- Following medical or nursing instructions related to hygiene and safety.
- Understanding workplace hierarchy and organisational structures.

Other Competences

Core behavioural skills include listening and observation, supportive communication, initiative, self-management, social sensitivity, manual dexterity, and the ability to understand spatial arrangements. Basic language and numeracy skills are required.

Educational Requirements

A secondary education diploma is *recommended but not mandatory*. This underscores the low entry threshold compared to equivalent European profiles, which typically require structured vocational training.

Key Observations and Future Recommendations

The Greek national profile is **narrowly defined**, focused almost exclusively on home care, and lacks differentiated roles for other care settings such as residential facilities or day centres. Recommendations include:

- Creating **separate occupational profiles** for home care, institutional care, and day-care services.
- Establishing **career progression pathways** (Level 3 → Level 4 → Level 5+).
- Introducing **digital skills** for scheduling, communication, and basic e-health tools.
- Strengthening **psychosocial and dementia-specific competences**.
- Enhancing **interdisciplinary teamwork** education and cultural/language awareness.
- Implementing **mandatory certification** and creating a **national registry** of care workers to improve quality, mobility, and professional recognition.

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4.2 Bulgaria

4.2.1 Summary of the National Occupational Profile: Healthcare Assistant

The **Healthcare Assistant ("Здравен асистент", NAVET code: 723010)** is an officially regulated elderly-care profession in Bulgaria, developed under the Ministry of Education and Science and the National Agency for Vocational Education and Training (NAVET). It is among the most structured vocational care profiles in the country and corresponds closely to ESCO roles focused on direct personal care support. According to the national framework, the Healthcare Assistant completes specialized vocational education after secondary school and performs a broad spectrum of health-related, social, and rehabilitative tasks under the supervision of medical and other professionals.

Role Scope and Professional Context

Healthcare assistants work across a variety of settings including:

- active treatment hospitals,
- post-treatment and rehabilitation centres,
- medical-social institutions for long-term accommodation,
- community-based services,
- hospices,
- and at-home care environments.

Their primary responsibility is to **support physicians, nurses, and other specialists** by delivering direct care that improves the patient's physical, psychological, and social well-being. The role is fundamental to Bulgaria's long-term care system, filling the operational gap between informal carers and licensed nursing staff.

Healthcare assistants contribute to preventive health activities, assist during treatment and recovery, and ensure continuity of basic care across hospital and home contexts. Their work is holistic, covering hygiene support, nutrition and feeding assistance, mobility, elimination, rest, psychosocial support, and ongoing monitoring tailored to the individual's condition.

Core Responsibilities

Typical duties include:

- Assisting with **personal hygiene**, dressing, grooming, and comfort measures.
- Supporting **nutrition and hydration**, preparing and serving meals aligned with medical guidance.
- Helping with **medication intake** under supervision.
- Monitoring **vital signs**, observing patient behaviour, and recognizing risk situations.
- Supporting **mobility**, positioning, safe transfers, and breathing exercises.
- Applying **infection control** procedures, sterilization, and equipment maintenance.

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- Organizing medical materials, maintaining safe environments, and ensuring compliance with hygiene standards.
- Providing emotional support, communication, and psychosocial encouragement.
- Responding to emergencies within their scope and alerting clinicians as required.

The role emphasizes both interpersonal qualities (empathy, patience, resilience) and adherence to ethical and confidentiality standards.

Skills and Competence Requirements

The national profile outlines a wide, structured competence framework:

General Professional Skills

- **Safety and hygiene** in the workplace and proper use of protective equipment.
- **Risk assessment** and prevention of health hazards.
- **Effective communication**, teamwork, and accurate record-keeping.
- **Basic digital skills**, including email, documentation, and medical software.
- Knowledge of **labour law**, healthcare organisation, and market principles.
- Competence in handling **medical and office equipment**.

Healthcare-Specific Skills

- Understanding healthcare **standards and ethics**.
- Knowledge of basic **anatomy, physiology, pathology**, and medical terminology.
- Ability to manage **critical situations** and provide initial first aid.
- Applying **aseptic and antiseptic practices**, sterilization, and infection prevention.

Specialized Competences

- Caring for patients with different levels of independence, including bedridden individuals and children.
- Supporting clinical procedures in surgery, orthopedics, oncology, and emergency care.
- Using equipment, recognizing malfunctions, and preparing instruments.
- Supporting psychosocial adaptation and social integration.

Personal Competences

Empathy, patience, responsibility, stress management, ethical conduct, and emotional maturity are considered essential personal qualities.

Training and Qualification Level

Healthcare assistants complete **specialized vocational training after secondary education**, typically earning a **third-level vocational qualification** (out of four in

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Bulgaria). Although Bulgaria does not formally link this to an NQF level, the description of this qualification level corresponds to the ability to perform complex activities, adapt to variable conditions, and take responsibility for others' work.

Alignment with ESCO

The profile aligns strongly with ESCO roles involving direct personal care (healthcare assistant, care home worker, home-based personal care worker) and partially with nursing associate professionals. It does **not** align with managerial or social-work-focused ESCO profiles.

4.2.2 Summary of the National Occupational Profile: Caregiver

The **Caregiver ("Болногледач", NAVET code: 723020)** is a formally recognized Bulgarian elderly-care profession regulated by the Ministry of Education and Science through NAVET. Positioned at **NQF Level 3 / EQF Level 3**, the caregiver plays a crucial role in supporting medical professionals and healthcare assistants across hospitaland home-care settings. The profile focuses on **daily living support, hygiene, mobility, and basic health monitoring**, with additional responsibilities in psychosocial support and adaptation during illness or recovery.

Professional Scope and Role Context

Caregivers work in hospitals, rehabilitation centres, social care homes, residential care for older adults, and private home-care environments. Their primary purpose is to enhance the patient's physical and emotional comfort, supporting holistic well-being. They contribute significantly to continuity of care by providing essential medical and non-medical services under professional supervision.

The caregiver works closely with nurses, midwives, rehabilitators, doctors, and healthcare assistants. Their role includes monitoring basic health parameters, supporting therapeutic routines, and responding to patient needs in dynamic clinical and social contexts.

Core Responsibilities

Caregiver duties focus on routine care, safety, and patient comfort:

- Assisting with **hygiene**, grooming, bathing, dressing, and elimination.
- Supporting **mobility**, transfers, physical comfort, and safe movement.
- Monitoring **vital signs** and identifying hypo-/hyperthermia or blood pressure deviations.
- Ensuring proper **nutritional support**, hydration, and feeding assistance.
- Maintaining **cleanliness**, disinfection, and hygiene prevention protocols.
- Supporting **rest**, sleep routines, and recreational wellbeing.
- Providing **basic psychosocial support**, reassurance, and communication with families.
- Assisting with preoperative preparation and care for individuals with chronic or infectious diseases.
- Taking appropriate action during emergencies and alerting health professionals.

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- Recording observations and contributing to the implementation of care plans.

Caregivers also support vulnerable groups, including patients with chronic conditions, disabilities, mental health difficulties, terminal illnesses, and children of various ages. Their work requires ethical conduct, confidentiality, respect for diversity, emotional stability, and patience.

Skills and Competence Requirements

General Skills

- **Workplace safety**, occupational hygiene, environmental protection, risk management.
- **Entrepreneurial awareness**, basic understanding of economic and organisational processes.
- **Communication**, teamwork, and foreign-language use relevant to healthcare.
- **Digital literacy**, including processing and sharing information using ICT tools.
- **Task organisation**, scheduling, and workflow planning.

Healthcare-Specific Skills

- Knowledge of **healthcare systems**, social services, and relevant legislation.
- Application of **medical ethics** and respectful patient relationships.
- Ability to maintain **hygiene**, prevent infections, and adhere to disinfection protocols.
- Understanding of **human anatomy and physiology** (main bodily systems) and recognizing key symptoms.
- Capability to deliver care tailored to mobility, nutrition, rest, and daily functioning.

Specialized Skills

- Support for patients with oncological conditions**,** terminal illnesses, mental disorders, or special needs.
- Assistance with rehabilitation, comfort measures, and end-of-life care.

Education and Qualification Level

Caregivers complete **specialized vocational training** after the first phase of secondary education (minimum age 16). They receive **NQF Level 3 / EQF Level 3** recognition.

Alignment with ESCO

Aligned: Nursing and midwifery associate professionals (322), care home workers (3412.4.x), and home-based personal care workers (5322, 5322.1).
Partially aligned: Nursing and midwifery (222).
Not aligned: Managerial ESCO roles and social worker roles.

Overall, the profile strongly matches ESCO caregiving roles focused on daily care, hygiene, mobility, and basic health monitoring.

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4.2.3 Summary of the National Occupational Profile: Social Assistant – Assistance for Adults

The **Social Assistant - Assistance for Adults ("Социален асистент", NAVET code: 7620402)** is a regulated profession within Bulgaria's caregiving services sector. It focuses on **integrated social and healthcare support** for adults who are vulnerable due to disability, chronic illness, advanced age, or social isolation. Operating at **NQF Level 3 / EQF Level 3**, the Social Assistant is positioned at the intersection of practical care/daily life support, social participation support, emotional support, and enabling access to services.

Role Purpose and Work Settings

The Social Assistant supports people in home environments, community settings, and institutional contexts. The profession is designed to improve the **physical, emotional, social, and functional wellbeing** of adults with complex support needs. This includes the older adults, individuals with sensory or physical disabilities, intellectual disabilities, chronic illnesses, and those living alone.

Unlike healthcare-focused roles, the Social Assistant emphasizes **social inclusion, communication, daily-life management, emotional stability, and crisis support**. A core function is helping individuals maintain independence and remain connected to their communities.

Key Responsibilities

The Social Assistant performs a wide range of tasks:

- Supporting **daily activities** such as dressing, hygiene, meal preparation, home organisation, and mobility.
- Facilitating **social participation**, cultural engagement, maintaining friendships and community links.
- Providing **emotional support** during crises (bereavement, illness, violence, separation).
- Accompanying clients to **social, healthcare, administrative, or educational institutions**, offering assistance with paperwork.
- Assisting with **bill payments**, purchasing essential items, acquiring medical devices, or securing social services.
- Helping with **home rehabilitation**, therapeutic nutrition, prescribed health regimens, and recovery from illness.
- Reporting health deterioration, emergencies, or signs of abuse to professionals or guardians.
- Maintaining documentation, coordinating with doctors, and ensuring safety and confidentiality.

The role requires loyalty, tolerance, empathy, patience, and emotional stability. Social Assistants protect client property, follow ethical guidelines, and prioritize wellbeing during work hours.

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Competence Requirements

General Skills

- **Workplace hygiene** and health and safety protocols, including environmental protection.
- **Economic and entrepreneurial awareness**, understanding basic market principles.
- **Organisational abilities** and responsibility for quality of work.
- Effective **communication**, teamwork, and foreign-language skills.
- **Digital literacy**, including creation, communication, and security of digital information.

Elderly and Social Care Skills

- Delivering **integrated social/healthcare support**, including home-based care for chronic conditions.
- Recognizing signs of illness, applying **aseptic techniques**, and preventing infection.
- Using assistive devices and understanding social service standards.
- Knowledge of legal and professional requirements governing adult social services.

Training and Qualification

Training is provided through **specialized vocational education** following the first phase of secondary schooling (minimum age 16). The qualification corresponds to **NQF Level 3 / EQF Level 3**.

Alignment with ESCO

Aligned: Social care worker (3412.4), gerontology social worker (2635.3.14), and adult community care worker (3412.4.1).
Partially aligned: Residential care worker roles and home-based care roles (5322 / 5322.1).
Not aligned: clinical or managerial ESCO roles.

The Social Assistant profile sits closest to ESCO roles focusing on integrated daily care, with an emphasis on daily-life support, social integration, and emotional care rather than medical tasks. The profile does not align well with the exclusive social worker roles (that exclude the support of the physical well-being of service users) and the ones that are managerial in essence.

4.3 Czechia

4.3.1 Summary of the National Occupational Profile: Caregiver (Czech Republic)

The **Caregiver (Pracovník v sociálních službách)** is a formally regulated profession within the Czech Republic's social services system, overseen by the Ministry of Labour and Social Affairs. It is legally defined by **Act No. 108/2006 Coll. on Social Services** and further detailed through qualification standards within the National Pedagogical Institute (code 75-

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015-H). This role constitutes one of the core frontline professions in Czech social care, providing **direct support to clients in residential facilities, outpatient services, and home-based care environments**. The caregiver's main purpose is to promote autonomy, dignity, and social wellbeing among vulnerable individuals—including older adults, persons with disabilities, and clients requiring long-term social support.

Role Scope and Settings

Caregivers work across several key contexts:

- Residential social services facilities (e.g., homes for seniors, homes for persons with disabilities)
- Community and outpatient services
- Support delivered directly in clients' homes

The profession has a strong **activation and social inclusion focus**, combining practical daily-living assistance with psychosocial support, basic educational activity, and foundational social counselling under the supervision of qualified social workers.

Core Responsibilities

The caregiver provides **direct, hands-on assistance** to clients who need help with daily functioning. Responsibilities include:

- Assisting with **personal hygiene**, grooming, dressing, and use of assistive devices
- Supporting **self-sufficiency** and client skill development
- Helping maintain **cleanliness**, order, and safe living conditions
- Promoting **client activation**, including motor-skills training, meaningful activities, and basic educational elements
- Supporting **social participation**, communication with family and institutions, and maintaining societal contact
- Observing client needs and conducting **basic social screening**, reporting to social workers
- Providing basic **non-clinical counselling** and supporting psychosocial needs
- Helping manage everyday problems and navigating community services

This role is non-medical: **caregivers do not administer medications nor perform nursing tasks**, distinguishing the position from healthcare assistant or nursing associate professions.

Skills and Competence Requirements

Czech legislation does not list explicit skills, but competence requirements are inferred from job functions and qualification standards. Caregivers must be able to:

- Establish supportive, trusting **relationships with clients**
- Encourage **independence**, motivation, and skill development
- Respond to diverse and individualized needs of different target groups

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- Organize and manage **basic care tasks** and plan daily routines

These competencies reflect a blend of social care, communication, and practical living-support skills rather than specialized health capabilities.

Training and Qualification Requirements

To work as a caregiver, individuals must:

1. **Have at least basic education**, and
2. **Complete an accredited qualification course within 18 months of employment**

Until the course is completed, workers may perform tasks only under the supervision of an already-qualified caregiver. The mandated training is defined by Decree No. 505/2006 Coll. and includes **a minimum of 150 hours**, divided into general and special components. Employers must provide **annual continuing education (minimum 24 hours)** to maintain qualification.

General Training Topics Include:

- Quality standards in social services
- Communication skills, assertiveness, alternative communication
- Psychology, psychopathology, somatology
- Basics of health protection
- Ethics, dignity, human rights
- Prevention of dependency on social services
- Social-legal minimum
- Methods of social work

Special Training Topics Include:

- Basics of hygiene and care for clients with chronic or infectious diseases
- Activation and leisure-time pedagogy
- Prevention of abuse or maltreatment
- Household-care instruction
- Crisis intervention
- Introduction to disability
- Techniques for safe responses to challenging behaviour and gentle self-defence
- Practical field training

Alignment with ESCO

The profile aligns **most closely** with caregiving and residential care roles:

- **3412.4.2, 3412.4.9:** Care home / Residential care home worker

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- **3412.4.1:** Adult community care worker (partial)
- **3412.4.11, 3412.4.12:** Residential workers for adults and older adults
- **5322 / 5322.1:** Home-based personal care worker / Home care aide

It does **not** align with clinical, managerial, or professional social worker roles.

Recommendations for Change

Stakeholders (APSS) propose:

- Extending qualification course from **150 → 200 hours**, with **24-hour basic module, a 120-hour universal module, and a 48-hour specialisation module**Updating course content to include **digitization, individualized care, and prevention of risky behaviour**
- Strengthening requirements for lecturers
- Developing a **standardized national methodology** and unified examinations
- Enhancing lifelong learning pathways and specialized short courses for continuous upskilling

These updates would modernise caregiver training to reflect evolving demands in social care, especially in elderly services.

4.3.2 Summary of the National Occupational Profile: Nurse in Social Services (Czech Republic)

The Nurse in Social Services is a health professional working within residential social services facilities, with the scope of practice regulated by the Ministry of Health under Act No. 96/2004 Coll. and Decree 55/2011. Although nurses commonly perform their work in these settings, the role of "nurse in social services" is not formally defined as a distinct profession in Czech legislation. It is based on the competencies of a general nurse, applied in non-medical institutional environments where clients are accommodated for social rather than medical reasons.

The central mission of a nurse in social services is to provide **comprehensive nursing care** to insured persons who are accommodated in institutions primarily for social—not medical—reasons. Unlike caregivers or social assistants, this role includes **independent clinical decision-making**, nursing diagnostics, and specialized procedures, all performed in accordance with a physician's diagnosis but usually **without direct supervision**.

Professional Role and Responsibilities

Nurses in social services deliver both basic and advanced nursing care, combining clinical practice, patient education, and medical-social counselling.

Key responsibilities include:

- **Implementing the nursing process** based on a physician's diagnosis, including planning and evaluating individualized care.

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- Conducting **nursing assessments**, including determining self-sufficiency levels, identifying diseases or risk factors, and using standardized measurement tools (pressure ulcer risk, pain scales, nutritional assessments).
- Monitoring and evaluating **physiological functions** such as blood pressure, pulse, temperature, respiration, and other clinical parameters.
- Documenting observations and care in **medical records**.
- Performing **basic diagnostic testing**, including non-invasive biological sampling and capillary blood testing through semi-quantitative methods.
- Evaluating and managing **skin integrity disorders**, chronic skin damage, and wound conditions.
- Training patients in **self-care**, rehabilitation routines, and functional independence.
- Providing **health and lifestyle education** to patients, relatives, and caregivers.

Nurses in social services thus serve as the clinical core of social care teams, bridging the gap between social support and medical expertise in facilities that house older adults or persons with reduced self-sufficiency.

Competence and Skills Requirements

The competencies of a nurse in social services align with the national scope of practice for general nurses. They include:

Core Clinical Competences

- Delivering **basic and specialized nursing care** independently.
- Monitoring and interpreting clinical signs.
- Assessing patient health status.
- Performing semi-invasive or non-invasive procedures (e.g., blood tests using diagnostic strips).

Extended Competences

Performed **under professional supervision**, including:

- Infusion insertion.
- Removal of sutures or drains.
- Selected chronic wound care procedures.
  These activities reflect higher clinical responsibility than caregiving roles.

Educational Requirements

To work as a nurse (including in social services), individuals must complete:

- A **three-year accredited bachelor's degree in nursing**, *or*
- A **three-year certified general nursing program** in a higher medical school.

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Lifelong learning is mandatory: nurses must regularly attend courses, seminars, and further training. Failure to comply may result in fines or loss of registration.

Alignment with ESCO

The role aligns with ESCO primarily in relation to **hands-on personal care in institutional settings**, such as:

- Home-based personal care worker (5322) - It may be related in term of specialized nurse for home care or community care
- Nursing and midwifery (222) – This code is related to the profession of general nurse. It covers a wide range of skills, including basic and specialized nursing care.

However, ESCO categories for **nurses (222, 322)** do not fully match Czech practice, as they do not capture the unique hybrid context of nursing within social services.

Key Observations and Systemic Challenges

- The profession "nurse in social services" is **not formally defined** in Czech law, making classification and international comparability difficult.
- The Czech qualification system is multi-tiered, and nurses' roles depend heavily on education level, clinical specialization, and continuous training.
- Nurses require employer support for lifelong learning to maintain up-to-date competencies.

Recommendations for Change

The main professional recommendation is to **expand the competencies** of specialist nurses in social services, enabling greater autonomy and reducing dependence on physician approvals. Areas for expanded authority include:

- Home-care nursing
- Rehabilitation and gerontological care
- Chronic wound management
- Ostomy and continence care
- Palliative care

A second major recommendation is to introduce **limited prescribing authority** for nurses—covering both performance codes and material prescriptions (e.g., wound dressings, incontinence aids). This would decrease administrative burdens and align Czech practice with international nursing standards.

4.3.3 Summary of the National Occupational Profile: Social Worker (Czech Republic)

The **Social Worker (Sociální pracovník)** is a core profession within the Czech social support system, legally defined by **Act No. 108/2006 Coll. on Social Services**. It is a highly professionalized role requiring formal tertiary-level education and continuous lifelong learning. Social workers operate in a wide array of settings—municipalities, regions, social service facilities, community centres, hospitals, NGOs, and specialized

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programmes—providing comprehensive support to individuals, families, groups, and communities facing complex social challenges. Their work is systemic, preventive, analytical, and intervention-oriented, making them key agents in ensuring social inclusion and social cohesion across society.

Scope of Work and Core Mission

The social worker's mission is to **assess social needs**, provide social and legal counselling, help resolve crisis situations, support vulnerable populations, and coordinate services. They perform **social investigations** and map the social situation of clients to propose effective solutions that promote integration, independence, and improved quality of life.

Key activities include:

- Conducting **social surveys**, diagnostic assessments, and analyses of social conditions.
- Providing **social and legal counselling**, including guidance on benefits, rights, and entitlements.
- Solving social and legal problems within institutions and community settings.
- Delivering **crisis assistance**, social rehabilitation, and intervention for individuals at risk of social exclusion.
- Coordinating **social services** across municipalities and regions.
- Performing **screening activities**, including active outreach to vulnerable groups.
- Contributing to methodological and conceptual work, developing strategies, and collaborating with institutions.

Social workers address a wide range of client issues: poverty, unemployment, disability, addiction, family dysfunction, conflict, homelessness, aging, and chronic illness. Their work is both preventive and responsive, integrating direct client support with advocacy, policy influence, and community impact.

Skills and Competence Requirements

Although Act 108/2006 does not explicitly list skills, the required competence profile can be derived from qualification rules and job responsibilities. Broadly, a social worker needs to possess:

1. Professional Skills

- Ability to conduct comprehensive **social investigations** and assessments.
- Knowledge of **social legislation**, rights, benefits, and regulations.
- Ability to analyze client needs, propose interventions, and manage complex cases.
- Competence in **documentation**, planning, and case management.

2. Soft Skills

- **Empathy**, ethical behaviour, and emotional intelligence.
- Strong **communication** skills and negotiation abilities.

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- Crisis management, de-escalation, and conflict resolution.

3. Professional Competencies

- Development and monitoring of **individual support plans**.
- Coordination across institutions (healthcare, social services, education, police, NGOs).
- Methodological and conceptual work, reflecting current social challenges.
- Capacity to work independently and within multi-professional teams.

The role requires substantial analytical thinking, social sensitivity, resilience, and adaptability in rapidly changing client circumstances.

Educational Requirements

To qualify, an individual must complete tertiary education in fields such as:

- Social work
- Social pedagogy
- Social and legal activities
- Social policy
- Special education
- Social pathology
- Charity and social activities

Acceptable qualifications can be obtained through **tertiary professional schools** or **university programs** (BA, MA, PhD). Employers must provide **24 hours of mandatory annual professional development**, with additional opportunities including accredited courses, internships, conferences, and specialized training programmes.

Alignment with ESCO

The profile is strongly aligned with the following ESCO codes:

- **2635.3 Social worker** – exact match
- **2635.3.6 Community social worker** – strong overlap
- **2635.3.14 Gerontology social worker** – aligned for work with seniors

Partially aligned:

- **3412.4 Social care worker** – overlaps in certain support activities but less complex

Not aligned:

- Managerial, nursing, caregiver, and home care ESCO profiles. Social workers do not perform personal care tasks or health-related duties.

Recommendations for Change

The document identifies two main areas for improvement:

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1. More Practice-Oriented Training

Current education is heavily theoretical. Training should include:

- Real-life simulations
- Skills-based practice
- Case-based learning

2. Introduction of Specializations

Czech social work currently lacks structured specialization. The proposal includes creating thematic tracks, similar to medical specializations, for areas such as:

- older people care
- Addiction
- Homelessness
- Palliative care
- Disability support

3. Strengthening Management Competence

Social workers often progress into leadership roles without adequate managerial training. More structured management education is recommended.

4.4 France

1. Introduction

France's workforce organisation in the older people care sector is characterized by a **broad and highly structured division of labour** that brings together health, rehabilitation, social support, education, coordination, and management professions. Across the example of 20 national regulated occupational profiles—from nursing assistants and social workers to physiotherapists, psychologists, and social services managers—the French system demonstrates a strong regulatory architecture, extensive training pathways, and a clear categorization of skills using France Travail's competency clusters.

This integrated synthesis summarizes and analyses all 20 occupations and presents cross-occupational insights on professional demands, emerging skills, regulatory trends, and structural implications for older people care.

Across those profiles, France Travail provides a structured classification of skills organized into categories such as *Management/Social/Care*, *Cooperation and Organisation*, *Steering and Regulatory Framework*, *Production/Logistics*, and *Innovation/New Technologies*, with explicit skill-weight percentages. This adds granularity and allows comparison across occupations. Many profiles also clearly identify **emerging skills**, particularly those related to digital health, ecological practices, and telemedicine—showing the modernization of France's care system.

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Educational requirements range from **vocational certificates (Level 3–4)** to **Master-level qualifications (Level 7)**. Regulated professions have well-established legislative frameworks.

The following sections summarize each profile in depth.

2. Summaries of the 20 Occupational Profiles

Below, first we list the main regulated job profiles full-time in Social and Care for older people care, then those on a temporary basis.

2.1 Resident Medical Officer / Coordinating Physician (Médecin coordonnateur)

A crucial medical leadership role in nursing homes (EHPAD) and home-hospitalization services (HAD). Responsibilities include overseeing clinical quality, coordinating multidisciplinary teams, conducting assessments, detecting risks, designing therapeutic strategies, ensuring regulatory compliance, and managing crisis situations. Skills heavily emphasize **care and coordination (65%)**, supported by organisational and technological competencies. Expertise includes geriatrics, clinical pharmacology, and medical risk prevention.

2.2 Medical Practice Manager / Healthcare Manager (Cadre de Santé)

Medical Practice Managers supervise care teams, ensure compliance with quality and safety standards, manage resources, and coordinate organisational development within healthcare or elderly-care institutions. They lead HR processes, plan workloads, evaluate practices, support digitalization, oversee regulatory adherence, and contribute to strategic decisions. Their role requires strong leadership, communication, planning, and change-management skills, with increasing involvement in sustainability and innovation. This managerial role typically requires the State Diploma of Health Manager (Level 6) and is one of the key governance profiles in the sector.

2.3 Coordinating nurse (IDEC)

The coordinating nurse ensures continuity and quality of care by organizing schedules, structuring care pathways, supervising nursing and care staff, implementing protocols, and liaising with families and external professionals. They evaluate residents' needs, ensure adherence to hygiene and safety standards, manage emergencies, and help integrate digital and organisational innovations. Their skills include managerial capacity, team coordination, clinical oversight, and communication. This role is increasingly central in EHPADs and home-care services and requires nursing qualifications at EQF 6–7.

2.4 Nurse Responsible for General Care (Infirmier Diplômé d'État – IDE)

Registered Nurses deliver clinical care, monitor health conditions, perform technical procedures, administer treatments, provide education, manage emergencies, and contribute to prevention and rehabilitation. Their profile highlights strong clinical autonomy, decision-making, and coordination with physicians and therapists. Emerging requirements include digital documentation, environmental hygiene, and support for people with communication or cognitive disorders. Nurses play a central operational role across hospitals, home-care structures, and nursing homes. They are trained at Level 6 with a strong regulatory framework.

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2.5 Advanced Nurse Practitioner (Infirmier en Pratique Avancée – IPA)

Advanced Nurse Practitioners provide high-level clinical assessment, chronic disease management, preventive interventions, and autonomous decision-making within multidisciplinary care pathways. They perform specialized nursing diagnoses, adjust treatment plans, provide therapeutic education, prescribe certain exams, and monitor long-term conditions. Their profile shows strong dominance of care, coordination, and analytical competencies, along with emerging responsibilities in digital health, research, and organizational innovation. They act as key intermediaries between physicians, nurses, and community services. A Master's degree (Level 7) is required. This profession is currently considered to be emerging in nursing homes in France.

2.6 Nursing Assistant (Aide-soignant)

Nursing Assistants provide daily support to older adults through hygiene assistance, mobility help, comfort care, vital-sign monitoring, and social interaction. They work closely with nurses to detect changes in condition and maintain physical and emotional wellbeing. Their core skills include observation, communication, empathy, hygiene, and prevention of health risks. With a strong care component, the role is central in EHPADs, hospitals, and home services. Environmental and digital skills are emerging aspects of the job. Training corresponds to the State Nursing Assistant Diploma (Level 4).

2.7Adult day care worker (Agent de service hospitalier)

General Care Assistants ensure hygiene, cleanliness, and logistical support in older people care settings, contributing to resident comfort and infection prevention. Their tasks include room cleaning, biocleaning operations, equipment maintenance, meal distribution, and ensuring safe environments. Although they do not provide direct clinical care, they are essential to operational quality and risk prevention. Skills are concentrated in production/logistics, hygiene protocols, and QHSSE compliance, with growing use of digital tools for documentation. Qualifications usually correspond to CAP or Level 3 pathways.

2.8 Psychologist

Psychologists deliver psychological assessments, therapeutic interventions, counselling, and cognitive rehabilitation. They work with individuals, families, and groups, conducting psychotherapy, neuropsychological assessments, and psychosocial risk prevention. The role emphasizes **management/social/care skills (65%)** and requires a high academic standard (Master's level). Knowledge includes neurophysiology, aged-related pathologies, therapy modalities (CBT, psychodynamic, hypnosis), and crisis intervention.

2.9 Occupational Therapist (Ergothérapeute)

Occupational therapists support the autonomy and functional rehabilitation of older adults facing physical, cognitive, or psychological limitations. They design therapeutic programmes, conduct functional assessments, implement rehabilitation interventions, and produce orthoses and adaptive devices. Their role emphasizes **management/social/care skills (58%)**, with competencies in evaluation, therapeutic planning, and the creation of ergonomic or assistive solutions. Expertise includes neurology, biomechanics, psychopedagogy, and ergonomics.

2.10 Psychomotor Therapist (Psychomotricien)

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Psychomotor therapists address neuro-motor and body-schema disorders using movement-based, sensory or creative therapies (relaxation, dance, equine therapy). They perform psychomotor assessments, design therapeutic projects, and provide regular rehabilitative sessions. Their skill structure is highly care-centred (**78% care/social/management**)—the most care-intensive among the new profiles. Expertise includes psychopathology, neurology, developmental psychology, and therapeutic relaxation.

2.11 Residential Home Older Adult Care Worker (Accompagnant éducatif et social – AES)

AES professionals support daily living, autonomy, mobility, personal hygiene, and social inclusion of people with long-term care needs dependent older adults. They operate at the intersection of social support, paramedical assistance, and educational guidance. Skills include technical assistance, communication, basic clinical observation, and use of adaptive tools—distributed across care (53%), organisation, communication, and QHSSE compliance. Knowledge includes Braille, sign language, emergency procedures, and psychomotor principles.

2.12 Activity Leader in Gerontology / Older adults community care worker (Animateur en Gérontologie)

The Activity Leader promotes autonomy, wellbeing, and social participation among older adults through tailored socio-cultural, creative, and physical activities. They design and deliver group and individual programmes, stimulate cognitive abilities, address isolation, and foster intergenerational and community engagement. Their skills mix includes activity planning, communication, teamwork, digital facilitation, and event organisation, with a strong social-care component. Collaboration with families, volunteers, and multidisciplinary staff is central to the role, as is adapting activities to physical and cognitive limitations. Qualifications span animation, social education, or artistic pathways.

2.13 Social Services Elderly home Manager (Directeur d'EHPAD)

This senior managerial role oversees medico-social facilities, supervises teams, ensures regulatory compliance, leads strategic planning, coordinates partnerships, manages HR and budgets, and integrates digital tools (an emerging skill). Considered one of the most complex profiles, the role requires mastery across management, economic development, innovation, quality, and risk prevention. It is also one of few roles with **explicit emerging skills** (digital integration, CSR, environmental practices).

In France, the following regulated professions have also a central role for older people care but mostly provide occasional interventions for older adults, according to their needs:

2.14 Physiotherapist (Masseur-kinésithérapeute)

Physiotherapists specialize in functional rehabilitation, motor recovery, mobility restoration, and pain management. They assess motor and sensory impairments, design and adapt rehabilitation programmes, apply manual techniques, and use specialized equipment (e.g., electro-stimulation, ultrasound). The profile shows a **high care-skills component (59%)** and substantial regulatory/administrative responsibilities (18%). Knowledge areas include rheumatology, cardiovascular and respiratory rehabilitation, and proprioception.

2.15 Speech and Language Therapist (Orthophoniste)

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These professionals address language, speech, voice, and swallowing disorders. Their work involves assessment, design and delivery of speech therapy, family guidance, and multidisciplinary collaboration. Skills are **care-centred (69%)**, with strong elements of teaching, communication, and planning. Emerging skills include use of specialized diagnostic software. Expertise spans neuropsychology, ENT pathologies, autism spectrum disorders, and communication techniques.

2.16 Podiatrist (Pédicure-podologue)

Podiatrists provide foot care, manage postural disorders, design orthotic devices, and perform chiropody. The role combines clinical evaluation of gait and balance, device fabrication, hygiene compliance, and administrative management. Their skill mix includes **51% care**, complemented by strong emphasis on regulatory and administrative competences (33%). Expertise covers dermatology, diabetology, biomechanics, and posturology.

2.17 Dietitian (Diététicien)

Dietitians support nutritional health and disease prevention by assessing dietary needs, developing tailored meal plans, preventing malnutrition, and advising on therapeutic diets for chronic illness. They design menus for institutions, ensure food safety compliance (HACCP), educate patients and staff, and contribute to rehabilitation by addressing swallowing disorders, glycaemic control, or nutritional deficiencies. Their competencies combine clinical knowledge with production/logistics skills connected to food preparation and storage. They collaborate closely with nurses, speech therapists, doctors, and catering services. Dietitians are trained at Level 5.

2.18 Gerontology Social Worker (Assistant de service social – ASS)

Gerontology Social Workers assess the social and administrative needs of older adults, support access to rights and services, and manage complex social situations such as isolation, financial difficulty, or loss of autonomy. They conduct social enquiries, coordinate interventions with institutions, develop personalized support plans, and provide counselling and crisis assistance. Their skills sit at the intersection of legal knowledge, psychosocial expertise, communication, and case-management competency, with strong emphasis on inclusion and empowerment. They hold the DEASS or DCESF diploma (Level 6).

2.19 Disability Support Worker / Specialized Educator (Éducateur spécialisé)

Specialized educators assist older adults with disabilities or psychosocial difficulties by developing socio-educational interventions that promote autonomy, behavioural stability, and social inclusion. They conduct individual assessments, design personalized support plans, organize activities, mediate conflicts, and provide crisis support. Their role requires strong relational, observational, and psychological insight skills, combined with project coordination and teamwork. They collaborate with health and social professionals, families, and community services, and operate in residential facilities, day centres, or home-based contexts. They are qualified at Level 6.

2.20 Sport Therapist / Adapted Physical Activity Specialist (APA)

APA specialists design, implement and evaluate adapted physical activity programmes for people with disabilities or chronic disease. They promote physical autonomy, social participation, and wellbeing, ensuring safety and personalized adaptations. Skills

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combine **pedagogy, activity design, multidisciplinary teamwork, risk assessment, and use of digital tools**, with a care-management share of 64%. Expertise includes disability psychology, physiology, adapted sports, and safety standards.

3. Cross-Profile Skills Patterns

3.1 Dominance of Care and Social Interaction Skills

Across almost all profiles, the "Management, Social, Care" competency category carries the highest weight (from 35% to 78%).
This underscores the relational, interpersonal, and humane dimension fundamental to older people care.

3.2 Communication and Interdisciplinary Teamwork

Every profile—clinical, social, or managerial—requires:

- coordination,
- shared decision-making,
- communication adapted to cognitive decline and disability,
- participation in multidisciplinary meetings.
  Even technical professionals (podiatrists, speech therapists, physiotherapists) emphasize teamwork.

3.3 Digital Skills Are Emerging but Unevenly Integrated

Only a few profiles explicitly identify digital skills as "emerging":

- Social services manager (clear emerging digital competencies)
- Speech therapist (software use)
- Medical coordinator (data systems)

Many others (occupational therapists, physiotherapists) lack explicit digital skill references despite real-world relevance.

3.4 Environmental and Sustainability Skills Are Rare

Only the **social services manager** profile integrates environmental and ecological responsibilities (CSR, sustainable management). Most others lack environmental competencies—an identified gap across files.

3.5 Strong Emphasis on Autonomy, Inclusion and Participation

Many roles (APA specialist, occupational therapist, speech therapist, AES, activity leader, psychologist) share a mission of preserving or enhancing autonomy, improving participation, and supporting cognitive and emotional wellbeing.

3.6 High Complexity of Managerial Roles

Social services managers and medical practice managers hold the widest skill spectrum:

- HR, strategy, budgets

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- regulatory enforcement
- digitalization
- risk management
- innovation
- quality systems
  These functions anchor the overall governance of older people care settings.

4. Cross-Profile Challenges and Gaps

4.1 Limited Identification of Emerging Skills

The majority of clinical and rehabilitation profiles lack explicit references to emerging skills such as:

- digital health
- AI-supported diagnostics
- tele-rehabilitation
- environmental sustainability
- clinical innovation

4.2 Uneven Integration of Entrepreneurial or Business Skills

Strong in managerial professions but nearly absent in rehabilitation, care, and support profiles.

4.3 Environmental Competencies Overall Underrepresented

Only one profile explicitly integrates ecological practices.

4.4 Fragmentation of Rehabilitation Professions

Rehabilitation professions (physio, occupational therapy, speech therapy, psychomotor therapy, adapted sports) operate with highly specialized silos, though older adults often benefit from integrated rehabilitation planning.

5. Conclusions Across All 20 Profiles

The integrated analysis of those 20 regulated French elderly-care occupational profiles reveals a comprehensive, highly regulated, and competency-rich workforce ecosystem combining health, social, educational, and managerial functions. France's system is characterized by:

5.1 Strong Multidisciplinarity

A dense network of roles ensures continuity of care from basic assistance to specialized medical interventions.

5.2 High Professionalization and Regulatory Protection

Strict diploma requirements (often EQF 6–7) ensure quality but may limit workforce flexibility.

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5.3 Clear Skill Structures

France Travail's percentage-based skill weighting provides uncommon clarity and facilitates comparison across professions.

5.4 Growing—but still insufficient—digitalization

Digital skills appear inconsistently; some professions are advanced, others lag behind.

5.5 Limited environmental integration

Sustainability is underdeveloped across most care roles.

5.6 Opportunities for Enhanced Coordination and Innovation

Particularly across rehabilitation and psychosocial support roles, France could benefit from more integrated competence clusters (e.g., shared training modules for cognitive stimulation, fall prevention, communication disorders, etc.).

6.7 Strong Alignment with ESCO—Yet Some Gaps

While most roles map clearly to ESCO, gaps remain in emerging community-based, digital-health, and managerial hybrid roles.

Moreover, new trends in the French labour market in this sector will need to be explored:

1.- **The development of the profession of 'Advanced Practice Nurse'**, currently considered to be emerging in nursing homes in France. A guide to developing skills in this area is currently being developed.

2.- The number of **'Quality Nurse'** and **'Quality Manager'** positions seems to have increased in nursing homes in the post-COVID era. However, we do not have any figures on this point.

3.- The profession of **« Head Housekeeper** » also seems to be strengthening.

4.- **The development of professions involved in home care services for the elderly.**

4.5 Spain

4.5.1 Context

Spain does not have one unified national source for occupational profiles. Instead, several complementary systems and institutions contribute partial but interconnected information.

The complexity of this structure is heightened by Spain's decentralised governance, where key competences such as education and employment policy are transferred to the 17 autonomous communities. This decentralisation means that national systems must coexist and coordinate with diverse regional frameworks, making the alignment and updating of occupational profiles a more challenging process.

For this analysis, the following main sources have been considered:

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1. National Classification of Occupations (CNO-11)

Produced by the Spanish National Statistics Institute (INE), the CNO-11 is the official statistical framework for classifying occupations based on the tasks and duties performed — essentially describing *what workers do*. The current version dates from 2011 and is broadly comparable to ESCO (European Skills, Competences, Qualifications and Occupations) used in the EURES network.

2. National Catalogue of Professional Qualifications (CNCP)

Managed by the Instituto Nacional de las Cualificaciones (INCUAL), the CNCP defines the knowledge, skills, and competences required to perform occupations, aligning training with labour market needs. It classifies workers by *what they are qualified to do*. Links between CNO and CNCP occur when an occupation (CNO) is associated with the qualifications (CNCP) that enable it.

3. State Public Employment Service (SEPE)

The SEPE manages two complementary instruments:

- **Observatory of Occupations** – SEPE Observatory of Occupations provides labour market analysis and identifies training needs for each occupation, detailing technical, professional, linguistic, digital, and personal skill requirements. Occupational profiles here include codes that match the first four digits of CNO-11. This information is compiled annually in resources such as the *Report on the Prospecting and Detection of Training Needs 2024* published by the SEPE Observatory of Occupations.

- **CNO-SISPE 2011** – The occupational classification used within the SISPE (State Public Employment Service Information System), a digital infrastructure created to harmonise employment services across Spain after the transfer of active labour market policies to the autonomous communities. The CNO-SISPE 2011 is built on the CNO-11 framework but disaggregates the primary groups into specific occupations coded with eight digits. The first four digits correspond exactly to CNO-11, ensuring consistency, while the additional digits allow for more precise classification in employment service operations, contract management, and job matching.

CNO-11 vs CNO-SISPE 2011

While CNO-11 is a stable, task-oriented classification for statistical and policy purposes, CNO-SISPE 2011 serves as a dynamic operational tool for public employment services.

The latter's design reflects the need for interoperability between national and regional systems, enabling, for example, a jobseeker registered in one autonomous community to be visible across the country.

This operational focus means that CNO-SISPE 2011 can provide a more granular view of occupational profiles, but its maintenance and coherence depend on close coordination between the SEPE and the autonomous employment services — a challenge inherent to Spain's decentralised system.

4.5.2 Summaries of the 11 National Occupational Profiles

1. Directors of Social Interest Organisations (CNO 1113)

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Directors of Social Interest Organisations are senior executives who lead non-profit entities, foundations, and associations providing social services, overseeing organisational strategy, administration, financial planning, and programme delivery. Their responsibilities encompass institutional representation, coordination of multidisciplinary teams, management of budgets and resources, and alignment of organisational missions with social policy frameworks. They ensure compliance with legal and financial regulations, establish relationships with public bodies and funders, and guide community-based programmes aimed at addressing social needs. This leadership role requires strong managerial, communication, and strategic planning skills to ensure quality service provision and organisational sustainability.

In Spain, this role operates within a decentralized governance framework, which results in variation in supervisory responsibilities and qualification requirements across Autonomous Communities.

2. Directors of Social Services for Older People (CNO 1324)

These professionals plan, direct, and coordinate services for older persons across community settings, assisted living residences, and older people care institutions. They supervise multidisciplinary staff, manage budgets, develop policies, oversee welfare programmes, and build partnerships with public authorities and service providers. They guide care planning, ensure regulatory compliance, and represent their institutions in negotiations and public forums. Their role is managerial and strategic, requiring expertise in gerontology, organisational management, and policy implementation, with regionally variable educational requirements due to Spain's decentralised system.

In practice, the scope of this role differs across regions, reflecting diverse regulatory approaches and care models for older people.

3. Directors of Other Social Services (CNO 1325)

Directors of Other Social Services oversee programmes such as child protection, family support, community services, and income assistance. They manage operations, supervise personnel, develop procedures, coordinate with social agencies, and advise public authorities on welfare improvements. Their tasks involve budget oversight, policy development, and ensuring effective coordination across multiple service providers. Competence requirements emphasize staff management, organisational planning, and social programme administration, while educational criteria differ across autonomous communities.

This category also presents high functional heterogeneity, as different service domains are grouped under a single occupational heading.

4. Generalist Nurses (CNO 2121)

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Generalist nurses deliver essential nursing care, performing patient assessment, implementing treatments, administering medications, coordinating with healthcare teams, and supporting health promotion. They work in hospitals, primary care, social care institutions, and community services. Their tasks also include wound care, monitoring drug responses, supervising auxiliary staff, participating in clinical research, and educating patients and families. Required competencies cover clinical skills, digital literacy, communication, and interdisciplinary teamwork, supported by a university nursing degree and ongoing professional development.

In residential care, this role shows specific competence gaps in digital literacy and complex care management, particularly in dementia and chronic conditions.

5. Specialist Nurses (CNO 2122)

Specialist nurses provide advanced nursing care in fields such as geriatrics, mental health, pediatrics, family/community health, occupational health, and medical-surgical care. Their functions include specialized assessment, advanced clinical interventions, health education, disease prevention, epidemiological surveillance, and participation in research and emergency response. They supervise teams, ensure quality of care, and apply evidence-based practice within their specialty. Education involves an EQF6 nursing degree plus accredited postgraduate specialization (EIR or master's programmes) and ongoing CPD.

The Spanish classification system does not include a dedicated subcategory for geriatric nursing, limiting the visibility and recognition of this specialty.

6. Social Work and Social Education Professionals (CNO 2824)

These professionals assess social needs, design interventions, provide counselling, mediate conflict, implement community programmes, and protect. They support individuals and families dealing with poverty, disability, unemployment, addiction, homelessness, or complex social challenges. Their tasks include crisis intervention, case reporting for courts, reintegration support for offenders, community-level advocacy, and coordination with social and health institutions. Competences include communication, mediation, programme design, legal knowledge, and teamwork. The role typically requires a university degree in social work or social education.

In long-term care settings, their involvement varies significantly across regions, affecting the consistency of psychosocial support and case management.

7. Support Professionals in Social Work and Social Education (CNO 3713)

Support professionals assist social workers and educators by helping clients navigate services, developing action plans, delivering life-skills programmes, providing crisis support, and facilitating access to housing, healthcare, legal, or employment resources. They work in community centres, shelters, residential institutions, and reintegration

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programmes. Competences include client assessment, communication, coordination, crisis management, and socio-emotional support. Education typically aligns with vocational qualifications (EQF 3–4) such as social integration or sociosanitary care, varying across regions.

In Spain, this role is less prevalent in residential care settings than in other European systems, where it often acts as an intermediary between direct care staff and professional teams.

8. Hospital Nursing Assistants (CNO 5611)

Hospital nursing assistants support nurses and physicians with personal care, patient hygiene, feeding, mobility, preparing patients for treatments, sterilizing equipment, collecting basic clinical data, and assisting with medication administration (non-invasive routes). They contribute to patient comfort and support hospital workflow through basic clinical and logistical tasks. Skills requirements include infection control, hygiene assistance, communication, teamwork, and ICT basics. The standard pathway is an intermediate vocational qualification in nursing auxiliary care.

In practice, this hospital-based profile is frequently used in residential care, leading to overlap with sociosanitary roles such as TAPSD.

9. Primary Care Nursing Assistants (CNO 5612)

Primary care nursing assistants support medical and nursing tasks in outpatient and community health settings. Duties include preparing patients for examination, assisting with non-parenteral medication administration, managing first-aid kits, supporting hygiene and mobility tasks, sterilizing equipment, and performing basic administrative work (stocks, appointments). Required competences span clinical support, communication, bioethics, emergency care, and infection prevention. Training follows the vocational Nursing Care Technician diploma or equivalent certifications.

In some regions, they also participate in home and community-based programmes linked to primary care services.

10. Personal Care Workers in Health Services Not Elsewhere Classified (CNO 5629)

This heterogeneous group includes dental assistants, imaging assistants, sterilization aides, hospital porters, and—in care settings—support workers providing mobility assistance, basic personal care, and support to people with long-term care needs in institutions. Tasks range from instrument sterilization and patient transport to hygiene assistance and environment preparation. Competences encompass patient handling, communication, technical support procedures, safety protocols, digital skills, and teamwork. Training varies widely, but often includes vocational qualifications such as TAPSD or auxiliary nursing diplomas.

The category operates as a broad “catch-all” grouping, obscuring the professional identity of institutional care workers and complicating efforts to align national

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classifications with ESCO. The lack of a dedicated occupational category reduces statistical accuracy and impedes recognition of the long-term care workforce.

11. Personal Care Workers Providing Home-based Support (CNO 5710)

Home-based Personal Care Workers provide direct, routine personal care and daily living assistance to older adults, peoplewith disabilities, or individuals recovering from illness in their own homes. Their tasks include hygiene care, feeding, dressing, mobility support, medication reminders, pressure-injury prevention, home cleaning, meal preparation, and emotional, along with escorting clients to medical appointments and supporting community participation. They monitor health and report changes, maintain records, and contribute to personalized care plans established by healthcare professionals. Competences identified by SEPE, SISPE, and INCUAL cover person-centred care, autonomy support, basic healthcare assistance, household management, psychosocial support, digital skills (information search, data protection, basic office tools), and transversal skills such as empathy, organisation, communication, and risk prevention. Qualifications typically include TAPSD (EQF 4), auxiliary nursing training, and professional certificates in domiciliary socio-health care. This role strongly aligns with ESCO 5322 – Home-based Personal Care Workers.

Compared to institutional roles, this profile is more clearly defined within Spain's qualification and training frameworks.

4.5.3 Integrated Cross-Profile Analysis of All 11 Spanish Occupations

The combined analysis of all **11 Spanish occupational profiles**—spanning directors, nurses, social workers, auxiliary staff, institutional care assistants, and home-based carers—reveals a **structured but decentralised care workforce** with marked distinctions between managerial, professional, and support-oriented roles. At the managerial level (CNO 1113, 1324, 1325), directors hold strategic authority over budgets, quality assurance, compliance, and coordination of social or elderly services, demonstrating high autonomy and responsibility for system governance. Professional clinical and social roles (Generalist Nurses, Specialist Nurses, Social Workers/Social Educators) represent the technically specialized tier, requiring university degrees and regulated qualifications; their scope includes assessment, planning, therapeutic intervention, crisis response, interdisciplinary coordination, and evidence-based practice. Support roles (Social Work Support Professionals, Hospital Nursing Assistants, Primary Care Nursing Assistants, Institutional Personal Care Workers, Home-based Personal Care Workers) deliver hands-on assistance, hygiene care, mobility support, monitoring, and basic clinical or social tasks under professional supervision, positioning them as the operational backbone of long-term care.

While person-centred care is widely referenced in policy and training frameworks, its integration into daily practice remains uneven, with notable gaps in relational, emotional and communication competences among support roles

Another cross-cutting trend is the **increasing need for digital skills**, from electronic health records and appointment systems to ICT-based communication—though digital requirements are more explicit in nursing and social work than in auxiliary care roles.

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The profiles reveal **skill asymmetries** between institutional care workers (CNO 5629) and home-based carers (CNO 5710), with the latter having a clearer, better-defined occupational identity and competency framework, underscoring a structural classification gap noted in the official documents. Regional variation in qualification requirements—due to Spain's decentralised system—creates **heterogeneity in training standards**, particularly for auxiliary roles, which complicates workforce mobility and ESCO alignment.

Finally, SEPE and INCUAL identify recurring **skills gaps** across the entire workforce: training in dementia, mental health, restraint-free care, infection control, first aid, stress management, communication techniques, and digital literacy—highlighting priority areas for future reforms. The analysis shows that Spain's workforce is diverse but structurally fragmented andwould benefit from clearer role delineation (especially for institutional vs home-based care), strengthened national training baselines, and harmonized competency frameworks to improve professional recognition and mobility across the EU.

Stakeholder consultations conducted in 2025 highlighted that several system-wide challenges cut across all occupational profiles. These include persistent workforce shortages, high turnover and weak vocational attachment among new entrants, often linked to heterogeneous training pathways. Competition with the healthcare sector and limited generational replacement also affect the stability of the long-term care workforce, while relational and emotional competences—essential for person-centred care—remain insufficiently developed across support roles.

These challenges are closely connected to the complexity of Spain's decentralised governance model, which results in variable qualification requirements, training delivery and role expectations across Autonomous Communities. Such variability reinforces existing asymmetries between occupational groups and limits mobility and comparability.

Several improvements would strengthen alignment with EU standards: clearer mapping of occupational tasks and competences to ESCO descriptors; consolidation of overly broad categories such as CNO 5629; greater harmonisation of qualification requirements across regions; and the systematic integration of digital, transversal and emerging competences. Enhancing competence-based definitions—particularly those related to communication, relational practice and behavioural skills—would further support comparability, workforce development and long-term professionalisation.

4.6 Austria

4.6.1 Summaries of the 12 National Occupational Profiles

1. Adult Community Care Worker – Social Worker for Disabilities & Elderly (Sozialbetreuer:in für Menschen mit Behinderung / Altenarbeit)

Social workers for people with disabilities and for older adults assist clients in their daily lives, focusing on independence, social participation, and holistic support. They help with personal care, mobility, daily activities, and household tasks while promoting autonomy through structured activities, group work, and social integration. Diploma-level workers take on planning duties, develop support concepts, coordinate care activities, and adapt

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environments to age- or disability-related needs. They may escort clients to workplaces, schools, or appointments, provide basic nursing assistance, document care, and collaborate with therapists and families. Digital skills include communication and documentation, with sensitivity to data protection.

2. Care Home Worker – Certified Social Care Worker for Family Support (Diplomsozialbetreuer:in für Familienarbeit)

Certified Social Care Workers for Family Support assist families during crises by maintaining household routines (cooking, cleaning, laundry, errands), caring for children, and providing supervision and homework support. They also assist older adults or people with disabilities with daily living tasks, personal hygiene, mobility, and accompanying them to appointments. The role combines family counselling, health and nursing assistance, household organisation, and social-pedagogical support. Digital competences include communication, documentation, and secure handling of sensitive client data. Education spans NQF Levels IV–V in vocational programmes for health, social care, and pedagogy.

3. older people care Home Manager – Home Director (Heimleiter:in)

Home directors oversee the full management and administration of residential facilities for seniors, youth, or people with disabilities. They manage budgets, staff recruitment, team coordination, procurement, and scheduling; ensure quality standards; develop home-concepts; and maintain smooth daily operations. Their work includes liaising with authorities, families, and local organisations, handling legal and organisational compliance, and supporting interdisciplinary collaboration. The role requires strong leadership, communication, conflict resolution, planning, digital literacy, and knowledge of care-related administration. Educational backgrounds vary widely and often include social care, social work, pedagogy, or administration, supported by leadership training.

4. Gerontology Social Worker – Social Worker (Sozialarbeiter:in)

Social workers support individuals, families, and groups in managing social problems, crises, and difficult life situations. They provide counselling, home visits, crisis intervention, case reporting, support with financial entitlements, and coordination with authorities, shelters, courts, and community institutions. Tasks include documentation, report writing, raising awareness of social issues, and interdisciplinary collaboration with lawyers, doctors, psychologists, and therapists. Core competencies include communication, conflict de-escalation, empathy, resilience, legal and social knowledge, and digital skills related to documentation and secure data handling. Education spans higher vocational school or university studies in social work or social sciences.

5. Home Care Aide (Heimhelfer:in)

Home care aides support older adults and people with disabilities in household management and daily personal care. Their duties include cleaning, cooking, shopping, errands, assistance with eating, dressing, personal hygiene, toileting, medication reminders, and mobility support. They also document care activities, observe clients' conditions, encourage social interaction, and collaborate with mobile nursing services. The role requires empathy, reliability, physical resilience, communication skills, and basic medical and first-aid competence. Digital skills include communication, documentation, and adherence to

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data security regulations. Training is typically at NQF Level IV in vocational programmes.

6. Home-Based Personal Care Worker – Everyday Companion & 24-Hour Caregiver (Alltagsbegleiter:in / Personenbetreuer:in 24-Stunden-Betreuung)

Everyday Companions provide social support, companionship, and assistance with household tasks, leisure activities, memory training, and maintaining clients' social participation, without performing medical tasks. In contrast, 24-hour caregivers live with clients for several weeks at a time, supporting all activities of daily living (hygiene, dressing, eating, toileting, mobility), managing household duties, accompanying clients to appointments, and organizing daily routines. Some basic medical tasks (e.g., bandages, medication, vital-sign checks) are performed only under supervision of licensed health professionals. Both roles rely on empathy, patience, social engagement, communication, and basic medical and household management skills.

7. Nursing & Midwifery Associate Professionals – Specialist Nursing Assistant (Pflegefachassistent:in)

Specialist Nursing Assistants provide delegated nursing and therapeutic care under supervision of registered nurses or physicians. Their tasks include basic care, monitoring vital signs, documenting care, supporting daily activities, and carrying out extended clinical tasks such as ECGs, lung function tests, tube insertion/removal, subcutaneous injections, and managing infusions. They also support organisational workflows and help train nursing assistants. The role requires clinical competence, communication skills, teamwork, digital documentation skills, and adherence to data protection. Training spans NQF Levels IV–V.

8. Nursing & Midwifery Professionals – Diploma Nurse (Dipl. Gesundheits- und Krankenpfleger:in)

Diploma-qualified nurses provide comprehensive nursing care, assessing patient needs, planning and implementing care plans, administering medications and infusions, monitoring vital signs, performing blood sampling and diagnostic procedures (e.g., ECGs), documenting care, and supporting therapeutic processes. They collaborate with physicians and multidisciplinary teams, contribute to prevention and health promotion, and undertake administrative duties. Required competencies include clinical reasoning, care planning, patient communication, hygiene management, quality assurance, use of medical technologies, and secure digital documentation. Education ranges from vocational training to university studies at NQF Levels IV–VIII, with the nursing qualification at Level VI.

9. Residential Care Home Worker (duplicate profile – same as Adult Community/older people care)

This profile mirrors the Austrian Adult Community Care Worker role, supporting older adults in residential settings with daily activities, personal care, social participation, household tasks, and mobility. Workers assist clients with eating, dressing, hygiene, and emotional support while promoting independence and quality of life. Diploma-level staff undertake planning, conceptual development, and coordination of activities. The role includes basic nursing assistance, observation, documentation, and collaboration with care teams and families. Digital skills are applied in communication and record-keeping, with NQF Level 2 competence.

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10. Residential Home Adult Care Worker (duplicate profile – same as Adult Community/older people care)

This profile also corresponds to the Austrian residential/older people care social worker pathway, combining practical assistance, personal care, activation support, companionship, and environment adaptation. Workers help residents with daily routines, encourage communication, organize activities, document care, liaise with families, and support cognitive and physical stimulation. Diploma staff additionally manage care planning, integration projects, and coordination with interdisciplinary professionals. Digital skills include documentation, communication tools, and secure data handling, supported by NQF Level 2.

11. Residential Home Older Adult Care Worker (same as adult community/older people care)

Residential Home Older Adult Care Workers support elderly residents in long-term care settings by assisting with daily living activities, including personal hygiene, dressing, eating, mobility, household tasks, and social participation. They promote autonomy and quality of life by organizing activities, facilitating communication, providing emotional support, and adapting routines to residents' physical and cognitive conditions. Diploma-level personnel additionally contribute to planning, documentation, and coordination with interdisciplinary teams, while all workers collaborate with families and healthcare professionals to ensure holistic, person-centred care. Digital competencies include communication, documentation, and adherence to data protection requirements, and the role aligns with Austria's broader social care training pathways at NQF level 2 or higher.

1**2. Social Services Manager (Sozialmanager:in)**

Social Services Managers oversee planning, organisation, and leadership within social-sector institutions, coordinating staff, managing budgets, ensuring regulatory compliance, and supporting strategic development across services for various target groups, including older adults. Their responsibilities include operational and strategic management, quality assurance, HR development, fundraising, PR, and social entrepreneurship, supported by strong communication, leadership, and problem-solving skills. They also apply advanced digital skills for planning, administration, content creation, data security, and process optimization (NQF digital competence level 3). Educational routes range from vocational schools (NQF IV–V) to university degrees (NQF VII–VIII) in social work, social management, pedagogy, business, or health management. Although widely used in Austria, this profile lacks an official occupational code and is recommended for alignment with ESCO 1344.1 to increase clarity and EU comparability.

4.6.2 Integrated Cross-Profile Analysis of the 12 Austrian Occupational Profiles

The 12 Austrian occupational profiles form a **highly structured, multi-tiered ecosystem of elderly-care and social-service roles**, characterized by strong formalization, clear distinctions between care, nursing, social pedagogical and managerial functions, and high reliance on vocational training pathways aligned with Austria's NQF system. Across these roles, Austria demonstrates a well-organized social-care infrastructure where professional boundaries, practice expectations, and collaboration mechanisms are clearly articulated. A defining feature of the Austrian system is the division between **social care (Sozialbetreuung)** and **healthcare professions (Pflege)**, each regulated through distinct training routes and responsibilities—yet highly interdependent in practice.

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1. Tiered Structure and Division of Labour

Austrian older people care is built on a three-layer workforce:

(1) Social care workers (Adult community care workers, residential care workers, home care aides, family support workers, everyday companions, 24-hour caregivers) focus on daily living assistance, psychosocial support, activation, and household tasks, with some basic health-related activities under delegation.

(2) Nursing staff (Specialist nursing assistants, diploma nurses) provide clinical nursing care, health monitoring, medication administration, and diagnostics depending on qualification level, forming the medical backbone of the system.

(3) Management & coordination roles (Home care manager, social services manager) direct organisational strategy, quality assurance, staffing, and compliance across residential or social-service institutions.

This layered structure enables efficient task distribution while preserving professional autonomy and safety boundaries.

2. Clear Professional Identity in Social Care

A key strength of the Austrian system is the **distinct identity and formalization of social-care roles**, including diploma-level social workers specializing in disability support, older people care, or family support. These professions emphasize empowerment, autonomy promotion, meaningful activity, relationship building, and social inclusion—areas not always formalized to this extent in other EU countries. Workers at diploma level participate in care planning and conceptual development, demonstrating a structured career progression within the social-care pathway.

3. Strong Formalization of Home-Based Care

Unlike many countries where home-care roles are generic or poorly standardized, Austria has **two differentiated home-based occupations**:

- **Home care aides (Heimhelfer:innen)** trained to NQF Level IV, and
- **24-hour caregivers (Personenbetreuer:innen)** operating through regulated placements with defined delegated tasks.

Also, **Everyday Companions (Alltagsbegleiter:innen)** provide non-medical social support. This creates a **highly segmented but coherent home-care workforce**, adapted to client needs and risk levels.

4. Strong Integration of Nursing and Social Care Through Delegation

Austrians have a well-developed model of **nursing delegation**, where diploma nurses supervise specialist nursing assistants, who in turn support social-care staff in basic health-related tasks. This mechanism ensures quality and safety while allowing lower-qualified professions to contribute meaningfully to daily care. It also improves workforce flexibility without blurring professional boundaries.

5. High Professionalization and Vertical Educational Pathways

All 12 occupations link to the NQF, ranging from Level II–VIII. This creates **transparent skill expectations** and supports mobility across the care and social-pedagogical

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sectors. Educational pathways—from vocational schools (NQF IV–V) to university degrees (NQF VI–VIII)—provide clear advancement routes for workers aiming to move toward higher responsibility (e.g., social services management, home director roles, diploma nursing).

6. Strong Emphasis on Psychosocial and Autonomy-Promoting Care

Across social-care roles, Austria uniquely emphasizes:
• activation and meaningful activities
• cognitive and psychosocial stimulation
• communication and relationship building
• social participation and community involvement
• environmental adaptation for autonomy
These competencies reflect an **empowerment-oriented philosophy**, positioning Austrian social-care profiles at the intersection of care, education, and community work.

7. High Demands for Digital Competence and Data Protection

Across almost all roles—especially social managers, home managers, diploma nurses, and specialist assistants—digital competencies are explicitly defined, including:

- digital documentation
- communication and collaboration tools
- administrative platforms
- data protection and secure handling of sensitive client information

Austria goes beyond many other countries by specifying NQF-referenced digital competence levels (e.g., Level 3 for managers), showing advanced alignment with the DigComp framework.

8. Managerial Roles Display Broad Strategic Requirements

The **Home Care Manager** and **Social Services Manager** profiles require extensive competencies in leadership, HR coordination, budgeting, strategy, quality management, compliance, PR, and organisational development. They mirror ESCO's social services manager roles closely and reflect a **modern managerial profile blending social-sector knowledge with administrative and business competencies**. Digital leadership and data-security responsibilities are unusually well developed in Austria's management profiles.

9. High Interdisciplinary Collaboration Across All Roles

All 12 profiles emphasize teamwork with nurses, therapists, physicians, psychologists, family members, and external agencies. Coordination is central to nearly every function, particularly for diploma nurses, social-care diploma workers, and managers. This indicates a mature ecosystem where **case coordination and collaborative care are explicitly embedded in job expectations**.

10. Gaps and Challenges Across Profiles

Despite strong structure, several cross-profile gaps emerge:

- **Environmental and sustainability skills** are minimally present, even though they are increasingly relevant in EU frameworks.
- **Digital skills** are advanced in management roles but less developed in some frontline social-care roles.

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- **Limited specialization for older people care** in some broad social-care profiles (e.g., social services managers or family support workers).
- **Growing clinical complexity** in ageing populations may pressure social-care workers to perform more delegated health tasks, requiring updated training.

Overall Conclusion

Austria's 12 occupational profiles form a **highly developed, regulated, and integrated care workforce model** distinguished by strong segmentation between nursing and social care, formalized vocational progression routes, and well-articulated digital and organisational competencies. The system's clear professional boundaries, high emphasis on psychosocial support, and detailed role differentiation create a robust foundation for quality older people care. At the same time, Austria could strengthen its alignment with EU trends by enhancing sustainability skills, expanding digital training across all frontline roles, and developing elderly-care-specific sub-profiles for managerial and social-care categories.

5. Final Outline of Profiles to be (Re)Designed

5.1 Selection Criteria

The selection of the six national and two EU occupational profiles to be updated followed a structured and evidence-based process, grounded in the project's cross-country research findings and aligned with current EU policy priorities. The first consideration was **cross-country relevance**. Only profiles that exist, or have a clearly equivalent role, in the majority of partner countries were shortlisted. This ensured that the selected profiles would be transferable, comparable and meaningful within the broader European context, rather than being tied to very specific national systems or organisational structures. By prioritizing roles that are widely represented—such as home-based carers, institutional care workers, nurses and care coordinators—the project guaranteed that the updated profiles could be adopted and validated across diverse long-term care settings.

A second key criterion was the **sectoral impact** of each role. The project sought to identify occupational profiles that play a central function in the organisation, coordination or direct delivery of older people care services. These are roles that affect large segments of the workforce and that act as structural "levers" within care ecosystems: updating their skills and competences would have a tangible influence on the quality, continuity, and safety of care provision. Profiles such as frontline carers, nursing staff and residential care managers were therefore prioritized due to their critical position in both day-to-day service delivery and broader organisational functioning.

The third criterion related to **evidence of skills gaps**, particularly in the domains most relevant to future transformation of the care sector. Findings from WP3 (skills needs analysis) and WP4.1.1 (comparison with ESCO) demonstrated that several occupations face significant mismatches between existing job requirements and emerging skill demands—especially in digital competences, environmental sustainability, and entrepreneurial or organisational skills. Roles showing strong and well-documented gaps in these areas were prioritized, as updating their profiles would directly support the development of a more future-ready long-term care for older adults.workforce.

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Policy alignment served as a fourth guiding principle. The selected profiles had to clearly contribute to the implementation of key EU strategies, including the **European Care Strategy**, the **Pact for Skills**, the **European Skills Agenda**, and the **twin digital and green transitions**. Focusing on occupations central to these priorities ensures that the updated profiles will not only respond to labour-market needs but also support wider policy goals such as improving the attractiveness of care work, strengthening training ecosystems, and professionalizing long-term care across Europe.

Finally, the selection ensured **coverage across different levels of responsibility** within the older people care ecosystem. To capture the full complexity of long-term care provision, the chosen profiles reflect both managerial/coordination functions and operational/frontline caregiving roles. At least one profile represents strategic and organisational responsibilities—such as residential care managers—while others reflect direct interaction with older persons, including home-based care workers and institutional caregivers. This balance ensures that the updates address both the management of care services and the hands-on delivery of support.

Together, these criteria created a robust and transparent selection framework, enabling the identification of occupational profiles whose updating will have the greatest relevance, impact, and added value for national partners and for the advancement of high-quality older people care across Europe.

5.2 France – Nurse Responsible for General Care (IDE)

Profile Purpose and Scope

- State-regulated nursing role providing preventive, curative, rehabilitative and palliative care.
- Requires update to emphasize elderly-care relevance, emerging competencies, and person-centred long-term care.

Updated Role Description

- Autonomous nursing role: assessment, diagnosis, intervention, evaluation, documentation.
- Coordination with multidisciplinary teams, families and supervisors.
- Increasing responsibility for chronic disease management and dementia-compatible care.

Required Education & Qualification

- Mandatory State Nursing Diploma.
- NQF 6; new emphasis on digital, environmental and clinical-reasoning modules.

Core Skills to Emphasize in the Update

- **Clinical reasoning**, risk detection, evidence-based practice.
- **Holistic older people care**: chronic conditions, frailty, dementia, polypharmacy.
- **Communication**: families, interdisciplinary teams, conflict management.
- **Digital skills**: e-health, remote monitoring, documenting, telecare.

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- **Environmental skills**: QHSE procedures, low-waste care, sustainable stock management.
- **Entrepreneurial skills**: team coordination, budget awareness, partnership-building.

Optional/Advanced Skills

- Advanced emergency care, research skills, technological innovation adoption, mental-health support.

Update Priorities

- Align with EU Care Strategy: multidisciplinary coordination, elderly-specific competencies, digital inclusion.
- Strengthen attractiveness by clarifying leadership, autonomy, and advanced competencies.

5.3 Greece – Personal Care Attendant (Home-Based Care)

Profile Purpose and Scope

- EQF/NQF 3 role providing daily personal support, mobility assistance, household care and psychosocial support.
- Update aims to integrate digital, green and entrepreneurial skills per Eldicare2.0.

Updated Role Description

- Home-based personal support for older adults and people with disabilities.
- Works under supervision with growing autonomy.
- Supports users' dignity, rights, participation, and safe independent living.

Required Education & Qualification

- Post-lower-secondary VET, aligned to EQF 3.
- Structured curriculum: gerontology basics, dementia, hygiene, communication, safety, digital skills.

Core Skills to Highlight

- **Person-centred care**: hygiene, mobility, nutrition, risk prevention.
- **Psychosocial support**: communication, reminiscence, behaviour-sensitive approaches.
- **Digital skills (DigComp)**: documentation, secure communication, online information search.
- **Green competences (GreenComp)**: resource efficiency, waste management, safe chemical use.
- **Entrepreneurial skills (EntreComp)**: initiative, organisation, problem solving, self-management.

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- **Rights-based practice**: safeguarding, confidentiality, non-discrimination.

Additional/Optional Skills

- Advanced dementia support, palliative care, digital monitoring tools, multilingual communication.

Update Priorities

- Embed EU Skills Agenda micro-credential pathways.
- Strengthen training on dementia, digital tools, safety, resilience, and environmental responsibility.

5.4 Spain – Institutional Care Worker (CNO 5629; SISPE 56291025)

Profile Purpose and Scope

- Institutional care worker role in Spain's long-term care sector.
- Profile currently lacks clarity due to broad statistical classification in CNO-11; update aims to define concrete competences and align with ESCO.

Updated Role Description

- Provides ADL support, mobility, nutrition, psychosocial care, observation, documentation and teamwork in residential facilities.
- Addresses needs of older adults and people with disabilities.

Required Education & Qualification

- VET: TAPSD (EQF 4) or TCAE (EQF 3–4).
- Professional Certificate SSCS0208 (EQF 3).
- Practical training included in pathways.

Core Skills to Strengthen

- **Technical care**: hygiene, mobility, safe transfers, continence care, nutrition.
- **Cognitive and psychosocial support**: dementia basics, social activation, loneliness reduction.
- **Digital skills**: documentation, communication, GDPR compliance, basic digital inclusion of users.
- **Safety & risk management**: falls, hazards, emergencies.
- **Teamwork**: interdisciplinary coordination, shift handovers, procedure compliance.
- **Cultural competence**: communication adaptation, inclusive practices.

Optional Skills

- Advanced dementia care, palliative support, group facilitation, remote monitoring tools, "digital buddy" skills.

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Update Priorities

- Create a dedicated CNO occupation or unify profiles for home- and institutional-care.
- Add clear place for digital, green and transversal skills.
- Align role with ESCO 3412.4.2/3412.4.12 standards.

5.5 Austria – Nursing Assistant (Pflegeassistenz)

Profile Purpose and Scope

- Regulated health profession under the Austrian Health and Nursing Care Act (GuKG).
- EQF 4 role situated between basic care and higher-level nursing tasks.
- Update needed to integrate digital and environmental competences and clarify evolving delegation rules.

Updated Role Description

- Provides basic nursing care, vital-signs monitoring, wound management, mobility support, and therapeutic applications within defined scope.
- Works under supervision of diploma nurses and contributes to care planning and documentation.

Required Education & Qualification

- NQF/EQF 4 formal training: vocational schools, specialized programmes, or GuKG-recognized qualifications.

Core Competence Areas

- **Nursing tasks**: hygiene, dressing changes, medication support (within scope), diagnostic support.
- **Documentation**: digital care records, reporting changes.
- **Hygiene & safety**: infection prevention, instrument cleaning, safe handling.
- **Technical competences**: medical devices, monitoring equipment.
- **Communication and teamwork**: patient relations, interdisciplinary collaboration.
- **Emergency skills**: BLS, first aid.

Optional/Advanced Competences

- Dementia care, de-escalation, AI-assisted communication, intercultural skills, mobile-care competences.

Update Priorities

- Expand digital skills (EHR systems, AI-assisted communication).

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- Clarify green skills relevance and integrate organisational sustainability.
- Address system gaps: lack of specializations in geronto-psychiatry, wound management.

5.6 Czech Republic – Caregiver / Social Services Worker

Profile Purpose and Scope

- Supports clients in residential and home-based social services.
- Performs basic personal care, activation, social support, and non-medical assistance.
- Update required to modernise training (digitalization, specialization, quality standards).

Updated Role Description

- Provides hygiene care, meal assistance, transfers, activation activities, social contact, and basic counselling under a social worker's supervision.
- Works with multiple target groups: older adults, people with disabilities, clients in crisis.

Required Education & Qualification

- Basic education + accredited qualification course (currently 150 hrs), with a planned update to a structured 200-hour model consisting of a basic module, a universal module, and a specialization module.
- Additional yearly mandatory training (24 hrs).

Core Skills to Reinforce

- **Direct care tasks**: hygiene, mobility, activation, basic first aid.
- **Communication**: clients, families, team.
- **Crisis handling**: behavioural issues, safeguarding, abuse detection.
- **Digital skills**: documentation, communication, data protection.
- **Quality standards**: rights-based care, mental hygiene, risk detection.

Optional Skills

- Specialized modules for dementia, disability, digital tools, individualized care.
- Emotional resilience, time-management, intercultural skills.

Update Priorities

- Standardize curriculum and examinations; strengthen lecturer requirements.
- Add specialization options (e.g., dementia, disability).
- Increase digital training and integrate sustainability topics.

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5.7 Bulgaria – Social Assistant (Assistance for Adults, NAVET code: 7620402)

Profile Purpose and Scope

- EQF/NQF 3 role providing daily personal, social and healthcare support to adults and older people.
- Update needed to reflect digital, green and entrepreneurial competences.

Updated Role Description

- Supports basic activities of daily living, social participation, emotional wellbeing, community inclusion.
- Works in home, community, or residential settings.
- Handles documentation, supports communication, assists during crises.

Required Education & Qualification

- VET training after the first stage of secondary education.
- Qualification corresponds to professional roles coded under ESCO 5322/5321/3412.

Core Skills to Highlight

- **Daily care**: hygiene, movement, nutrition, household support.
- **Health monitoring**: basic observation, infection control, safe use of equipment.
- **Communication and psychosocial support**: emotional support, guidance, family liaison, shared decision-making in day-to-day care.
- **Digital skills**: secure communication, digital records, e-/m-health tools, assistive technologies, case management software for daily life organisation
- **Green competences**: waste segregation, safe chemical use, reduced paper use, energy-efficient routines, green mobility, identification and reporting of environmental hazards.
- **Entrepreneurial skills**: initiative, basic leadership and organisational techniques, problem-solving, community navigation, basic budgeting, participatory care planning, advocacy

Optional Skills

- Digital troubleshooting of e-/m-health tools/assistive technologies, green advocacy, advanced dementia care, motivational interviewing for behavioral change.

Update Priorities

- Strengthen digital literacy; embed sustainability knowledge and practices; reinforce safeguarding and rights-based care.
- Align terminology and structure with ESCO profiles.

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5.8 EU Profile – Home-Based Personal Care Worker (ESCO 5322)

Profile Purpose and Scope

- EU-level reference profile covering personal assistance in private homes.
- Update aims to modernise role description to reflect digitalization, sustainability and rights-based care.

Updated Role Description

- Provides routine personal support (hygiene, mobility, meals), emotional, social inclusion and home management.
- Follows care plans set by health/social professionals; reports changes.

Required Education & Qualification

- Basic VET qualification; first-aid, infection control, moving/handling certification.
- Training in eco-friendly routines and digital record-keeping.

Core Skills and Knowledge

- **Personal care and ADLs**: hygiene, dressing, continence, meal assistance.
- **Mobility support**: safe transfers, fall-prevention.
- **Digital care skills**: documentation, communication with team, cyber-safety.
- **Green skills**: eco-cleaning, waste sorting, resource efficiency.
- **Soft skills**: empathy, patience, cultural sensitivity, resilience.
- **Basic health literacy**: ageing, chronic disease basics, infection control.

Optional Advanced Skills

- Telehealth support, remote monitoring, creative engagement activities, end-of-life comfort care.

Update Priorities

- Clarity about boundaries between social care and health tasks.
- Strengthen digital-documentation and GDPR compliance.
- Add EU-wide sustainability standards for home-care settings.

5.9 EU Profile – Elderly Home Manager (Residential Care Manager for Older Adults)

Profile Purpose and Scope

- EU-level profile for managers leading residential facilities for older adults.

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- Update required to reflect digital transformation, sustainability, staff wellbeing and EU Care Strategy.

Updated Role Description

- Oversees operations, quality management, staff leadership, financial planning and regulatory compliance.
- Drives organisational culture, innovation, and person-centred care.
- Liaises with families, authorities and community partners.

Required Education & Qualification

- EQF 6–7: degrees in social care, nursing, gerontology, public health, business or management.
- Additional certification in care home management desirable.

Core Competence Areas

- **Leadership & HR**: supervision, conflict resolution, performance evaluation, wellbeing strategies.
- **Quality & safety**: safeguarding, risk management, infection control.
- **Digital transformation**: EHR, data analytics, cybersecurity, telecare, digital communication.
- **Sustainability**: energy efficiency, circular economy, green operations.
- **Strategic planning**: policy alignment, innovation, service redesign.
- **Communication & ethics**: family engagement, transparency, rights-based leadership.

Optional/Advanced Competences

- Change management, fundraising, community engagement, innovation management, advanced gerontology.

Update Priorities

- Integrate digital-leadership requirements.
- Add sustainability KPIs.
- Strengthen organisational culture, staff resilience, and person-centred quality frameworks.

6. Updated and New Occupational Profiles

This section presents the set of occupational profiles that have been updated or newly developed within the framework of the project by the partners, in the templates provided, reflecting the evolving realities and future skill needs of the older people care sector across Europe. Building on the findings from WP3 and WP4, the selected profiles address widespread skills gaps, incorporate emerging digital, green and organisational

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competences, and align with the priorities of the European Care Strategy and the European Skills Agenda. Each updated profile provides a clearer, more comprehensive definition of the role, integrates EU-wide competence frameworks, and reflects the requirements of modern, person-centred and sustainable care delivery. Together, these profiles form a foundation for harmonized training pathways, strengthened professional recognition and improved mobility across Member States, supporting the development of a resilient, future-proof long-term care workforce.

6.1 Occupational Profile 1 – Nurse Responsible for General Care (France)

General Coding

Enter a unique identifier for this Occupational Profile.
Nurse responsible for general care (*France Travail* Database, Code: J1506)

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
https://candidat.francetravail.fr/metierscope/fiche-metier/J1506/infirmier-infirmiere-en-soins-generaux-ide

Title

Provide the official title of the Occupational Profile.
Infirmier / infirmière en soins généraux (Infirmier D'Etat (IDE))

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
This job is accessible with a State Nursing Diploma, which is mandatory to practice. This can be supplemented by the Certificate of Capacity for blood sampling. The conditions for practising the nursing profession are set out in Articles L. 4311-1 to L. 4311-29 and R 4311-1 to R 4311-41 of the French Public Health Code ("*Code de Santé Publique*").

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
NQF Level 6

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.
MAIN RESPONSIBILITIES ● The nurse responsible for general care provides preventive, curative, or palliative care aimed at promoting, maintaining, improving or restoring a person's health. ● Assesses clinical situations and make diagnoses in the field of nursing ● Coordinate and organise activities in collaboration with the care team

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- Provides prescribed care and monitors its effects
- Assesses and communicates information related to the clinical situation to the doctor, and ensures its traceability
- Supports and establishes communication with the patient, their family and friends, and the multidisciplinary team
- Keeps abreast of professional developments and contributes to nursing research
- Informs and trains professionals and students
- Readjusts care under the supervision of the doctor

KEY SKILLS

Management, Social, Care

- Monitor changes in patients' health
- Research, process and communicate information to ensure continuity of care and activities
- Provide nursing care
- Apply care protocols
- Perform nursing diagnoses
- Organise the administration of medication according to medical prescriptions
- Conduct health education and prevention initiatives

Cooperation, Organisation and Skills Development

- Comply with Quality, Health, Safety, Security and Environment (QHSSE) rules (Skill linked to Ecological transition)
- Comply with rules, instructions, standards and operational procedures
- Help promote preventive health practices

Steering, Management, Regulatory Framework

- Comply with ethical and professional conduct rules

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

SECONDARY SKILLS

Management, Social, Care

- Identify clinical signs of emergency
- Ensure inclusive care practices for minorities
- Clearly communicate care instructions to patients
- Pass on a technique or skill
- Integrate feedback into practices
- Collaborate with multidisciplinary teams to monitor patients

Communication, Creation, Innovation, New technologies

- Participate in nursing research programmes

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- Integrate technological innovations into professional practices (skill linked to Digital transition)

Production, Construction, Quality, Logistics

- Maintain a clean and safe environment
- Prepare and install medical equipment

Steering, Management, Regulatory framework

- Ensure the administrative management of an activity
- Sort waste according to its future treatment or recovery (skill linked to Ecological transition)

Cooperation, Organisation and Skills development

- Build a relationship of trust with patients
- Communicate with patients and their families

PROFESSIONAL INTERPERSONAL SKILLS

These are the human and behavioural qualities that enable a nurse responsible for general care to interact well with colleagues and working environment.

- Listening skills, empathy
- Rigour and precision
- Responsiveness
- Organising your work according to priorities and objectives

KNOWLEDGE

This refers to the theoretical knowledge a nurse responsible for general care have acquired through training, whether certified or not, and experience.

Areas of expertise

Nursing care
Pharmacology
Knowledge of new information and communication technologies (skill linked to Digital transition)
Knowledge of the health, older people care and social ecosystem
Principles of dietetics and nutritional balance
Emergency and first aid procedures
Methods for identifying signs and degrees of pain
Use of patient management software

Standards and procedures

Care protocols
Procedures for caring for patients or accompanying persons
Occupational risk prevention rules
Confidentiality rules
Knowledge of individuals' rights
Public health Law

Professional techniques

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Treatment protocols
Procedures for caring for patients or accompanying persons
Occupational risk prevention rules
Confidentiality rules
Knowledge of individuals' rights
Public health law

Products, tools and materials
Use of e-health tools (skill linked to Digital transition)

RECOMMANDATIONS FOR UPDATING :

- **To be more specific to the older adults care sector,** skills should be presented in such a way as to immediately highlight the **concept of comprehensive care**: elderly people, who are generally affected by **chronic pathologies**, require **holistic care**, which calls for a high level of **multidisciplinary coordination** skills.

- **Collaboration, active listening and empathy** are essential skills and also contribute to the empowerment of professionals (**self-determination**) in relation to other healthcare professions.

- Better highlight **'clinical reasoning'** as an essential skill.

Digital skills
- **E-health competencies and basic digital knowledge** have a growing relevance.
- The nurse responsible for general care also has a **role in identifying digital accessibility issues within their teams.**
- The digital skills required to **manage remote user relations** must be specified.
- **Online therapeutic education** is an emerging skill.

Environmental skills
- Nurses' capacity for **systems thinking** and **critical thinking** contributes to the pursuit of sustainable development goals.
- S**upervisory role in relation to QHSE standards**
- **Promotion of eco-friendly practices** (automation of drug stocks, reduction of waste from oral nutritional supplements, reuse of certain medical devices, etc.)

Soft skills
- **In the specific context older people care sector, interpersonal skills with families** and **decision-making** should also be considered of primary importance.

Entrepreneurial skills
- The roles of **coordinating care** (e.g. the power to activate on-call duty) **and supervising of care teams** must be better reflected to make the occupational profile more attractive.
- **Financial skills (care budget management) and adaptability** in the post-COVID era have become more important (e.g. adapting the use of dressings in wound treatment).

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• The ability to **develop partnerships** with external stakeholders (medical laboratories, external doctors, etc.) • Their role is also essential as a **driving force in designing the strategic long-term projects of the nursing home**.

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.
• **The ability to detect depression in older people, aiming to prevent the isolation of older people** • **To be more specific to older people care sector, additional skills should be added about ageing and cognitive pathologies/dementia, fall/pain, nutrition/dehydration, bedsores, running away, restraint, end-of-life support, depressive symptoms…**

6.2 Occupational Profile 2 – Personal Care Attendant (Greece)

General Coding

Enter a unique identifier for this Occupational Profile.
GR-PCA-HBC-NQF3-5322-2025 • **GR** – Greece • **PCA** – Personal Care Attendant • **HBC** – Home-based care • **NQF3** – Referenced level in Greek NQF • **5322** – ISCO-08 / ESCO unit group “Home-based personal care workers”

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
Κοινωνικός φροντιστής / Επιμελήτής προσωπικής φροντίδας – Ε.Ο.Π.Π.Ε.Π.

Title

Provide the official title of the Occupational Profile.
English: Personal Care Attendant (Home-based Elderly & Disability Care) **Greek:** Επιμελητής/Επιμελήτρια Προσωπικής Φροντίδας **Description**: The updated occupational profile of the **Personal Care Attendant** in Greece reflects the evolving demands of integrated, person-centered care within home, community, and residential settings. Rooted at **EQF/NQF level 3**, the role combines hands-on personal support, psychosocial assistance, and basic home management with ethical responsibility, cultural sensitivity, and promotion of autonomy for older adults and persons with disabilities. In alignment with **CEDEFOP Skills Panorama**

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trends, it acknowledges the increasing complexity of care needs due to demographic ageing, greater prevalence of dementia and chronic conditions, and rising expectations for quality, safety, and dignity in social and health services. The profile clearly emphasizes structured training, supervised practical experience, and validated competencies aligned with national and European frameworks.
In line with **DigComp 2.2**, the profile now embeds essential **digital skills**, supporting communication with families and professionals, accessing secure care information, basic digital documentation, and practicing cyber safety. Through **GreenComp**, it integrates environmental awareness and sustainable household practices into everyday care routines, highlighting efficient use of resources, safe handling of disposables, and climate-related risk awareness. Mapped to **EntreComp**, the profile promotes initiative, problem-solving, and personal organisation in increasingly autonomous caregiving contexts, including self-employment and community-based service delivery. Aligned with the **European Skills Agenda**, it promotes lifelong learning, upskilling, and the use of micro-credentials in dementia, digital care, palliative support, and eco-friendly home care. Overall, this updated profile prepares Personal Care Attendants not only to deliver compassionate and high-quality care—but also to adapt, collaborate, and grow within a dynamic European care ecosystem.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).

Minimum formal education (entry requirement):

- Completion of **lower secondary education (ISCED 2)**.

Preferred / recommended level in line with EU trends:

- Completion of **upper secondary education (ISCED 3)** plus an accredited **Vocational Education and Training (VET)** program in home-based elderly and disability care, referenced at **NQF/EQF level 3**.
- Program should include:
  - Basic health and social care
  - Gerontology and dementia basics
  - Psychosocial support
  - Digital skills for care (aligned with **DigComp 2.2**)
  - Sustainability and household eco-practices (aligned with **GreenComp**)

Rationale / alignment with EU policy:

- CEDEFOP data show that personal care and personal service workers are increasingly expected to hold at least medium-level qualifications (ISCED 3–4), with the share of low-qualified workers steadily decreasing.
- The **European Skills Agenda** calls for up- and reskilling to support the green and digital transitions and to strengthen employability, quality, and resilience of frontline care workers.

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.

- **Greek NQF Level:** 3 (as in the existing national occupational profile)
- **Corresponding EQF Level:** 3

This level reflects routine but responsible work carried out under supervision within an interdisciplinary team, with growing autonomy in planning daily tasks and monitoring risks in home-based environments.

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Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.

1. Person-centred care, health & social support

- Apply **basic principles of person-centred care** for older people and people with disabilities at home, preserving dignity, autonomy, and self-determination.
- Provide **personal hygiene support** (bathing, grooming, dressing, continence care) using appropriate equipment and consumables, respecting privacy and cultural preferences.
- Assist with **basic mobility and transfer techniques** (bed–chair, use of aids, fall-prevention strategies) following safety and ergonomic principles.
- Prepare, serve, and monitor **simple, nutritious meals**, respecting dietary recommendations, religious restrictions, and medical instructions.
- Apply **basic first aid**, recognize signs of common deterioration (e.g. confusion, fever, shortness of breath), and escalate to health professionals.
- Maintain a **safe and clean living environment**, including infection-prevention practices and safe use of domestic equipment and cleaning products.
- Understand basic **social protection and local support services** (municipal social services, day-care, respite services) and support the person to access them.

2. Psychosocial support, communication & ethics

- Provide **emotional support and social stimulation**, including conversation, reminiscence, and support for participation in cultural, religious, and community life.
- Apply basic **dementia-sensitive communication** and behaviour management strategies, recognizing early signs of cognitive and mental health issues.
- Use **active listening, observation and simple counselling techniques** to understand needs, preferences, and risks (loneliness, neglect, abuse).
- Respect **human rights, non-discrimination, and cultural diversity**, including the rights of older persons and persons with disabilities.
- Apply **confidentiality and personal data protection** rules, including handling of sensitive care and health information.

3. Digital competences in care (aligned with DigComp 2.2)

Information & data literacy

- Use smartphones/tablets or simple digital tools to **access, read and update** care instructions, appointments, and basic electronic care notes.
- Retrieve **reliable health and social care information** online for everyday questions (nutrition, physical activity, prevention), recognizing misleading content.

Communication & collaboration

- Communicate with supervisors, nurses, social workers and family carers using **phone, messaging apps, or secure care platforms**, following organisational rules.
- Participate in **online team briefings or supervision** when required (video calls, messaging groups).

Digital content creation

- Record simple **digital notes or photos** (where permitted) to document the person's situation (e.g. skin condition, home risks), respecting privacy and consent.

Safety

- Apply **cyber-hygiene** principles (strong passwords, secure storage of devices, safe sharing of personal data, recognition of phishing or fraud).

Problem solving

- Identify simple **technical problems** (device not charging, app not opening) and apply basic troubleshooting or seek support appropriately.

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4. Sustainability and "green" competences (aligned with GreenComp)

- Promote **resource-efficient practices** in the home: energy-saving, water-saving, and reduction of waste in everyday care routines (laundry, cleaning, food preparation).
- Use and store cleaning products and disposables in ways that **minimize environmental impact and health risks** (correct dosage, proper disposal of single-use items).
- Support the person in making **sustainable choices** (e.g. local/seasonal foods, appropriate heating/cooling, low-waste daily habits) while respecting their preferences.
- Recognize environmental factors (poor air quality, damp, heatwaves, cold) that can **affect health**, and communicate these risks to the team or family.
- Demonstrate attitudes consistent with **"embodying sustainability values"**: care for the person and for the planet, fairness, and intergenerational responsibility.

5. Transversal and entrepreneurial competences (aligned with EntreComp & European Skills Agenda)

- **Self-management and organisation:** plan daily visits, manage time and priorities, keep appointments, and balance multiple clients safely.
- **Initiative & problem-solving:** spot opportunities to improve the person's quality of life (simple adaptations, meaningful activities, link to community resources) and propose solutions within own remit.
- **Working with others:** collaborate effectively with multidisciplinary teams (nurses, doctors, social workers, physiotherapists) and with informal carers, respecting roles and boundaries.
- **Basic financial and administrative literacy:** support the person in simple administrative tasks (paying bills, scheduling appointments, arranging transport) without taking over their legal responsibilities.
- **Lifelong learning mindset:** engage in continuous learning (short courses, micro-credentials) in areas such as dementia care, digital tools, or sustainable home care, in line with the Skills Agenda's focus on "skills for life".

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

These are **non-essential but desirable** skills that can enhance employability and service quality:

- **Advanced dementia and mental health care**: non-pharmacological interventions, managing challenging behaviours, supporting carers.
- **Palliative and end-of-life care**: comfort measures, communication about loss and grief, cooperation with home palliative teams.
- **Multilingual and intercultural competence**: conversational level in additional languages (e.g. English, Russian, Albanian) and intercultural communication skills for diverse clients.
- **Advanced digital skills**: use of remote monitoring devices, telehealth platforms, e-prescription apps, and digital documentation systems at higher DigComp levels.
- **Enhanced GreenComp skills**: acting as a **"green ambassador"** in home care (guiding clients and families in sustainable choices, safe waste segregation, and climate-related risk awareness).
- **Entrepreneurial practice**: skills for self-employment or social entrepreneurship in home care (basic marketing, client relations, record-keeping, cost awareness), consistent with EntreComp's "Resources" and "Into Action" areas.

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- **Driving license and mobility**: holding a driving license and being able to travel between clients, particularly in rural or poorly connected areas.

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.

A. Work Experience Requirements

- **Supervised practical placement** in home-based care, day-care or community settings, **minimum 200–400 hours**, including:
  - Personal care routines
  - Meal preparation and home management
  - Digital documentation and communication
  - Exposure to dementia and multi-morbidity cases
- Preferably completed in organisations that participate in **Pact for Skills** or other EU-level upskilling initiatives.

B. Professional Certifications

- National **EOPPEP** certification (when available) or equivalent formal validation of competences.
- Valid **First Aid / Basic Life Support** certificate.
- Short specialized certificates (possibly micro-credentials) in:
  - Dementia care
  - Digital skills for care
  - Environmental sustainability in home care settings.

C. Physical and Cognitive Abilities

- Sufficient **physical fitness** to perform manual handling, assist with transfers, and carry out light domestic tasks safely.
- **Good vision, hearing and fine motor skills** for safe medication prompting (without administering beyond legal scope), handling equipment and observing changes in condition.
- Emotional resilience and basic stress-management strategies to cope with demanding situations, loneliness of clients, and end-of-life care.

D. Future-proofing and Skills Intelligence (CEDEFOP Skills Panorama)

- The profile recognizes CEDEFOP evidence that:
  - Demand for **personal care workers**, including home-based care, is growing due to ageing populations.
  - Skill needs are shifting towards a **mix of technical, digital, soft and green competences**, with rising expectations for higher qualifications and autonomous decision-making in complex home situations.

6.3 Occupational Profile 3 – Care Home Workers (Spain)

General Coding

Enter a unique identifier for this Occupational Profile.
CNO-11 5629[2]

[2] The Spanish National Statistics Institute (INE) develops the National Classification of Occupations (CNO), a statistical system based on the tasks performed by workers. The current version, CNO-11 (2011), is broadly comparable to ESCO, the European classification used

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CNO-SISPE 2011 56291025[3]

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
3412.4.2 - Care Home Worker 3412.4.12 -Residential Home Older Adult Care Worker

Title

Provide the official title of the Occupational Profile.
This occupational profile is currently framed through two official classification sources: ***1. Trabajadores de los cuidados a las personas en servicios de salud no clasificados bajo otros epígrafes*** **(CNO-11 5629)** CNO-11 (INE) defines this group as "*Health Support Workers not elsewhere classified"*, a broad residual category that includes auxiliary roles (e.g. dental, pharmacy or sterilisation assistants) alongside care-related occupations. The current definition does not specify competence standards, qualification requirements or the distinct nature of long-term care work, limiting the visibility and professional recognition of care workers in institutions, who constitute the core of Spain's long-term care workforce. ***2. Cuidadores de personas con discapacidad y/o dependencia, en instituciones*** **(CNO-SISPE 2011 56291025)** CNO-SISPE 2011 (SEPE) refines the category through subcodes, notably 56291025 – *Caregivers of Persons with Disabilities and/or Dependency in Institutions*, which clearly identifies institutional care workers. However, no detailed description of the associated tasks, competences or role boundaries is provided. **Rationale for Updating the Occupational Profile** Stakeholders consulted highlight several structural limitations of CNO-11 5629: • The category is **overly broad** and technically oriented, grouping together occupations with very different functions and training pathways. • It **does not reflect the core competences** required in residential long-term care, including person-centred care, communication, digital skills and safe-mobility practices.

within the EURES network. Source: INE – https://www.ine.es/dyngs/INEbase/en/operacion.htm?c=Estadistica_C&cid=1254736177033&menu=ultiDatos&idp=1254735976614

[3] The CNO-SISPE 2011 classification, used by Spain's State Public Employment Service (SEPE), is an extended version of the national CNO-11. It retains the same primary four-digit structure of CNO-11, ensuring full consistency, and adds further digits to provide a more detailed breakdown for employment service management and job-matching purposes. See: SEPE, 56291025 Caregivers of Persons with Disabilities and/or Dependence, in Institutions, CNO-SISPE 2011 (version 20 October 2023), available at: https://www.sepe.es/dam/jcr:a5d96b61-4d5c-437e-bbe1-e487ada560e4/Ocupaciones_SISPE_Web%20SEPE-20%20octubre%202023.pdf

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- The lack of definitional clarity **hampers labour market analysis**, as institutional care workers are statistically dispersed across several occupation codes.
- The current classification limits the capacity to **plan training provision**, assess shortages, or design targeted upskilling policies—elements central to the European Skills Agenda and the evolving EU Care Strategy.

Options Identified by Sector Experts

Two policy options emerged during the consultation process:

1. **Creation of a new, dedicated occupation within CNO-11** for institutional care workers, improving visibility, statistical robustness and alignment with existing categories (e.g., CNO-11 5710 – Home-based Care Workers).
2. **Establishment of a unified occupation covering both institutional and home-care settings**, acknowledging that many core tasks and competences are shared. This option would support the harmonisation of qualification pathways and the development of a coherent professional profile.

Stakeholder consultations noted that Spanish Institute for Older Persons and Social Services (IMSERSO) is already working on **a single, unified Certificate of Professionalism covering both domiciliary and institutional care**, precisely to address current dispersion between training routes and to support a more integrated approach to workforce development. This ongoing reform strengthens the relevance and feasibility of the unified occupational model within the CNO-11 framework.

If the unified model were adopted, particular attention should be paid to safeguarding the specificities of home-care work — especially household-related tasks — to ensure that domestic work is not used to dilute or downgrade professional care competences.

Finally, stakeholders underline the importance of the **chosen occupational title**, as it directly influences the social recognition and perceived professional status of the workforce, a key dimension in the implementation of EU principles on quality care and decent work.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).

The qualification requirements for this occupation are defined by several official sources in Spain: the National Catalogue of Professional Qualifications (INCUAL–CNCP), the Professional Certificates regulated by SEPE, and the Vocational Education and Training (VET) titles established by the Ministry of Education. Together with regional social care regulations, these frameworks determine the accredited pathways that grant access to institutional care roles. The main qualification routes consist of **Vocational Education and Training (VET) programmes** and the relevant **Professional Certificate**, both of which are directly aligned with the functions performed in this occupation.

1. VET Programmes

1.1. Técnico en Atención a Personas en Situación de Dependencia (TAPSD)

- Regulated by Royal Decree 1593/2011
- CNCP Level 2 – EQF Level 4

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- Identified by INCUAL as the qualification most closely aligned with the tasks associated with Profile 5629.
- Provides training in basic care, psychosocial support, safe mobility, communication, and person-centred care.

1.2. Técnico en Cuidados Auxiliares de Enfermería (TCAE)

- Regulated by Royal Decree 546/1995
- CNCP Level 2 – EQF Levels 3–4
- Primarily associated with the health sector, yet frequently required for social care positions in residential settings.
- Its relevance depends on whether the role is classified within the health or social care domain.

Sector experts highlight that:

- **TCAE graduates typically aspire to work in the healthcare sector rather than in long-term care**, as hospital positions offer higher salaries, lighter workloads and greater social recognition. Consequently, this qualification does not provide a sufficiently stable or consistent supply of workers for residential care services.
- **Nursing education in Spain should be updated** to include specific training on the care of older persons and individuals with disabilities, who represent a large proportion of patients across healthcare settings. Experts recommend revising the TCAE curriculum to integrate competences and content currently included in the *Técnico en Atención a Personas en Situación de Dependencia* programme, thereby improving alignment between formal training pathways and the actual needs of long-term and geriatric care services. [4]

2. Professional Certificate

SSCS0208 – Atención sociosanitaria a personas dependientes en instituciones sociales

- Regulated by Royal Decree 1379/2008 (as amended by RD 721/2011 and RD 625/2013)
- CNCP Level 2 – EQF Level 3
- The main professional requirement for employment in residential care homes for older persons.
- Fully aligned with the core tasks of the occupation (hygiene, nutrition support, mobility assistance, psychosocial support, and person-centred care).

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
The qualifications most commonly required for this occupation correspond to **CNCP Level 2 / EQF Level 3**, typically achieved through Intermediate VET programmes. In practice, some workers also access the occupation with **Lower Secondary Education (ESO)** or **Basic VET**, although these pathways do not fully reflect the competences required in long-term care settings.

[4] This recommendation aligns with the priorities of both the EU Care Strategy and the European Skills Agenda, which call for strengthening the skills base, professionalisation and attractiveness of the long-term care workforce. Updating nursing and VET curricula to include core competences in ageing, disability and person-centred care would help Member States build a more resilient, qualified and mobile care workforce.

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SEPE experts suggest that, in updating Occupational Profile 5629, Spain should align the qualification level with equivalent ESCO profiles. While the CNO currently places both home-care and institutional care workers in **Major Group 5** (Workers in food service, personal services, protective services and sales), the closest ESCO occupations—3412.4.2 Care Home Worker and 3412.4.12 Residential Home Older Adult Care Worker—are classified under **Major Group 3** (Technicians and associate professionals), indicating a higher expected level of responsibility and competence.

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.

CORE SKILLS

A. Technical Skills (Job-specific)

Personal care and Activities of Daily Living (ADL)

- Assist with personal hygiene, grooming and oral care.
- Support dressing/undressing and personal appearance.
- Provide continence care and assist with toileting routines.
- Support eating and drinking, including preparation, distribution and supervision of meals.
- Promote autonomy, independence and quality of life in all ADL routines.

Mobility, transfers and physical support

- Perform safe transfers (bed–chair, wheelchair, hoist).
- Assist with mobility, posture and gait, applying ergonomic principles.
- Use assistive devices correctly and safely.
- Apply fall-prevention procedures.

Sociosanitary support

- Recognise changes in physical, cognitive or emotional condition and report promptly.
- Prepare rooms, materials and equipment for clinical assessments/interventions.
- Follow infection prevention and control protocols (PPE, hygiene, isolation).
- Apply basic health, hygiene and nutrition routines.

Psychosocial and emotional support

- Provide emotional support and active listening.
- Implement basic cognitive stimulation and social activation activities.
- Support basic de-escalation in situations of agitation or behavioural or emotional distress, following established guidelines and seeking assistance when required.
- Facilitate meaningful activities, leisure and occupation.
- Address unwanted loneliness and promote social participation and self-determination.

Communication and user interaction

- Communicate clearly, empathetically and respectfully with users and families.
- Use adapted communication methods (AAC, pictograms, simplified language).
- Manage emotionally sensitive interactions appropriately.
- Support communication needs of users with sensory or cognitive impairments.
- Demonstrate cultural competence and intercultural communication skills.

Organisation, teamwork and documentation

- Follow individual care plans and institutional procedures.
- Prepare and organise materials and equipment needed for care.
- Record observations, incidents and routines accurately (paper/digital).
- Conduct shift handovers and share relevant information with the interdisciplinary team.
- Prioritise and adapt tasks according to changing user needs.

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- Demonstrate adaptability in dynamic care environments.

Safety, risk management and emergency response

- Identify risks (falls, hazards, behavioural risks) and act to prevent harm.
- Apply workplace health and safety procedures.
- Provide basic first aid, basic life support and AED assistance when required.
- Use correct techniques for emergency mobilisation and immobilisation.

B. Digital Skills

- Use digital care-record systems to document care activities.
- Communicate professionally using authorised digital tools.
- Support basic digital inclusion for users (e.g., video calls, reminders).

D. Transversal Skills

- Demonstrate empathy, patience, respect and supportive communication.
- Work collaboratively within interdisciplinary teams.
- Plan, organise and prioritise own work effectively.
- Demonstrate initiative and practical problem-solving within established protocols, responding promptly and appropriately to urgent or unexpected situations.
- Maintain emotional resilience and manage stress effectively.
- Apply self-care strategies to prevent burnout.
- Uphold ethical behaviour, responsibility and reliability.
- Engage in continuous learning and professional development.
- Exhibit cultural sensitivity and non-discriminatory practice.

CORE KNOWLEDGE

A. Knowledge on ageing, disability and long-term care

- Physical, cognitive and psychosocial aspects of ageing.
- Common chronic conditions, multimorbidity and frailty.
- Dementia and associated behavioural symptoms.
- Mental health challenges in older persons and people with disabilities.
- Types of disability (physical, intellectual, sensory, psychosocial) and support needs.

B. Person-centred and rights-based frameworks

- Principles of dignity, autonomy, privacy and self-determination.
- Ethical standards, codes of conduct and safeguarding.
- Rights of older adults and persons with disabilities.
- The role of families and informal carers.
- Self-determination, participation and community inclusion as components of holistic care.

C. Sociosanitary and health-related knowledge

- Nutrition, hydration and safe food handling.
- Infection prevention and control.

D. Communication and psychosocial knowledge

- Techniques for emotional support, validation and conflict management.
- Cognitive stimulation strategies.
- Behavioural management and crisis de-escalation.
- Communication supports for sensory impairment or cognitive decline.
- Sociocultural diversity and intercultural approaches.

E. Occupational health, safety and ergonomics

- Workplace risk prevention and safety regulations.
- Ergonomic principles for safe handling and transfers.

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- Emergency protocols and first aid.
- Psychosocial risks and emotional fatigue linked to care work.

F. Organisational and institutional knowledge

- Care protocols, personalised care plans and quality standards.
- Documentation and reporting procedures.
- Roles within interdisciplinary teams and coordination pathways.
- Institutional routines, workflows and care models.

G. Digital and data protection knowledge

- Basic care-related digital tools and systems.
- GDPR and confidentiality rules.
- Secure use of digital communication tools.

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

OPTIONAL SKILLS

Advanced care competences

- Advanced dementia communication and behavioural support.
- Application of basic palliative and end-of-life care measures under supervision.
- Spiritual accompaniment and end-of-life support.
- Facilitation of group activities, creative workshops and reminiscence therapy.
- Apply basic post-mortem care following protocols.
- Support medication administration within legal scope and under supervision.

Advanced digital competences

- Creating simple digital content (reports, summaries).
- Supporting colleagues with digital tools (“digital buddy” role).

Community and inclusion competences

- Supporting participation in community activities and social engagement.
- Linking users to community resources and services.

Green and Sustainability Skills

- Contribute to sustainability initiatives within the care setting by applying eco-responsible routines—such as correct waste sorting, safe use of cleaning products and responsible use of materials and resources—always following the organisation’s environmental guidelines.

Language competences

- Knowledge of regional languages, sign language or foreign languages as relevant.

Leadership and mentoring competences

- Mentoring new staff or trainees.
- Participation in quality improvement and audit processes.

OPTIONAL KNOWLEDGE

- Basic anatomy, physiology and vital signs.
- Medication basics (scope-limited).
- Advanced gerontology and neurodegenerative diseases.
- Basic awareness of mental health conditions and behavioural challenges, including situations related to substance use, in order to recognise signs of distress and report them appropriately.
- Essential awareness of end-of-life, palliative care and grief-support processes.

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- Holistic, spiritual and culturally sensitive care frameworks.
- Sociocultural and community development approaches.
- Sustainability and environmental care principles.

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.

1. Work Experience Requirements

Access to this occupation does not require prior professional experience, as the main regulated training pathways in Spain (SSCS0208, TAPSD, TCAE) include **mandatory supervised practical training**, which provides initial on-the-job exposure. However, employers regularly **value previous experience** in:

- direct care or support for older adults or persons with disabilities,
- cleaning and facility services,
- hospitality or customer service,
- childcare,
- volunteering or community support roles.

According to the report The Employment Offer Profiles 2023 ("Los perfiles de la oferta de empleo 2023"), published by the SEPE Observatory of Occupations,

- 13% of job offers explicitly accept applicants without prior experience,
- 12% require at least one year of experience,
- and around one third specify experience in tasks such as patient transfer, positioning, care of bedridden persons and support for persons with disabilities.

In rural or geographically dispersed areas, **experience in itinerant or autonomous care provision** is considered an advantage.

2. Commonly requested or recommended certifications

- **Medical Fitness Certificate**: commonly required by residential care providers to verify physical and psychological suitability (not standardised nationally, but widespread in practice).
- **Food Handling Certificate**: although food safety content appears in vocational curricula, The Employment Offer Profiles 2023 indicates that some employers request updated food-handling certification when meal assistance is part of the role.
- **Occupational Risk Prevention (PRL) – sector-specific training**: while basic PRL is included in VET and Certificates of Professionalism, employers frequently require additional updated PRL modules, especially on: ergonomic risk prevention (transfers and patient mobilisation), biological hazards, and safe handling of chemical cleaning agents. The SEPE report notes that training in moving, transferring and positioning patients is explicitly required in numerous job postings.
- **First Aid / Basic Life Support (BLS) + AED**: not legally mandated but frequently requested in institutional care settings. The SEPE report confirms that some job offers explicitly require first aid or BLS + AED certification.
- **Safe Moving and Handling Certification**: although included at basic level in SSCS0208, employers often request recent or additional accreditation in safe patient handling, particularly in residential care settings.
- **Driving Licence (B)**: especially relevant for rural or multi-site models. According to The Employment Offer Profiles 2023, 12% of job offers require a driving licence, and 8% require access to a private vehicle.

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- **Criminal Record Certificate**: although not currently required by Spanish legislation for working with older adults, sector experts consulted during the research activities recommend introducing this requirement. The rationale is to extend to older adults the same level of protection currently mandated for work with minors, ensuring equivalent safeguarding standards across people in situations of vulnerability.

3. Considerations on Green and Entrepreneurial Competences

Experts consulted in Spain report that green and entrepreneurial competences, as promoted by European skills frameworks, have **limited relevance and practical applicability** for this occupation. Entrepreneurial competences are seen as misaligned with the highly structured, protocol-driven nature of direct care work, while green competences are viewed as responsibilities more closely linked to **management and facility administration**. Given the sector's structural challenges and resource constraints, experts consider these expectations **disconnected from day-to-day practice** for care workers.

6.4 Occupational Profile 4 – Nursing Assistant (Austria)

General Coding

Enter a unique identifier for this Occupational Profile.
AT-PA-2025

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
Health care Assistants

Title

Provide the official title of the Occupational Profile.
Pflegeassistenz (Nursing Assistant)

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
The Nursing Assistant (Pflegeassistenz) qualification is regulated under the Austrian **Health and Nursing Care Act (GuKG)** and corresponds to a **National Qualifications Framework (NQF) Level 4** qualification. Typical qualification pathways include: • **Short-cycle or specialised vocational training programmes** • **Apprenticeship-equivalent pathways** at NQF Level 4 • **Intermediate VET programmes (BMS – Berufsbildende mittlere Schule)** in the fields of *Health, Social Care, and Pedagogy*, also at NQF Level 4 • **Specialised training and further education courses** in health and social care **Required Qualification**

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To practice as a Nursing Assistant in Austria, individuals must complete **one of the following recognised qualifications**:

- **Formal Nursing Assistant Training (Pflegeassistenz), NQF Level 4**
- **Accredited health profession qualifications** at the intermediate vocational level
- **Training programmes in health and nursing care** recognised under the GuKG
- **Certificates and formal qualifications** specifically designated for Nursing Assistant roles (e.g., Pflegeassistenz NQF Level 4)

These programmes include both theoretical and practical training, covering basic care, support in nursing procedures, hygiene and safety, mobility assistance, communication, and supervised participation in care processes as defined in **Paragraph 3 of the GuKG**.

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
Typically **EQF Level 4** (national designation under the GuKG)

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.

1. Nursing Care Competences

- Applying nursing terminology and professional language
- Providing basic nursing and health care support in hospitals, ambulatory units, and home care settings
- Delivering older people care (e.g., preventive health dialogues, basic palliative care support)
- Using complementary nursing methods within the permitted scope
- Monitoring patients (e.g., vital signs, blood pressure, blood glucose, basic clinical observations)
- Performing basic therapeutic applications (e.g., heat, cold, and light therapy)
- Carrying out simple wound care and applying dressings (e.g., simple wound management, thermoplastic bandages, compression bandages)
- Administering medication within the authorised scope (e.g., oral medication, subcutaneous injections, insulin administration)
- Performing basic medical support tasks (e.g., capillary blood sampling, micro- and single-use enemas, airway suctioning)
- Supporting target groups such as people requiring incontinence care or long-term care
- Conducting safe patient positioning, mobilisation, and handling tasks

2. Care Planning, Documentation, and Professional Knowledge

- Conducting basic nursing assessments (e.g., nursing anamnesis)
- Applying nursing classifications and understanding care planning
- Explaining nursing procedures to patients and relatives
- Using mobile and digital care documentation systems
- Providing care counselling and documenting patient information
- Forwarding health-relevant information to nursing or medical staff
- Understanding the legal framework governing nursing assistance, including medical and nursing care regulations
- Recognising risks in assisted living or supervised care environments

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3. Hygiene and Safety Competences

- Applying hygiene principles and maintaining infection control standards
- Performing hygiene and sterilisation procedures in line with hospital hygiene guidelines
- Carrying out medical cleaning tasks (e.g., disinfecting instruments and equipment)
- Understanding medical hygiene and cross-contamination prevention

4. Medical and Diagnostic Support Skills

- Supporting basic medical diagnostics such as:
  - Standardised blood tests
  - Urine analysis
  - Stool analysis
- Conducting point-of-care testing as instructed
- Basic knowledge of medical functional diagnostics
- Understanding medical equipment and its safe application (e.g., monitoring devices)

5. Technical Competences

- Operating medical and nursing care devices
- Using medical instruments and disinfection equipment
- Handling patient monitoring devices
- Using medical information and documentation systems (e.g., hospital information systems)

6. Social, Pedagogical, and Communication Competences

- Applying basic knowledge of social work and social pedagogy
- Supporting patients in daily living activities (e.g., personal hygiene, household-related assistance)
- Communicating effectively with patients, relatives, and healthcare teams
- Providing empathetic,person-centred support
- Applying de-escalation strategies and contributing to violence and aggression management (identified by experts as an important area for improvement)

7. Emergency and First Aid Skills

- Providing first aid, including:
  - Cardiopulmonary resuscitation (CPR)
  - Basic wound care
  - Safe positioning and handling of injured persons

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

- Discretion and the ability to maintain confidentiality
- Commitment and readiness to take initiative
- High frustration tolerance and emotional resilience
- Helpfulness and service orientation
- Strong empathy and sensitivity towards patients' needs
- Effective communication skills

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- Physical resilience and ability to handle physically demanding tasks
- Teamwork skills
- Ability to collaborate in interdisciplinary teams
- Sense of responsibility and reliability
- **Enhanced dementia care skills**
- Use of AI-supported tools to improve communication with patients with limited German language skills
- Intercultural communication competencies
- Basic knowledge in wound care (execution only under medical prescription)
- Additional knowledge relevant for mobile care (e.g., managing assistive devices)

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.

1. Professional Boundaries and System-Level Insights

Experts highlighted:

- **Nursing Assistant and Nursing Associate roles are currently well staffed**, while **Registered Nurses** remain in shortage and offer more development potential.
- Suggestions included:
  - Allowing Registered Nurses to prescribe or administer certain over-the-counter medications
  - Allowing Registered Nurses in mobile care to renew prescriptions or care aids without requiring a physician each time
- **Geronto-psychiatric nursing** is missing as a dedicated professional profile for mobile and residential care.
- Austria currently lacks specialisations for:
  - Long-term care (mobile or residential)
  - Wound management (Registered Nurses may only make recommendations; implementation requires medical order)

These system-level gaps do **not** change the core role of Nursing Assistants but shape training needs and upskilling pathways.

2. Green and Digital Competences

Green Competences

- Waste separation and waste reduction are relevant but viewed as **general education topics**, not specialised nursing competences.
- These should be rooted in school education rather than professional specialisations.

Digital Competences

- AI-supported systems have potential to enhance language support, especially when interacting with patients who do not speak sufficient German.
- Digital documentation tools and basic e-health competencies are increasingly relevant in everyday practice.

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6.5 Occupational Profile 5 – Caregiver-Worker in Social Services (Czechia)

General Coding

Enter a unique identifier for this Occupational Profile.
According to the Catalogue of Work (Government Decree No. 222/2010 Coll.), the position of a social services worker is classified under the code *41-02 Social Services Worker* According to the CZ-ISCO Classification of Occupations (the Czech version of the International Standard Classification of Occupations), the corresponding code for this position in long-term care is 5322 *Workers Providing Direct Personal Care in Residential Settings*

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
The position of a caregiver is defined in Act No. 108/2006 Coll., on Social Services The project also produced a handbook titled Social Services Worker (caregiver), which describes, presents, and briefly explains this profession. Link: https://www.mpsv.cz/cms/documents/1b18e98b-b2fc-431a-7771-372067c0bd6b/P%C5%99%C3%ADru%C4%8Dka_povol%C3%A1n%C3%AD_PSS_final.pdf

Title

Provide the official title of the Occupational Profile.
Caregiver – worker in social services A caregiver provides direct care in outpatient or residential facilities and also in the client's home environment. It focuses on helping with personal hygiene, dressing, handling devices and aids, maintaining cleanliness and supporting clients' self-sufficiency. It supports the maintenance of basic social and societal contacts, strengthens activation, and helps to ensure the psychosocial needs of clients, performs basic educational and non-pedagogical activities (including manual dexterity training, motor skills training, etc.). Under the supervision of a social worker, it also performs screening and basic social counselling.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
Current state: A Caregiver must have completed at least basic education and completed an accredited qualification course, which must be completed within 18 months of the date of commencement of employment. Until this condition is met, the employee performs the activity of a social services worker under the supervision of a professionally qualified caregiver. The content of the qualification course is regulated by implementing Decree No. 505/2006 Coll. and consists of a general and a special part. The length of the course is set at a minimum of 150 hours. A caregiver also can have secondary education (3 or 4 year of studying). High school educated social workers also can work as caregivers.

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At the same time, the employer is obliged to provide the caregivers with further training of at least 24 hours per calendar year, which strengthens their qualifications (courses with accreditation of Ministry of Labour and Social Affairs, professional conferences, internships etc.).

Proposal for change:
1. **Increase in the length of the course** – Specifically, it is necessary to increase the scope of the course from the current 150 hours up to 200 hours. Basic course in first 3 months (24 hours), universal course in first year (120 hours) and then specialisation course – up to 18 months (48 hours) – 5 different modules according to the target group of clients
2. **Improvement of the content structure** – The course needs to be complemented with new thematic areas so that it responds to developments and current needs in social services. Topics that are currently missing in the qualification course are: digitization, approaches to individualized care or prevention of risky behaviour. At the same time, the course needs to emphasize the emphasis on working with various target groups, including seniors or people with disabilities.
The course content must cover a wide range of social service clients - it is a question of whether there should be one universal course for all workers or whether there should be some specialization.
3. **Stricter requirements for lecturers** – We recommend hiring lecturers who will be qualified professionals with practical experience in the field and proven education in lectured area. Instructors should be able to use interactive teaching methods to acquire the necessary competencies.
4. **Methodology and standardization of the course** – It is necessary to create a unified methodology for qualification courses to ensure comparable quality and to introduce standardized exams to verify knowledge and skills.

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
NQF – The Czech Republic uses the ICED international classification. According to ICED, the code for the required level of education is 244. In this case, the caregiver must also complete an accredited qualification course. EQF 2 with accredited qualification course.

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.
Act No. 108/2006 Coll., on Social Services, does not explicitly state the specific skills or personal characteristics necessary for the performance of the position of the caregiver, but it is possible to derive the necessary skills and knowledge on the basis of the job description and qualification requirements. They should therefore be able to: ■ establish and maintain a relationship with clients ■ to support clients in independence and development of their skills ■ respond to the individual needs of clients and different target groups ■ manage basic care tasks and organize daily care The creation of a detailed competency model for the caregiver position will be the focus of the upcoming period.

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Essential skills/knowledge: According to current qualification course – caregiver has to be able provide direct care to clients, specifically handling basic care (help with hygiene, nutrition and food preparation, transfers, positioning and accompaniment. Caregiver also helps to clients with activation and resocialization. They will be able to work with most common compensatory aids, provide basic first aid and also basically handle crisis situations. Caregiver has to be able use respectful communication with the client, their families and also with colleagues. They should have good sensitivity to client abuse and know how to work with any cases of suspected abuse. Caregiver has to understand the importance of mental hygiene, has to have basic orientation in quality standards in social services.

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.
Optional skills: Flexibility, perspective and patience are perceived also as important. Expert knowledge of the specifics of the target group will enable workers to work effectively with potentially challenging situations. If a worker has enough time for individual tasks, does not get into time pressure, or can manage it effectively, they can provide care in a high standard of quality through individual knowledge of the client and their story.

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.
Requirements beyond core and optional skills and knowledge are based on the type of social service in which the caregiver works, as well as the type of client they work with. The basic prerequisites for kind direct work with clients are communication, empathy and listening. Caregivers also need to have individual knowledge of the client and theirs story. Also basic digital and technical literacy is essential due to technological advances and must be continuously developed and deepened. Physical and Cognitive Requirements Ability to communicate clearly with different groups, use digital systems, resolve conflicts, make complex decisions in time-pressured situations, and adapt to technological and regulatory developments.

6.6 Occupational Profile 6 – Social assistant - Specialization “Assistance for adults” (Bulgaria)

General Coding

Enter a unique identifier for this Occupational Profile.
Social assistant (National Agency for Vocational Education and Training (NAVET) code: 762040), specialization “Assistance for adults” (NAVET code: 7620402)

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Hyperlink

Provide a direct link to the current version of the relevant Occupational Profile, if available online.
https://www.navet.government.bg/bg/media/NAREDBA-14-OT-18-YuNI-2020-G-ZA-PRIDOBIVANE-NA-KV_0.pdf

Title

Provide the official title of the Occupational Profile.
Title: Social assistant, specialization "Assistance for adults" **Occupational Profile Description**: The social assistant works to improve the physical and emotional well-being and overall quality of life of vulnerable groups, including children and adults with sensory, physical, and intellectual disabilities or chronic illnesses, as well as elderly individuals living alone. They provide daily social and healthcare support both at home and outside. Social assistants support basic daily activities, participation in social and cultural life, and various activities. They accompany clients to social, healthcare, or educational institutions and assist with classes if needed. They facilitate communication, maintain social contacts, and provide emotional support, particularly during crises such as bereavement, severe illness, prolonged separation, or violence. Social assistants collaborate with other professionals, follow care plans, and assist with recovery after illness by helping with medication intake, home rehabilitation, therapeutic nutrition, and adherence to prescribed health regimens. They may also assist with documentation, tax and bill payments, acquiring medical devices, supplies, or educational materials, and accessing social services. Social assistants can maintain contact with doctors, report health deterioration or emergencies, and assist with hospitalizations when required. They discuss health risks with guardians, report abuse cases, and help with small home repairs or shopping for necessities. Moreover, social assistants follow social-healthcare guidelines, maintain documentation, communicate with institutions and families, use assistive devices, and adhere to safety protocols. They are responsible for the client's well-being during work hours, safeguard personal property, and maintain confidentiality. They exhibit loyalty, tolerance, empathy, patience, and emotional stability in their role.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
Specialized vocational education and training, gained after the first phase of secondary education has been obtained (≥16 years of age at the time of entry to the training programme).

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Persons who have obtained the second degree of professional qualification in the profession “Social Assistant” may occupy the following positions, as specified by NAVET: 5322-1001 Home Aide; 5322-1002 Personal Assistant; 5322-1003 Social Assistant; 5322-1004 Food Delivery Assistant; 5321-1001 Caregiver; 5311-1001 Childcare Worker; 5311-1002 Nanny; 5311-1003 Governess.

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
The NAVET description specifies a Level 3 NQF and EQF.

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.
The following skills and competencies are derived from the description of the theoretical and practical knowledge gained during the specialized vocational education and training: **General Skills:** - Workplace Safety and Hygiene: Compliance with hygiene norms, health and safety regulations, environmental protection, and risk management during emergencies. - Economic and Entrepreneurial Knowledge: Understanding the basics of market economics, production activities, and entrepreneurship. - Organisation and Responsibility: Ability to organize work processes and ensure the quality of tasks performed. - Communication Skills: Effective communication within teams and with clients, including proficiency in a foreign language relevant to the profession. - Digital Literacy: Competence in processing, communicating, and creating digital content; basic use of technologies. **Elderly and General Care Skills:** - Integrated Social and Healthcare Support: Assisting with daily activities, maintaining social contacts, and providing home-based care for specific health conditions. - Health Monitoring and Infection Prevention: Recognizing symptoms of diseases, applying aseptic and antiseptic techniques, and managing infection prevention (disinfection, pest control).

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- Legal and Professional Standards: Familiarity with legal frameworks and adherence to criteria for providing social services to adults.

Existing Skills Within the National Profile Relevant to the Eldicare2.0 Project:

- Entrepreneurial skills: Basic entrepreneurship and market understanding.
- Digital skills: ICT use for communication and documentation.
- Soft skills: Emotional support, communication, loyalty, empathy.
- Green/environmental skills: Safety and hygiene with some environmental awareness.

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

The Social Assistant profile is appropriately aligned with several ESCO roles focused on integrated care and social support. While no immediate structural updates to the profile are necessary, further elaborating on the Eldicare2.0 skill areas (digital tools, eco-friendly practices, proactive service orientation, and soft communication skills) would further enrich the national profile. This would ensure that social assistants are well-equipped to contribute to innovative, resilient, and person-centered care models for older adults. According to the performed analyses, the elaboration on skills should be concentrated on green, digital and entrepreneurial skills, as soft skills are substantially represented.

Digital Skills

- Use case-management and scheduling software for organising daily tasks.
- Support the maintenance of secure digital records and communicate via GDPR-compliant channels.
- Support older adults in using assistive technologies; perform basic troubleshooting.
- Operate e-health and m-health tools; provide remote guidance (via phone/video) when appropriate.
- Navigate online portals to access social and healthcare services.

Green Skills

- Support the implementation of sustainable care practices: e.g., waste segregation, safe chemical use, reduced paper use. Provide guidance on recycling and access to local environmental services.

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- Promote energy-efficient and water-efficient behaviours in clients' homes.
- Encourage green mobility (walking, using public transport) when appropriate.
- Identify and report environmental hazards that may affect an older adult's safety.

Entrepreneurial Skills

- Take initiative in identifying gaps related to the overall care and propose small-scale improvements.
- Apply basic leadership and organisational techniques when interacting with multidisciplinary care teams, family members and relevant institutions. Encourage participatory care planning.
- Navigate community resources and social services, and advocate on behalf of the clients.
- Use simple budgeting skills to help clients manage expenses and care needs.

Soft Skills

- Strengthen proactive, shared decision-making in day-to-day care.
- Apply motivational interviewing to support behaviour change in older adults.
- Learn and be able to apply conflict deescalation techniques in sensitive caregiving situations.

6.7 Occupational Profile 7 – Home-Based Personal Care Worker (ESCO 5322 – EU)

General Coding

Enter a unique identifier for this Occupational Profile.
Home-based Personal Care Worker – ESCO 5322 (Updated EU version)

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
https://esco.ec.europa.eu/en/classification/occupation?uri=http%3A%2F%2Fdata.europa.eu%2Fesco%2Fisco%2FC5322

Title

Provide the official title of the Occupational Profile.

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Home-based Personal Care Worker /Independent Living Support Worker
Description: Home-based personal care workers provide routine personal care and assistance with activities of daily living to persons who need such care due to ageing, illness, injury, disability or physical or mental conditions, in private homes and other independent residential settings. They support clients' physical, emotional and social wellbeing, following care plans set by healthcare or social care professionals. Their work includes maintaining a safe and hygienic living environment, using basic digital tools for documenting care activities and communicating with families, informal carers and professionals, and encouraging independence, dignity and social participation. They may also apply simple environmentally responsible practices during household tasks and use initiative to adapt routines to individual needs, in ways appropriate to their role and training.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
Vocational training in home care, older adult care, disability support or community care Short-course certification in first aid, infection prevention and safe moving/handling Basic training in digital record-keeping and secure communication tools Introductory training in environmentally responsible household care (eco-cleaning, waste sorting, water/energy awareness) Continuous professional development recommended in emotional resilience, dementia care, and digital care tools

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
Recommended EQF Level: 3–4 • EQF 3 – suitable for direct care delivery under supervision • EQF 4 – suitable for independent work, digital reporting and coordination with professionals

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.
Core skills:**Personal Care and Person-Centred Care** ● assist with personal hygiene, dressing, toileting and continence care ● support mobility, transfers, fall prevention and safe wheelchair use ● prepare and assist with meals in line with dietary needs ● promote person-centred choice, dignity, and independence in daily routines

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- apply cultural sensitivity and adapt communication to different cultural norms, including expectations regarding family involvement and personal space

Soft Skills

- provide emotional support, routine conversation and social interaction
- empathy, patience, respectful communication
- apply adapted communication techniques for people with dementia, including non-verbal communication and behaviour-sensitive responses
- adapt approaches when clients' physical or emotional needs change
- demonstrate emotional resilience and apply basic self-care strategies to manage stress in demanding care situations

Organisational and Household Management Skills

- maintain household hygiene, laundry and clean the living spaces
- support the scheduling of appointments and daily arrangements as authorised by the care plan or employer guidelines
- maintain written or digital records accurately
- prioritise tasks and adapt plans when client needs change
- identify small improvements in routines or resources that save time, reduce waste or improve comfort, within role boundaries
- plan routes and household tasks efficiently to reduce unnecessary travel, where possible
- apply basic cost-awareness when purchasing items on behalf of clients, and use resources efficiently to avoid unnecessary waste or expense

Regulatory and Safety Skills

- follow care plans and report changes to health or social care professionals
- apply basic care quality and safety standards in all tasks
- recognise risks and escalate concerns appropriately, including changes in client condition, safety or environment
- respect privacy, confidentiality and data protection when handling personal information
- identify fall risks in the home environment and apply basic fall-prevention measures

Digital Skills

- use digital tools to record care activities and share observations securely
- communicate with families, informal carers and professionals via approved digital channels, and work with them collaboratively to ensure the best possible implementation of the care plan
- support clients in simple digital inclusion (e.g., video call to relatives, appointment reminders)
- use safe and appropriate digital tools to support wellbeing and engagement

Green Skills

- apply basic eco-responsible routines (waste sorting, safe cleaning products, water/energy awareness)

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- reduce avoidable waste and use household resources efficiently
- plan routes and household tasks efficiently to reduce unnecessary travel, where possible (also fits Organisation)
-

Core Knowledge

- infection prevention & control standards
- nutrition and safe food handling
- basic understanding of ageing, chronic conditions, mental health challenges and disability-related support needs
- local referral pathways and community support options for clients
- basic principles of data protection and secure information handling
- basic understanding of local recycling and waste-sorting systems

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

- use simple telehealth or remote monitoring tools to support care plans
- assist with cognitive or social engagement using digital or creative activities
- support end-of-life comfort care under the guidance of qualified professionals
- accompany clients to social, health or community activities
- participate in employer-led sustainability initiatives (e.g., low-waste care kits)
- develop peer mentoring or “digital buddy” skills to support colleagues

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.

Work Experience

• Entry possible without prior experience, but supervised practice strongly recommended
• Prior experience in care, hospitality, cleaning, childcare, volunteering or community work is beneficial

Professional Certifications

• First aid certificate
• Safe moving & handling (patient transfer)
• Digital documentation and data protection basics
• Eco-responsible household care module

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Physical / Cognitive Requirements
• ability to lift and assist clients safely • ability to work independently in private homes • ability to travel between clients (where required), including holding a driving licence • capacity to manage emotionally sensitive situations and maintain personal wellbeing • basic ability to use smartphone/tablet for work tasks

6.8 Occupational Profile 8 – Residential Care Managers for Older Adults (ESCO 1343.1 – EU)

General Coding

Enter a unique identifier for this Occupational Profile.
Elderly Home Manager (Updated EU Profile) — ESCO 1343.1

Hyperlink

Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.
https://esco.ec.europa.eu/en/classification/occupation?uri=http%3A%2F%2Fdata.europa.eu%2Fesco%2Foccupation%2Feea2b5c6-48d1-4612-957e-585783b3c7bb

Title

Provide the official title of the Occupational Profile.

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Residential Care Managers for Older Adults
Description: Residential Care Managers for Older Adults plan, organize, and oversee the provision of care and support services in residential settings for people with age-related needs. They lead multidisciplinary teams and manage daily operations to ensure regulatory compliance and high standards of safety and care quality. They foster a person-centred culture, support staff wellbeing, and encourage collaboration with families and communities. They also drive innovation, including the adoption of digital solutions and sustainable management practices. Their role contributes to implementing organisational policies, fostering a culture of inclusion and respect, and aligning care delivery with evolving social and health priorities for ageing population.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).
Bachelor Degree or Higher Vocational Diploma in: Health Care Management, Nursing, Social Care, Gerontology, Public Health, or similar. In some Member States: additional certification in Care Home Management, Quality of Care, or Leadership in Health/Social Services. Optional advanced qualifications or Master's degree in Health/Social Care Management, Business Administration, Public Health, or Gerontology for strategic and policy-level responsibilities. Continuous professional development recommended through micro-credentials in digital care leadership, sustainability in social services, integrated care, and person-centred care.

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.
EQF 6–7 **EQF 6 – Minimum requirement** Suitable for managing daily operations, staff supervision, budgets, compliance, and quality standards in older people care facilities. **EQF 7 – Recommended for advanced roles** • For managers responsible for strategic planning, innovation, digital transformation, sustainability initiatives, and influencing policy or EU-level frameworks.

Core Skills and Knowledge

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List the essential skills and knowledge required for the occupation.
Core skills: **Leadership and Management Skills** ● demonstrate leadership in social services cases ● establish daily priorities ● evaluate staff performance ● manage budgets and financial sustainability ● manage staff ● set organisational policies ● apply evidence-informed decision-making in care and organisational management ● integrate digital tools into strategic and operational planning ● foster innovation in service design ● lead adoption of sustainable practices ● monitor and report KPIs for sustainability and service quality ● embed sustainability considerations into organisational planning and culture ● apply systems thinking to assess environmental, social and financial sustainability impacts in care settings ● support staff in maintaining effective helping relationships with residents and families ● ensure implementation of person-centred planning across care services ● lead culturally diverse teams and promote culturally responsive practices ● develop and oversee policies that support person-centred, culturally responsive, and inclusive care services ● demonstrate empathetic leadership when addressing staff, resident and family needs ● identify opportunities for service improvement ● contribute to organisational advocacy and represent the facility in consultations with public authorities ● promote social change ● advocate for high-quality, person-centred residential care ● develop staff motivation and conflict resolution strategies ● develop and implement staff wellbeing and psychological resilience strategies ● represent the organisation in public, institutional and community settings ● maintain external communication with families, authorities and stakeholders ● ensure coordinated delivery of multidisciplinary and integrated person-centred care ● address problems critically ● demonstrate empathetic leadership when addressing staff, resident and family needs ● support staff in maintaining effective helping relationships with residents and families ● lead culturally diverse teams and promote culturally responsive practices ● promote social change

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Regulatory and Safety Skills

- perform risk analysis
- ensure secure handling of personal and clinical data in line with GDPR and cybersecurity principles
- adhere to organisational guidelines
- comply with legislation in social services
- manage health and safety standards
- monitor regulations
- oversee the implementation and compliance of record-keeping and documentation systems
- oversee the review of individual care and support plans
- ensure the continuous implementation and monitoring of safeguarding policies
- ensure secure handling of personal and clinical data in line with GDPR and cybersecurity principles

Digital Skills

- integrate digital tools into strategic and operational planning
- use digital platforms for data management and communication
- engage with staff, older adults, and families through digital technologies to improve communication and care outcomes
- identify digital competence gaps among staff and plan appropriate training
- assess needs and implement appropriate technological solutions
- apply digital technologies to enhance care services and workflows
- use data analytics to support care quality monitoring, workforce planning and evidence-based decisions
- apply data-driven decision-making for operational and strategic planning

Green Skills

- lead adoption of sustainable practices
- develop strategies to reduce environmental impact within the operational scope of the facility
- monitor and report KPIs for sustainability and service quality
- embed sustainability considerations into organisational planning and culture
- apply systems thinking to assess environmental, social and financial sustainability impacts in care settings
- promote circular economy practices and resource efficiency
- develop strategies to reduce environmental impact within the operational scope of the facility

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Essential knowledge:

- financial management in residential care services
- leadership and organisational strategy in residential care services
- quality and user experience in residential care
- data protection and digital record management
- dementia, ageing psychology, and gerontology basics
- environmental sustainability in residential facilities
- Healthcare regulations, inspection procedures, and compliance frameworks
- infection prevention and control standards
- Organisational policies, staff development, and human resource management
- Safeguarding, social justice principles and ethical frameworks - including anti-discrimination principles (especially against ageism), diversity management and cultural competence
- social sciences and community studies
- quality assurance and continuous improvement methodologies in long-term care
- workforce planning, staff wellbeing frameworks and retention strategies
- intercultural communication and conflict mediation in diverse teams
- long-term care system structures, funding mechanisms and regulatory landscape

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

Optional Skills and Competences:

- accept own accountability
- apply change management
- apply principles of person-centred care in organisational leadership
- listen actively
- ensure processes exist for involving service users and carers in care planning
- oversee financial processes and budget utilisation
- ensure coordination and quality of resident engagement programmes
- oversee quality control
- optimise use of physical spaces for safe and effective service delivery
- promote inclusive organisational culture and person-centered care practices
- recruit, mentor and support personnel
- lead and support digital transformation initiatives

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- integrate sustainability into facility operations and planning
- foster innovation and entrepreneurial approaches
- facilitate telecare and remote monitoring implementation
- encourage creative problem-solving and service improvement
- Apply strategic risk management and crisis response
- apply motivational leadership and conflict resolution techniques
- support collaboration and integration across social, health, and community care
- mobilise financial, human and community resources to sustain innovation
- design and implement innovative care models using entrepreneurial approaches
- plan and execute staff training aligned with EU digital and green frameworks

Optional Knowledge:

- communication principles
- understanding of ageing processes and older adults' support needs
- geriatrics
- government social security programmes
- healthcare administration
- palliative care frameworks and organisational responsibilities in end-of-life care
- knowledge of safeguarding protocols and response frameworks for elder abuse
- digital platforms for care management, telecare, and data analytics
- data protection and GDPR compliance
- environmental sustainability, energy efficiency, and green facility management
- social enterprise, fundraising, and organisational innovation
- advanced leadership, change management frameworks, and staff development
- person-centered care principles aligned with EU standards
- monitoring, evaluation, and reporting tools for sustainability and service quality
- public relations and community engagement strategies in residential care

Additional Sections (if applicable)

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Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.
Work Experience Requirement Minimum 2–3 years of managerial or supervisory experience from care or other service sectors. Experience managing teams, budgets, multi-disciplinary care coordination or regulatory inspections is strongly preferred. ● **Professional Development / Certifications** Ongoing CPD expected through short courses or micro-credentials in: • digital care management and data literacy • environmental sustainability in residential care • person-centred care leadership, wellbeing and staff resilience • quality and risk management in long-term care Integrated care **Physical and Cognitive Requirements** Ability to make complex decisions under time pressure, communicate effectively with diverse groups, resolve conflicts, work with digital systems, and adapt to regulatory and technological change.

7. Validation Process and Results

The validation of the updated and newly developed occupational profiles followed a robust, multi-level process implemented consistently across all partner countries – Greece, France, Spain, Austria, Bulgaria and Czechia – and complemented by an EU-level validation workshop. In each country, three dedicated workshops were organized, bringing together **policy stakeholders**, **educational and training providers**, and **labour-market representatives**. This structure ensured that the perspectives of regulators, educators and employers were equally integrated into the refinement of each occupational profile. Across the six countries, more than one hundred stakeholders participated, offering detailed, context-specific input on national occupational classifications, skill needs, training frameworks, and alignment with ESCO.

In **Austria**, the validation highlighted the particular complexity of a system governed by the Health and Nursing Care Act (GuKG), where strict legal boundaries define assistants, associates and registered nurses. Stakeholders confirmed the close alignment of the Austrian Nursing Assistant with ESCO 5321 but emphasized the need to integrate missing competences in areas such as digital documentation, communication with non-German-speaking patients, aggression management and basic geronto-psychiatric skills. They also noted systemic barriers, such as rigid task delegation and shortages of registered nurses, which reinforced the need for clearer EU-level differentiation among nursing roles.

In **Czechia**, workshops brought together public authorities, educators and employers, who collectively identified significant gaps in the current caregiver qualification

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framework. Participants stressed the urgency of revising the 150-hour qualifying course—still partly theoretical and insufficient to match the increasing complexity of care needs—and recommended introducing specialization modules inspired by ESCO. Digital skills, deeper understanding of person-centred care and better alignment between health and social care roles were described as essential. Stakeholders also emphasized the low prestige of the profession and the need for stronger communication campaigns and better coordination between ministries.

In **Greece**, validation focused primarily on the Personal Care Attendant profile. Participants agreed with the recommended updates and underscored the importance of further strengthening hospitality-management skills, reflecting the increasing integration of care, customer service and the cultural expectations of families. The validation confirmed the need for improved digital, soft and green skills and supported stronger alignment with EU skills frameworks such as DigComp, GreenComp and EntreComp.

In **Bulgaria**, policy stakeholders, educators and market representatives validated the alignment of the national Healthcare Assistant, Caregiver and Social Assistant profiles with their ESCO equivalents. They highlighted areas where European standards exceed current national expectations—notably in advocacy, prevention, digital literacy, electronic data management and environmental sustainability—and recommended that these competences be integrated into national training programmes. Across all three Bulgarian workshops, participants stressed the need to upgrade skills frameworks, harmonize qualification levels, and embed transversal skills, particularly digital literacy, entrepreneurship and green competences. They also emphasized the importance of adapting European competences to Bulgaria's mixed model of municipal, private and family-based care provision, where job boundaries frequently overlap.

In **Spain**, educational providers, labour-market representatives and policy stakeholders confirmed the need for a profound update of CNO-11 Profile 5629—currently used for institutional caregivers—and validated the alignment carried out with ESCO equivalents. Across all three workshops, participants emphasized that the present Spanish profile is outdated, overly task-oriented and inconsistent with the relational and person-centred nature of modern care work. Training providers highlighted the mismatch between qualifications and real care needs, pointing to insufficient practical training hours and significant heterogeneity in learners' educational backgrounds. Labour-market representatives stressed acute recruitment and retention challenges, identifying critical skill shortages in communication, emotional management, person-centred care, dementia care, digital literacy and stress resilience. Public authorities also underlined the need for stronger harmonization across Spain's 17 Autonomous Communities, the integration of gender perspectives and the alignment of CNO-11 with ESCO as a stable frame of reference. All three workshops supported revising Profile 5629, possibly merging home and institutional care roles, and adding transversal competences related to ethics, digitalization, sustainability and psychosocial risk prevention.

In **France**, the three validation workshops with policy stakeholders, training providers and labour-market representatives confirmed the relevance and accuracy of the majority of the updated profiles, while emphasizing the need to align them with France's regulated medico-social system and national qualification framework. One of the main surfacing points is about the significant differences in the titles and descriptions of occupations between the EU and French databases. In particular, the most notable difference

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concerns the occupational profiles related to nursing and nursing assistant professions, for which there are more categories in France, including one category specific to the needs of elderly people ('gerontology care assistant'). Profile 322, 'Nursing and Midwifery Associate Professionals', is therefore not specific enough to reflect job profiles at the national level. External stakeholders considered the different nursing professions to be an asset in enriching and harmonizing the European ESCO database.

An **EU-level validation workshop** complemented national discussions by bringing together European-level actors, representatives of umbrella organisations, and sectoral experts. Participants validated the methodological approach, confirmed the importance of aligning national profiles with EU policy frameworks—including the European Care Strategy, Green Deal, Digital Skills Agenda and Pact for Skills—and supported the project's direction in strengthening transversal digital, green, relational and organisational competences across all profiles. They stressed the need for clarity in role descriptions to support mobility, avoid overlap and ensure transparency in training pathways across Member States.

Overall, the validation process confirmed a **high level of consensus** across partner countries. While national systems differ considerably in structure, qualification levels, terminology and regulatory frameworks, stakeholders consistently endorsed the need for modernised, competence-based occupational profiles that are future-proof, person-centred and aligned with EU priorities. The feedback collected across all workshops was systematically incorporated into the updated profiles, ensuring that they reflect both national realities and European strategic directions. The result is a coherent, evidence-based set of occupational profiles designed to support a resilient, digitally competent, environmentally responsible and person-centred workforce in older people care across Europe.

8. Conclusions and Recommendations

This section presents the overall conclusions and strategic recommendations derived from the development, refinement and validation of the updated and new occupational profiles. The selected profiles – six national and two EU-level roles – were chosen based on cross-country relevance, sectoral impact, evidence of skills gaps, policy alignment and coverage of different responsibility levels within the older people care ecosystem. The final profiles reflect extensive cross-national consultation and incorporate the findings of eighteen national validation workshops across Greece, France, Spain, Austria, Bulgaria and Czechia, as well as an EU-level validation workshop involving sectoral organisations and experts. The conclusions and recommendations outlined below summaries the key insights gained from this process and propose a way forward for embedding the updated profiles in national and European training and regulatory frameworks.

8.1 Key Conclusions

8.1.1 Strong cross-country convergence on core occupational functions

Across all partner countries, there is a striking convergence in the **core functions and responsibilities** of caregiving, nursing and managerial roles within older people care. Despite national variations in terminology, regulatory structure and training pathways, the essence of the occupations is widely shared. Home-based carers, personal care attendants, institutional caregivers, nursing assistants and long-term-care managers

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perform analogous tasks across systems – supporting daily living, promoting autonomy, managing psychosocial wellbeing, coordinating with health professionals and ensuring continuity of care.

This convergence validates the feasibility of developing **shared EU competencies**, especially for digital, green and entrepreneurial/organisational skills. The commonalities also reinforce the added value of ESCO-aligned profiles that can serve as a reference framework for mutual recognition, cross-border mobility and harmonized training.

8.1.2 Persistent and well-documented skills gaps across all countries

One of the most consistent findings across workshops is the presence of urgent and widespread skills gaps. Stakeholders repeatedly highlighted deficits in:

- **Digital skills**: secure documentation, electronic health records, coordination apps, telecare, basic ICT and data protection.
- **Green skills**: sustainable housekeeping routines, energy-efficient practices, waste sorting, chemical safety and environmental responsibility.
- **Entrepreneurial and organisational competences**: initiative, self-management, problem-solving, task prioritization, teamwork and communication.
- **Advanced relational competences**: dementia care, de-escalation, emotional labour, communication with cognitively impaired persons.
- **Interdisciplinary collaboration and coordination**: cross-sector communication, integrated care pathways and team-based problem solving.

These gaps were confirmed with remarkable consistency across Austria, Greece, Bulgaria, Spain, Czechia and France. Validation participants agreed that the updated profiles successfully address these deficits and help shift care work toward a more **competence-oriented, future-ready, professionalized model**.

8.1.3 A shift from task-based to competence-based role definitions

Across all countries, participants endorsed the move away from traditional task-lists toward **competence-based occupational profiles**. The updated profiles emphasize:

- autonomy and judgement,
- problem-solving,
- interaction and communication,
- adaptability to complex care needs,
- digital and environmental thinking,
- resilience and emotional management.

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This modernization aligns profiles with the evolving nature of care work, where workers must combine technical skills with relational, digital and organisational capacities. Stakeholders viewed this shift as essential for improving the public image of care work and supporting recruitment and retention in a sector facing chronic shortages.

8.1.4 The need to elevate the role of managers and coordinators

A recurrent theme in all countries is the **central role of managers** (residential home directors, social services managers, care coordinators) in driving organisational quality, digitalization, workforce support and sustainability measures. The EU Elderly Home Manager profile received particularly strong validation, with participants stressing that managers require:

- Strong digital leadership and process-management skills
- Knowledge of green and sustainable facility operations
- Competence in HR development and staff wellbeing
- Skills in crisis management and risk assessment
- Capacity to implement quality frameworks and regulatory compliance
- A person-centred, ethical leadership approach

The validation confirmed that updating managerial profiles is essential not only for operational efficiency but also for shaping organisational culture, improving staff retention and enabling sustainable innovation.

8.1.5 Strong demand for harmonized qualifications and clearer career pathways

The validation highlighted widespread fragmentation in national training paths, inconsistent qualification levels, and differing regulatory frameworks – particularly evident in Spain, Bulgaria. Stakeholders stressed the need for **greater harmonization of qualifications**, clearer role differentiation and transparent career pathways.

The updated profiles contribute to this by providing:

- ESCO-aligned role descriptions
- Cross-referenceable competence structures
- EU-compatible skills categories (DigComp, GreenComp, EntreComp)
- A basis for micro-credential development
- A common language for employers, educators and policymakers

Particularly for frontline care roles, these profiles provide an opportunity to strengthen professional identity and recognition, which is key for improving recruitment and reducing turnover.

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8.1.6 Increasing complexity of care requires upskilling across all levels

Demographic trends and the shift toward ageing in place are increasing the complexity of daily care tasks. Workers across all categories now require:

- Greater knowledge of chronic diseases and cognitive decline
- Higher competence in behavioural and relational care
- Confidence in using digital tools and managing information
- Skills to identify risks, respond to emergencies and coordinate with health providers
- Ability to support people at home with fluctuating medical and social needs

The updated profiles reflect these realities, positioning the workforce to respond to increasingly complex care needs and modern care delivery models.

8.2 Recommendations

8.2.1 Integrate the updated profiles into national qualification and training systems

Partner countries should integrate these updated profiles into their:

- national occupational classification systems,
- VET standards and curricula,
- training modules for upskilling and reskilling,
- micro-credential frameworks.

This requires coordinated action between ministries, training authorities, accreditation bodies and sectoral organisations. The updated profiles can serve both as templates for reform and as benchmarking tools for aligning national programmes with EU frameworks.

8.2.2 Strengthen digital competences across all occupational levels

Given the unanimously identified digital skills gaps, stakeholders should:

- integrate digital literacy modules into all training programmes,
- provide hands-on training with care apps, documentation tools and telecare solutions,
- introduce basic data-protection and cybersecurity modules,
- train managers in digital transformation and digital ethics.

The application of **DigComp** ensures harmonization and facilitates measurable learning outcomes.

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8.2.3 Introduce systematic green skills and sustainability content

To support the EU's Green Transition in care, all updated profiles should be accompanied by training on:

- resource-efficient routines,
- sustainable procurement and waste management,
- circular-economy principles in care homes,
- low-impact cleaning methods,
- environmental awareness and ecological responsibility.

Green skills should be explicitly tested in assessments and integrated into quality assurance systems.

8.2.4 Reinforce entrepreneurial and organisational competences

The entrepreneurial dimension – often misunderstood as "business skills" – should be framed as:

- initiative taking,
- problem solving,
- time and workflow management,
- basic financial and resource awareness,
- communication and leadership in small teams.

These competences are essential for frontline care professionals working autonomously in people's homes, as well as for managers leading multidisciplinary teams.

8.2.5 Develop EU-coherent micro-credentials aligned with the profiles

Micro-credentials based on the updated occupational profiles would:

- support career progression and mobility,
- allow flexible upskilling for workers in employment,
- facilitate cross-border comparability,
- provide structured training in digital, green, dementia or palliative care.

Such micro-credentials could be linked to **ESCO competences** and validated through the **European Digital Credentials for Learning (EDCL)**.

8.2.6 Strengthen the managerial profiles as agents of transformation

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Residential care managers, social services managers and care coordinators should receive enhanced support through:

- dedicated leadership programmes,
- modules on quality assurance and regulatory implementation,
- training in organisational sustainability,
- digital leadership training,
- staff wellbeing and burnout prevention strategies.

Managers are crucial "system anchors": their competence determines the quality of the working environment and the operationalization of the European Care Strategy.

8.2.7 Support career pathways and workforce attractiveness

The updated profiles can contribute to improving the attractiveness of older people care work if accompanied by:

- clearer pathways between frontline → assistant → professional → managerial roles,
- recognition of prior learning (RPL) for experienced care workers,
- communication campaigns to elevate the status of care work,
- integration of updated competences into collective agreements and job descriptions.

These measures are essential to combat critical staffing shortages across partner countries.

8.2.8 Maintain ongoing validation and updating mechanisms

As care evolves, occupational profiles should be reviewed regularly through:

- social dialogue,
- stakeholder consultation,
- monitoring of emerging technologies,
- alignment with EU policies,
- feedback from training institutions and employers.

The validation methodology used in this project—a structured, multi-stakeholder, cross-country process—can serve as a model for future revisions.

8.3 Final Reflection

The updated and newly developed occupational profiles constitute a comprehensive, future-oriented framework that strengthens the professionalization of care work,

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supports the digital and green transitions, and contributes directly to the goals of the European Care Strategy. Through rigorous national and EU-level validation, the profiles reflect both the shared realities of older people care across Europe and the specific needs of diverse national systems. Their adoption will help modernise training, enhance workforce resilience, improve care quality and promote mobility and recognition across Member States—ultimately supporting a more sustainable, person-centred and dignified long-term care ecosystem for Europe's ageing population.

ANNEXES

ANNEX I ESCO Occupational Profile of older people care profession

Profile title:	
ESCO Code	
Short Description of the profile: **(300 words max)**	
Skills and Competences Required	
Educational Requirements	
EQF Levels (if available)	
More Info or comments: **(150 words max)**	
Recommendations for update/change of the profile	

ANNEX II Comparative Analysis Report

1.Introduction

This is a comparative analysis of the ESCO profiles identified in 4.1.1 and the skills and competences documented in D3.1, noting matches, gaps and discrepancies, and is part of the 4.1.1 Action. Its purpose is to highlight areas where the ESCO profiles do not fully capture the skills and competences identified in WP3, as these could indicate a need for updating or redesigning the profiles.

2. Profile 322

1. General Information

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Profile Title:	Nursing and Midwifery Associate Professionals (older people care Focus)
ESCO Code:	322
Job Overview:	Nursing and midwifery associate professionals provide basic nursing and midwifery care and treatment for the sick, injured, disabled, and elderly. Within older people care, they assist registered nurses and other healthcare professionals by delivering routine clinical and personal care, monitoring patients, supporting rehabilitation, and ensuring comfort and dignity.

2. ESCO Profile Description

Profile Description	These professionals support registered nurses and doctors in delivering essential nursing and personal care. They monitor patients' conditions, provide health education, assist in basic treatments, and maintain accurate patient records using digital tools. They promote independence, well-being, and inclusion of elderly patients and work in hospitals, care homes, and community settings.
Key Responsibilities	- Provide basic nursing and personal care - Monitor and record patients' health status and vital signs - Support medication administration under supervision - Assist in rehabilitation and therapeutic activities - Educate patients and families on health maintenance - Ensure hygiene and infection control - Provide emotional support and build trust - Use electronic health records and other digital health tools - Collaborate with healthcare teams and follow clinical protocols - Promote person-centred care and inclusion - Apply safe waste management and sustainable care practices
Skills and Competences	- Basic clinical and nursing skills - Communication and empathy - Critical observation and problem-solving - Teamwork and leadership support - Digital health literacy and record-keeping - Knowledge of hygiene and infection prevention - Awareness of sustainable and eco-friendly healthcare practices
Qualifications	Completion of a vocational training programme in nursing or health care, or equivalent.
EQF Levels	Level 4–5 (depending on country-specific regulations).

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; WP3 focuses on innovation, quality of service, and sustainability.)

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Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified.
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and waste management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Provide basic nursing and personal care; monitor patient conditions; assist in medication administration; educate patients and families; use electronic health records; ensure infection control; promote inclusion and person-centred care	Quality of service and innovation orientation	Match in quality of service and leadership; WP3 lacks explicit clinical and infection control responsibilities
Skills and Competences	Basic clinical nursing skills; communication; critical observation; problem solving; teamwork;	Problem solving, creativity, leadership, financial awareness	Strong match in problem solving and leadership; ESCO adds core clinical and infection prevention skills absent in WP3; WP3 adds financial awareness and creativity

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	digital health literacy; infection prevention; sustainable healthcare		
Soft Skills	Empathy; communication ; patience; adaptability; resilience; organisational skills	Patience; adaptability; resilience; communication; empathy; organisational/time management	High overlap; ESCO aligns fully with WP3 soft skills
Digital Skills	Electronic health records; patient monitoring tools; secure health data management	Daily digital communication, digital animation, administrative tasks	ESCO broader and healthcare-specific; WP3 limited to general office and communication tools
Green Skills	Waste management; sustainable care practices; energy-efficient processes	Waste reduction, daily practice change, travel reduction	Strong alignment; ESCO places sustainability in a healthcare context
Entrepreneurial Skills	Team support; innovation in care delivery; resource management within clinical teams	Financial awareness, leadership, creativity, problem solving	Match in leadership and problem solving; WP3 stronger on explicit financial awareness
Qualifications/EQF Levels	Vocational training in nursing or health care; EQF Level 4–5	Not specified	ESCO clear about EQF and training requirements; WP3 lacks formal education and level specifications

5. Key Observations and Recommendations

Matches Identified:

- Shared focus on quality of service, problem solving, leadership, and creativity.

- Strong alignment on soft skills: empathy, communication, adaptability, and resilience.

- Digital and green skills overlap, with ESCO framing them in a healthcare setting.

Gaps Identified:

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- WP3 does not explicitly cover clinical and infection prevention responsibilities.

- WP3 lacks healthcare-specific digital competences such as electronic health record management and patient monitoring.

- WP3 does not mention formal EQF levels or vocational nursing training.

Discrepancies Noted:

- Scope: ESCO covers both nursing and midwifery, while WP3 focuses on older people care; not all midwifery elements are relevant.

- Digital Skills: ESCO requires secure health data management and patient monitoring tools; WP3 focuses on basic communication and administrative functions.

- Green Skills: ESCO applies sustainability specifically to healthcare environments, while WP3 emphasizes general daily practices.

- Entrepreneurial Skills: WP3 highlights financial awareness, while ESCO integrates innovation into care processes rather than explicit financial management.

- Qualifications: ESCO specifies EQF Level 4–5 and vocational training; WP3 omits qualification levels and training pathways.

Recommendations:

- Incorporate clinical competences such as infection prevention, basic nursing procedures, and patient monitoring into WP3-aligned training.

- Add healthcare-specific digital competences, including electronic health records and secure data management.

- Include EQF Level 4–5 requirements and vocational training pathways in WP3 frameworks.

- Focus WP3 content on older people care to avoid irrelevant midwifery elements.

- Enhance sustainability training to cover healthcare-specific waste management and energy efficiency.

6. Job Role Description Template

Job Title:	Nursing and Midwifery Associate Professional (older people care Focus)
Job Code (ESCO):	322
Job Overview:	Provide basic nursing and personal care to elderly patients under the supervision of registered nurses and doctors, ensuring dignity, comfort, and well-being.
Key Responsibilities:	Deliver personal and clinical care; monitor and document patient conditions; assist in treatments and medication administration; educate patients and families; ensure infection prevention; maintain electronic health records; support sustainable and person-centred care.

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Required Skills:	Basic clinical knowledge, empathy, communication, adaptability, resilience, organisational/time management, problem solving, digital health literacy, healthcare-specific green skills.
Qualifications:	Completion of vocational training in nursing or equivalent; EQF Level 4–5.
Experience:	Experience in older people care or hospital settings preferred.
Working Conditions:	Hospitals, nursing homes, or community health settings; physically and emotionally demanding.
Career Path:	Senior nursing associate, registered nurse (with further education), care home supervisor.
Additional Info:	Continuous professional development in digital tools and sustainable practices is essential.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Managing complex care needs of elderly patients; maintaining infection control; providing emotional support to patients and families; adapting to technological and sustainability requirements.

• Systemic Challenges: Workforce shortages; evolving care standards; integration of advanced digital health tools.

• Implementation Barriers: Limited availability of EQF-aligned vocational programmes; uneven access to digital infrastructure in care facilities.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Clinical and infection control training; healthcare-specific digital tools; formal EQF-level qualification references.

• Upskilling Needs: Training in electronic health records, secure data management, and basic clinical care; sustainability in healthcare practices.

• Training Recommendations: EQF 4–5 aligned vocational programmes with strong mo

3. Profile 1343.1

1. General Information

Profile Title:	Elderly home manager
ESCO Code:	1343.1
Job Overview:	Elderly home managers oversee, plan, organise, and evaluate the provision of older people care services. They manage the care home, supervise staff, and ensure compliance with standards, budgets, and regulations while fostering quality care and well-being of residents.

2. ESCO Profile Description

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Profile Description	Elderly home managers oversee, plan, organise, and evaluate the provision of older people care services for people requiring support due to ageing. They manage the older people care home, supervise staff activities, and ensure services meet legal, ethical, and quality standards.
Key Responsibilities	- Manage daily operations of a residential care facility - Supervise and evaluate staff performance - Manage budgets, funding, and fundraising activities - Implement marketing strategies and public relations - Ensure compliance with social service legislation and health & safety regulations - Apply quality standards and socially just working principles - Advocate for residents and promote social awareness and change - Coordinate multidisciplinary care and liaise with external professionals - Perform risk analyses and manage crises - Set organisational policies and influence social service policy makers
Skills and Competences	Address problems critically; advocate for service users; analyse community needs; decision making; apply holistic and person-centred approaches; manage budgets; perform risk analysis; demonstrate leadership; establish priorities; manage staff and health & safety standards; evaluate programs and staff performance; communicate professionally; manage ethical issues; build relationships; implement marketing; promote social change and safeguarding; work in multicultural environments; undertake continuous professional development.
Qualifications	Not specified (update recommended: business management, psychology, or social sciences).
EQF Levels	Not specified (update recommended: EQF Level 6 to EQF Level 8).

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not explicitly detailed; focus on future-oriented skills for management and innovation in older people care.)
Skills and Competences	Quality of service; problem solving; creativity; leadership and motivational communication; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational skills (time and task management).
Digital Skills	Daily digital communication; digital tools for animation and engagement; digital administration.

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Green Skills	Change in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Operations management, staff supervision, budget/funding management, marketing, policy influence, crisis management	Broad strategic focus on quality of service and innovation	Strong match in leadership, quality assurance, and financial orientation; WP3 less detailed operationally
Skills and Competences	Leadership, decision making, budgeting, risk analysis, policy influence, communication, social change promotion	Problem solving, creativity, leadership, financial awareness	Matches in leadership, financial awareness, problem solving; WP3 adds creativity as a stronger component
Soft Skills	Empathy, communication, intercultural awareness, critical thinking	Patience, adaptability, resilience, communication, empathy, organisational skills	Matches in communication, empathy; WP3 adds adaptability and resilience beyond ESCO's stress management
Digital Skills	Not explicit (limited to records and reporting)	Digital communication tools, digital administration, animation tools	Gap: ESCO lacks explicit digital management skills; WP3 provides detail
Green Skills	Not present	Waste reduction, travel reduction, green daily practices	Gap: ESCO lacks green dimension entirely
Entrepreneurial Skills	Manage budgets, fundraising,	Financial awareness, leadership,	Partial match: ESCO covers financial/marketing but lacks

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	marketing, policy influence	creativity, problem solving	explicit entrepreneurial innovation
Qualifications/EQF Levels	None specified (update recommended: EQF 6–8)	Not specified	Gap: neither document provides concrete EQF/educational standards

5. Key Observations and Recommendations

Matches Identified:

- Strong alignment in leadership, financial management, problem solving, and quality-of-service orientation.
- Both stress communication and empathy in management.

Gaps Identified:

- Digital skills for management and data-driven decision-making are missing in ESCO.
- Green skills and sustainability practices are absent.
- Entrepreneurial innovation (creativity and future-oriented change) is underrepresented.

Discrepancies Noted:

- ESCO provides extensive operational skill listing but lacks a rich job narrative.
- WP3 emphasizes systemic innovation, digital and green transitions, and soft skills resilience.

Recommendations:

- Enrich the ESCO profile description to describe daily duties in depth.
- Add formal educational requirements (business management, psychology, social sciences).
- Incorporate explicit digital management and green leadership skills.
- Recognize entrepreneurial creativity and innovation as core management competences.
- Set EQF level requirements (recommended EQF 6–8).

6. Job Role Description Template

Job Title:	Elderly home manager
Job Code (ESCO):	1343.1
Job Overview:	Directs and manages residential older people care homes, ensuring quality service, staff performance, financial sustainability, and compliance with legal and ethical standards.
Key Responsibilities:	Lead and supervise staff; manage budgets and funding; plan and evaluate care services; implement marketing and fundraising strategies; liaise with healthcare and social service professionals; ensure safety, quality, and legal compliance; promote innovation and sustainability.
Required Skills:	: Leadership, decision making, budget and financial management, policy influence, crisis management, empathy, communication, problem solving, adaptability, resilience, digital administration,

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	green practices, creativity.
Qualifications:	Degree or equivalent in business management, social sciences, or psychology (recommended EQF 6–8).
Experience:	Experience in residential care management or healthcare administration preferred.
Working Conditions:	Office and care-home environment; high responsibility; potential stress and crisis situations.
Career Path:	Senior management in healthcare networks, policy-making roles, consultancy.
Additional Info:	Continuous professional development essential, particularly in digital tools, sustainability, and leadership innovation.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: High responsibility for staff, budgets, and compliance; emotional demands of older people care.

• Systemic Challenges: Workforce shortages; pressure to integrate digital and green practices; evolving regulations.

• Implementation Barriers: Lack of defined educational/EQF requirements; limited resources for green and digital upskilling; cultural resistance to change.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital management and data skills; green and sustainable leadership; entrepreneurial creativity.

• Upskilling Needs: Advanced training in digital communication, analytics, and green facility management; leadership and innovation development.

• Training Recommendations: Executive courses in digital transformation and sustainability; leadership and entrepreneurial creativity workshops; EQF-aligned business or social management qualifications.

4. Profile 1344.1

1. General Information

Profile Title:	Social Services Manager
ESCO Code:	1344.1
Job Overview:	Social services managers lead and oversee staff and resources within or across social service programmes, ensuring both strategic direction and effective day-to-day operations. They implement relevant laws and policies, champion social work principles, ethical practices, and promote equality and diversity while coordinating with professionals in healthcare, criminal justice, and education. They may also contribute to policy development at local and national levels.

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2. ESCO Profile Description

Profile Description	Social services managers lead, plan, and evaluate older people care programmes, ensuring high-quality service delivery and legal compliance. They promote ethical standards, inclusion, and sustainability, and integrate multidisciplinary cooperation.
Key Responsibilities	- Accept own accountability - Adhere to organisational guidelines - Advocate for social service users - Apply holistic approaches and quality standards in social services - Build helping relationships with service users - Communicate professionally with colleagues across sectors - Comply with legislation and provide safeguarding - Contribute to protecting individuals from harm - Cooperate at inter-professional level - Deliver services in diverse cultural communities - Demonstrate leadership in social service cases - Evaluate social work program impact - Follow health and safety precautions - Involve service users and carers in care planning - Listen actively - Manage staff and resources - Promote inclusion - Use person-centred planning
Skills and Competences	- Leadership and staff management - Financial and economic literacy - Digital competencies (data literacy, digital collaboration, content creation, privacy protection, problem-solving) - Entrepreneurial competencies (vision, ethical and sustainable thinking, self-awareness, mobilising others, perseverance) - Green/sustainability competencies (valuing sustainability, systems thinking, futures literacy, political agency)
Qualifications	Bachelor's degree, Master's degree.
EQF Levels	Level 6, Level 7.

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; WP3 focuses on quality of service, innovation, and sustainability.)
Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.

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Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative digital tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Lead and manage staff/resources; ensure legal compliance and quality standards; promote inclusion; develop and evaluate social services; coordinate with multi-sector teams; contribute to policy-making	Quality of service and innovation orientation	Strong alignment on quality service, leadership, and inclusion; WP3 lacks explicit policy and multi-sector coordination roles
Skills and Competences	Leadership, financial and economic literacy, holistic approaches, safeguarding, data-driven management, systems thinking, ethical/sustainable decision-making	Problem solving, creativity, leadership, financial awareness	Strong match in leadership, problem solving, financial awareness; ESCO broader with systems thinking, ethical and political agency, and multi-sector management
Soft Skills	Empathy, active listening, adaptability, resilience, communication, organisational skills, critical thinking, accountability	Patience, adaptability, resilience, communication, empathy, organisational/time management	High overlap; ESCO adds critical thinking and accountability
Digital Skills	Evaluating/managing data, collaborating digitally,	Daily digital communication, digital animation,	ESCO significantly more advanced, especially in data privacy and strategic

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	developing digital content, ensuring data privacy, identifying technological solutions	administrative tasks	digital content development
Green Skills	Valuing sustainability, systems thinking, problem framing, futures literacy, political agency	Waste reduction, daily practice changes, travel reduction	ESCO green skills are more strategic and policy-oriented than WP3's operational focus
Entrepreneurial Skills	Vision, ethical and sustainable thinking, self-awareness, perseverance, mobilising others, financial and economic literacy	Financial awareness, leadership, creativity, problem solving	ESCO more comprehensive and explicitly connected to policy, innovation, and long-term strategic thinking
Qualifications/EQF Levels	Bachelor's or Master's Degree; EQF Level 6–7	Not specified	ESCO more explicit and formal in qualification requirements

5. Key Observations and Recommendations

Matches Identified:

- Strong overlap in leadership, financial awareness, problem solving, creativity, and quality of service.
- Similar emphasis on empathy, communication, adaptability, and resilience.

Gaps Identified:

- WP3 lacks specific mention of policy influence, multi-sector coordination, and strategic programme evaluation.
- WP3 does not require EQF levels or specify formal educational pathways.
- WP3 provides less depth on advanced digital competencies (data privacy, content creation) and strategic green competencies (systems thinking, futures literacy, political agency).

Discrepancies Noted:

- Scope: ESCO describes a senior managerial and policy-shaping role, whereas WP3's focus is more operational and general.
- Digital Skills: ESCO emphasizes data evaluation, secure information management, and strategic use of digital tools; WP3 is limited to basic communication and administrative functions.
- Green/Sustainability Skills: ESCO integrates strategic sustainability planning (systems thinking, futures literacy), while WP3 targets operational eco-efficiency.
- Entrepreneurial Skills: ESCO stresses vision, ethical decision-making, and mobilising others for long-term service sustainability beyond WP3's basic financial and

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leadership scope.
- Qualification Levels: ESCO requires EQF 6–7 and higher education degrees, while WP3 lacks such specification.

Recommendations:

- Include EQF 6–7 and higher education pathways for social service management in WP3-aligned training.
- Integrate advanced digital competencies (data privacy, strategic content creation, inter-professional digital collaboration).
- Add strategic green and sustainability competencies, including political agency and futures literacy.
- Explicitly incorporate policy development, multi-sector coordination, and systemic thinking into older people care managerial roles.

6. Job Role Description Template

Job Title:	Social Services Manager
Job Code (ESCO):	1344.1
Job Overview:	Leads and oversees staff and resources within social service programmes to ensure quality, compliance, and innovation. Implements relevant policies and coordinates with multidisciplinary professionals to improve care outcomes and influence systemic policy.
Key Responsibilities:	Strategic planning; staff and resource management; inter-professional coordination; policy development and advocacy; ensuring service quality and legal compliance; promoting inclusion and person-centred care.
Required Skills:	Leadership, problem solving, creativity, financial and economic literacy, empathy, communication, adaptability, resilience, advanced digital and data management, systems thinking, sustainability and political agency.
Qualifications:	Bachelor's or Master's degree in social sciences, social work, or related fields; EQF Level 6–7.
Experience:	Proven managerial experience in social or older people care services.
Working Conditions:	Office-based with frequent stakeholder engagement and field visits.
Career Path:	Senior care service manager, regional/national social services director, policy advisor.
Additional Info:	Requires continuous professional development in advanced digital technologies, strategic sustainability, and cross-sector governance.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Balancing strategic management with day-to-day operations; addressing diverse and complex community needs; integrating sustainability and digital innovation.

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• Systemic Challenges: Coordinating across health, social, and policy sectors; ensuring funding sustainability; adapting to evolving legislation.

• Implementation Barriers: Lack of advanced training opportunities in strategic sustainability and digital leadership; inconsistent qualification frameworks across regions.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Advanced digital governance (data privacy, content creation), systems thinking, political agency, and futures literacy.

• Upskilling Needs: Training in strategic sustainability, digital leadership, and cross-sector policy development.

• Training Recommendations: EQF 6–7 aligned higher education programs; executive courses on digital transformation, sustainable policy leadership, and inter-professional collaboration.

5. Profile 2221.2

1. General Information

Profile Title:	Nurse responsible for general care
ESCO Code:	2221.2
Job Overview:	Nurses responsible for general care assess, plan, and provide nursing care to elderly individuals in hospitals, residential care homes, or community settings. They promote healthy ageing, manage chronic conditions, support rehabilitation, and provide palliative care, ensuring dignity, comfort, and quality of life.

2. ESCO Profile Description

Profile Description	Nurses responsible for general care deliver comprehensive nursing care to older adults. They diagnose care needs, plan and implement personalized care plans, monitor patient conditions, and collaborate with multidisciplinary teams to ensure high-quality and person-centred care.
Key Responsibilities	- Diagnose and evaluate nursing care requirements - Plan, implement, and evaluate individualised care plans - Provide nursing care for chronic conditions, acute illnesses, and rehabilitation - Administer medication and treatments safely - Provide palliative and end-of-life care - Support independence and active ageing - Communicate effectively with patients, families, and multidisciplinary teams - Ensure infection control and patient safety - Supervise and mentor junior staff - Maintain accurate records and ensure confidentiality

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	- Apply digital tools for patient monitoring and documentation - Integrate sustainable and eco-friendly care practices
Skills and Competences	- Advanced clinical skills and evidence-based practice - Critical thinking and decision-making - Communication and empathy - Leadership and team supervision - Digital health literacy and electronic records management - Risk management and health promotion - Green skills (waste reduction, energy-efficient care)
Qualifications	Bachelor's Degree in Nursing or equivalent professional qualification.
EQF Levels	Level 6.

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; WP3 focuses on innovation, quality of service, and sustainability.)
Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified.
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and waste management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Diagnose care needs; plan, deliver and evaluate nursing care; administer treatments; manage chronic conditions; supervise staff; ensure	Quality of service and innovation orientation	Match in quality of service and leadership; WP3 lacks specific clinical and patient safety details

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	infection control; apply digital monitoring; integrate eco-friendly care		
Skills and Competences	Advanced clinical skills; critical thinking; decision-making; leadership; digital health literacy; risk management; sustainability integration	Problem solving, creativity, leadership, financial awareness	Strong match in leadership and problem solving; WP3 lacks clinical and risk management specifics; ESCO adds evidence-based practice and advanced clinical decision-making
Soft Skills	Empathy; communication ; adaptability; resilience; organisational skills; critical thinking; mentoring	Patience; adaptability; resilience; communication; empathy; organisational/time management	High overlap; ESCO adds clinical mentoring and critical decision-making focus
Digital Skills	Digital health records; telehealth; patient monitoring; secure data management	Daily digital communication, digital animation, administrative tasks	ESCO broader and more advanced in clinical digital tools and secure data handling
Green Skills	Waste reduction, energy-efficient care, sustainable resource use	Waste reduction, daily practice change, travel reduction	Good alignment; ESCO applies healthcare-specific green practices beyond general WP3 scope
Entrepreneurial Skills	Leadership, resource management, innovation in care pathways	Financial awareness, leadership, creativity, problem solving	Match in leadership and problem solving; ESCO lacks direct financial focus; WP3 does not fully reflect care-specific innovation
Qualifications/EQF Levels	Bachelor's Degree in Nursing or	Not specified	ESCO clearer and more specific regarding formal qualifications and EQF levels

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	equivalent; EQF Level 6		

5. Key Observations and Recommendations

Matches Identified:

- Both stress quality of service, leadership, problem solving, and creativity.
- Strong alignment on soft skills: empathy, communication, adaptability, and resilience.
- Good overlap on green skills, with ESCO adding clinical sustainability measures.

Gaps Identified:

- WP3 lacks detailed clinical and patient safety competences such as risk management and evidence-based practice.
- WP3 provides only basic digital competence, lacking healthcare-specific tools and secure data management.
- WP3 omits explicit EQF level and formal qualification requirements.

Discrepancies Noted:

- Scope: ESCO is explicitly clinical and nursing-focused, whereas WP3 is broader and more service-oriented.
- Digital Skills: ESCO requires telehealth, patient monitoring, and secure digital health record use, while WP3 focuses on basic communication and administrative tasks.
- Green Skills: ESCO frames sustainability in the context of healthcare delivery (energy efficiency, infection control), beyond WP3's operational waste/travel focus.
- Entrepreneurial Skills: WP3 emphasizes financial awareness more, while ESCO integrates innovation into clinical care pathways without explicit financial management.
- Qualifications: ESCO requires a formal EQF Level 6 and a nursing degree, while WP3 does not specify.

Recommendations:

- Incorporate explicit clinical competences, including risk management, evidence-based nursing practice, and supervision of staff.
- Add healthcare-specific digital skills, including secure data management, electronic health records, and telehealth.
- Strengthen sustainability content to include infection control, eco-friendly healthcare procurement, and energy-efficient care.
- Require EQF Level 6 and relevant nursing qualifications for alignment with ESCO standards.

6. Job Role Description Template

Job Title:	Nurse responsible for general care
Job Code (ESCO):	2221.2
Job Overview:	Assess, plan, and provide nursing care for older adults in hospital, residential, and community settings, promoting health, independence, and dignity.

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Key Responsibilities:	Diagnose and evaluate care needs; plan and implement care plans; administer medications; provide rehabilitation and palliative care; manage chronic diseases; supervise and mentor staff; apply infection control; ensure accurate documentation; use digital health tools.
Required Skills:	Advanced clinical knowledge, evidence-based decision-making, empathy, communication, adaptability, resilience, leadership, digital health literacy, organisational/time management, healthcare-specific green practices.
Qualifications:	Bachelor's Degree in Nursing or equivalent; EQF Level 6.
Experience:	Previous experience in geriatric or older people care nursing preferred.
Working Conditions:	Hospitals, nursing homes, or community-based care; physically and emotionally demanding.
Career Path:	Senior nurse, nurse manager, geriatric care specialist, healthcare administrator.
Additional Info:	Continuous professional development in digital health and sustainable nursing practices strongly recommended.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: High physical and emotional demands; need for constant upskilling in digital and clinical techniques; maintaining patient dignity and autonomy.

• Systemic Challenges: Workforce shortages; rapid technological change; ageing populations; need for sustainable healthcare.

• Implementation Barriers: Lack of standardized recognition of EQF Level 6 nursing qualifications across regions; variable access to telehealth and digital health tools.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Advanced clinical and risk management competences; healthcare-specific digital tools; formal EQF-level qualification references.

• Upskilling Needs: Telehealth and electronic health record systems; evidence-based geriatric care; energy-efficient clinical practices.

• Training Recommendations: EQF 6-aligned bachelor nursing programmes with strong modules in digital health, sustainable practices, leadership, and innovation.

6. Profile 2635.3.14

1. General Information

Profile Title:	Gerontology Social Worker
ESCO Code:	2635.3.14
Job Overview:	Gerontology social workers support elderly individuals and their families by addressing their biological, psychological, and social needs. They

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	assess clients' overall well-being, including physical health, mental state, and social connections, to understand their unique challenges and connect them to community resources.

2. ESCO Profile Description

Profile Description	Gerontology social workers conduct detailed assessments of each client's functional abilities, coordinate with medical professionals, and advocate for clients' needs to create integrated care plans. They enhance quality of life for older adults by fostering autonomy, resilience, and community support.
Key Responsibilities	- Assess social service users' situation - Build helping relationships with service users - Communicate and conduct interviews with social service users - Apply person-centred care and holistic approaches - Apply case management and crisis intervention - Cooperate at inter-professional level - Empower service users and promote inclusion and rights - Protect vulnerable social service users - Evaluate older adults' ability for self-care - Follow health and safety precautions in social care practices - Involve service users and carers in care planning - Consider social impact of actions on service users
Skills and Competences	Accept own accountability, decision making within social work, empathy, communication, critical thinking, systems thinking, digital literacy (evaluating and managing data, creating content, protecting privacy), and sustainability skills (valuing sustainability, supporting fairness, promoting nature, futures literacy).
Qualifications	Bachelor's Degree, Master's Degree.
EQF Levels	Level 6, Level 7.

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; WP3 focuses on quality of service, innovation, and sustainability.)
Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative digital tasks.

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Green Skills	Change in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Assess client well-being; coordinate care; advocate for autonomy and inclusion; apply crisis intervention and holistic approaches; protect vulnerable users	Quality of service and innovation orientation	Strong match in quality service and problem-solving; WP3 adds innovation and sustainability dimensions
Skills and Competences	Person-centred care, case management, crisis intervention, systems thinking, critical thinking, digital literacy, green and sustainability skills	Problem solving, creativity, leadership, financial awareness	Strong match in problem solving and leadership; WP3 adds entrepreneurial/financial aspects; ESCO adds advanced digital, green, and systemic skills
Soft Skills	Empathy, communication, resilience, adaptability, critical thinking, accountability	Patience, adaptability, resilience, communication, empathy, organisational/time management	Strong alignment; WP3 less explicit on critical/systemic thinking and accountability
Digital Skills	Evaluating and managing data; protecting personal data and privacy; interacting and	Daily digital communication, digital animation, administrative tasks	ESCO more comprehensive with privacy, digital content creation, and technological innovation

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	collaborating through digital technologies; creating digital content		
Green Skills	Valuing sustainability, supporting fairness, promoting nature, systems thinking, futures literacy, collective action	Waste reduction, daily practice changes, travel reduction	ESCO provides broader green and sustainability competencies beyond WP3's operational focus
Entrepreneurial Skills	Spotting opportunities, creativity, vision, mobilizing resources, financial and economic literacy	Financial awareness, leadership, creativity, problem solving	Strong match; ESCO provides more detailed entrepreneurial framework
Qualifications/EQF Levels	Bachelor's or Master's Degree, EQF 6–7	Not specified	ESCO clearer and more specific; WP3 lacks formal qualification levels

5. Key Observations and Recommendations

Matches Identified:

- Strong alignment in problem solving, creativity, leadership, and quality of service.
- High consistency in soft skills like empathy, communication, adaptability, and resilience.

Gaps Identified:

- WP3 does not specify EQF levels or formal qualifications.
- WP3 provides less detail on advanced digital literacy, privacy protection, and systemic sustainability competencies.

Discrepancies Noted:

- Scope and depth: The ESCO profile is specialised (gerontology social work with EQF 6–7), whereas WP3 is generic to older people care providers and omits formal levels.
- Digital skills emphasis: ESCO stresses data privacy, secure data management, and content creation; WP3 focuses on everyday communication/administrative use and animation tools.
- Sustainability framing: ESCO (via GreenComp) includes systems thinking, futures literacy, and collective action; WP3 lists mainly operational practices (waste/travel reduction).
- Role responsibilities: ESCO includes case management, crisis intervention, and safeguarding responsibilities that are not explicit in WP3.

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- Terminology/target group: ESCO targets “gerontology social worker”; WP3 targets a broad provider category, which can cause one-to-many mapping.

Recommendations:

- Integrate advanced digital skills such as data privacy, digital content creation, and technological innovation into WP3.
- Incorporate comprehensive green and sustainability skills, including systems thinking and futures literacy.
- Add formal qualification requirements (EQF 6–7) and education paths (Bachelor's or Master's in social work or gerontology).

6. Job Role Description Template

Job Title:	Gerontology Social Worker
Job Code (ESCO):	2635.3.14
Job Overview:	Supports elderly individuals and their families by addressing biological, psychological, and social needs, ensuring autonomy, inclusion, and comprehensive care.
Key Responsibilities:	Assess client situations; apply case management and crisis intervention; collaborate with interdisciplinary teams; advocate for clients’ rights and inclusion; manage data securely; integrate medical and social services; apply sustainability and ethical care practices.
Required Skills:	Empathy, communication, problem solving, creativity, leadership, digital literacy, critical thinking, systems thinking, sustainability and green skills.
Qualifications:	Bachelor's or Master’s degree in social work, gerontology, or related fields; EQF Level 6–7.
Experience:	Previous social work experience, especially with older adults, recommended.
Working Conditions:	Community centres, healthcare settings, and clients’ homes; emotionally demanding and highly collaborative.
Career Path:	Senior gerontology specialist, policy advisor in ageing services, older people care program director.
Additional Info:	Continuous professional development in digital and sustainable practices essential.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Managing complex biopsychosocial needs; balancing ethical care with resource constraints; addressing loneliness and mental health in ageing populations.

• Systemic Challenges: Rapid demographic ageing; integration of digital and green practices; ensuring policy support for sustainable older people care.

• Implementation Barriers: Implementation Barriers: Need for advanced training in digital privacy and sustainability; gaps in EQF alignment across countries.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

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• Identified Skills Gaps: Advanced digital literacy (privacy, digital content creation), systems thinking in sustainability.

• Upskilling Needs: Digital skills in secure client data management; training in futures literacy and systemic sustainability; financial and resource management for older people care.

• Training Recommendations: EQF 6–7 aligned higher education programs; continuous professional development in digital and green practices; entrepreneurial training for resource mobilization and policy advocacy.

7. Profile 3412.4.1

1. General Information

Profile Title:	Adult community care worker
ESCO Code:	3412.4.1
Job Overview:	Adult community care workers perform assessment and care management of adults living with physical impairments or convalescing conditions. They aim to improve life quality and enable clients to live safely and independently at home and in the community.

2. ESCO Profile Description

Profile Description	Adult community care workers provide assessment and care management to adults with physical impairments or recovering from illness, aiming to support independence and safety at home.
Key Responsibilities	- Apply person-centred care - Assist individuals with disabilities in community activities - Assist social service users with physical disabilities - Build helping relationships with service users - Contribute to protecting individuals from harm - Encourage independence in daily activities - Support harmed social service users - Involve service users and carers in care planning - Communicate with social service users and conduct interviews - Promote inclusion and service users' rights - Apply problem solving and holistic approaches in social services - Demonstrate leadership in social service cases - Comply with legislation in social services
Skills and Competences	Legal requirements in the social sector; older adults' needs; social justice; social sciences.
Qualifications	Not specified (recommendation: legal and social science fields).
EQF Levels	Not specified (recommended: EQF Level 4).

3. WP3 Documented Skills and Competences

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Key Responsibilities	(Not specifically detailed; focus on innovation, quality of service, and sustainability in older people care.)
Skills and Competences	Quality of service; problem solving; creativity; leadership/communication for motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation/engagement; digital administration.
Green Skills	Daily practice changes; waste reduction and management; travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Assess and manage care; support independence; protect individuals; promote inclusion; apply legislation	Focus on quality of service and innovation	Strong match on service quality and empowerment; WP3 broader and future-oriented
Skills and Competences	Person-centred care, inclusion promotion, problem solving, leadership, compliance with law, holistic approach	Problem solving, creativity, leadership, financial awareness	Matches in leadership and problem solving; WP3 adds creativity and financial/entrepreneurial skills
Soft Skills	Empathy, communication, ability to build helping relationships, leadership	Patience, adaptability, resilience, communication, empathy, organisational/time management	Strong match on empathy and communication; WP3 adds resilience and adaptability
Digital Skills	Not specified (but	Digital communication,	Gap: ESCO lacks explicit digital competence; WP3

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	recommended to add for assessment and record-keeping)	animation/engagement, digital administration	provides detailed expectations
Green Skills	Not mentioned	Waste reduction, daily practice change, travel reduction	Gap: ESCO lacks green dimension
Entrepreneurial Skills	Not mentioned	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial/financial skills
Qualifications/EQF Levels	Not specified (recommended EQF 4)	Not specified	Gap: both lack explicit qualification and EQF detail

5. Key Observations and Recommendations

Matches Identified:

- Clear alignment on person-centred care, problem solving, leadership, and communication.
- Common emphasis on quality service and inclusion.

Gaps Identified:

- Digital skills (care assessment tools, data recording, e-health) absent in ESCO.
- No green practices (eco-friendly and sustainable care).
- Entrepreneurial/financial/creative skills missing.

Discrepancies Noted:

- Lack of explicit EQF and educational requirements.

Recommendations:

- Add EQF Level 4 requirement (legal/social science focus).
- Incorporate digital skills: record-keeping, secure communication, remote care coordination.
- Include green skills: waste management, sustainable community care.
- Integrate entrepreneurial/financial skills: budgeting for community services, creative problem solving.

6. Job Role Description Template

Job Title:	Adult community care worker
Job Code (ESCO):	3412.4.1
Job Overview:	Assess and manage care for adults with disabilities or convalescing conditions, supporting their independence and inclusion in the community.
Key Responsibilities:	Apply person-centred care; assist in community activities; build helping relationships; protect and support service users; plan and

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	monitor care; ensure compliance with social service legislation.
Required Skills:	Empathy, communication, problem solving, leadership, inclusion promotion, digital communication and records, adaptability, resilience, green practices, organisational/time management.
Qualifications:	Recommended EQF Level 4 with focus on legal and social sciences.
Experience:	Previous experience in social care desirable.
Working Conditions:	Community-based; home visits; close collaboration with families and multidisciplinary teams.
Career Path:	Senior community care coordinator, policy advisor, social services manager.
Additional Info:	Continuous professional development in digital, green, and inclusive care practices strongly advised.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Managing complex community cases; ensuring legal compliance; balancing autonomy with safety.

• Systemic Challenges: Integration of digital and green practices; shortage of trained staff; evolving legal frameworks.

• Implementation Barriers: Absence of standardized EQF levels; lack of training resources for digital/green skills.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital competence for record-keeping and remote support; green and sustainability skills; entrepreneurial/financial awareness.

• Upskilling Needs: Training in telehealth, digital data security, eco-friendly community care.

• Training Recommendations: EQF 4-aligned programs combining legal/social sciences, digital and green care modules, and leadership development.

8. Profile 3412.4.2

1. General Information

Profile Title:	Adult day care worker
ESCO Code:	3412.4.2

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Job Overview:	Adult day care workers provide daytime support and care to adults with disabilities, chronic illnesses, or age-related conditions in specialized day centres. They facilitate activities that enhance well-being, social inclusion, and independence.

2. ESCO Profile Description

Profile Description	Adult day care workers support adults with physical impairments, disabilities, or illnesses by delivering daytime assistance and therapeutic or recreational activities. Their goal is to promote independence, inclusion, and personal development while ensuring safety and dignity.
Key Responsibilities	- Plan and facilitate social, educational, and recreational activities - Assist clients with personal care (feeding, hygiene, mobility) - Observe, monitor, and document client progress and well-being - Provide emotional support and companionship - Encourage independence and active participation in activities - Promote inclusion and protect service users' rights - Involve service users and their families in activity planning and care decisions - Support individuals with disabilities in community engagement - Maintain safe and hygienic environment - Coordinate with healthcare and social service professionals - Apply legislation, safeguarding, and social service standards - Demonstrate leadership and team collaboration in group settings
Skills and Competences	Social sciences; disability types and needs; older adults' requirements; social justice principles
Qualifications	Not specified (recommended: vocational training in social care, adult care, or community services).
EQF Levels	Not specified (recommended: EQF Level 4).

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; focus on quality of service, innovation, and sustainability in elderly and social care.)
Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.

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Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative digital tasks.
Green Skills	Daily practice changes; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Plan and lead activities; assist with care; promote inclusion; monitor well-being; coordinate with professionals; apply social service law	Quality of service and innovation orientation	Strong match in quality of service, inclusion, and leadership; WP3 less operational
Skills and Competences	Social engagement facilitation; empathy; teamwork; problem solving; leadership; activity planning; legal compliance	Problem solving, creativity, leadership, financial awareness	Matches in problem solving and leadership; WP3 adds creativity and financial/entrepreneurial dimension
Soft Skills	Empathy; communication; patience; teamwork; cultural sensitivity	Patience; adaptability; resilience; communication; empathy; organisational/time management	Strong match; WP3 adds adaptability and resilience
Digital Skills	Not specified (recommended: use of digital activity/engagement tools and record-keeping)	Daily digital communication, animation/engagement, digital administration	Gap: ESCO lacks explicit digital skill requirements
Green Skills	Not specified	Waste reduction, daily practice changes, travel reduction	Gap: ESCO lacks green practices

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Entrepreneurial Skills	Not specified	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial/financial skills
Qualifications/EQF Levels	Not specified (recommended EQF 4)	Not specified	Gap: no formal EQF or education specified

5. Key Observations and Recommendations

Matches Identified:

- Clear overlap in leadership, problem solving, inclusion, empathy, and quality of service.
- Shared emphasis on communication and teamwork.

Gaps Identified:

- No explicit digital skills (digital engagement tools, e-records, telecommunication).
- Lack of green practices (waste reduction, eco-friendly operations).
- No entrepreneurial/financial awareness despite the need for resourceful programme planning.

Discrepancies Noted:

- Missing EQF level and formal education pathways.

Recommendations:

- Specify EQF Level 4 and typical qualifications (vocational social care or adult education training).
- Integrate digital competencies (activity planning software, secure record-keeping, online group engagement).
- Add green skills (eco-friendly activity planning, waste management, sustainable daily operations).
- Encourage entrepreneurial and financial skills (budgeting activities, creative programme funding).

6. Job Role Description Template

Job Title:	Adult day care worker
Job Code (ESCO):	3412.4.2
Job Overview:	Facilitate daytime care, activities, and inclusion for adults with disabilities, illnesses, or age-related conditions, supporting independence and well-being.
Key Responsibilities:	Plan and lead activities; assist with personal care; monitor and document client progress; encourage participation and social inclusion; coordinate with healthcare and social service teams; apply safeguarding and legal standards.
Required Skills:	Empathy, communication, teamwork, problem solving, leadership, creativity, adaptability, resilience, organisational/time management, digital engagement tools, eco-

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	friendly practices.
Qualifications:	Recommended EQF Level 4; vocational or community care training.
Experience:	Experience in social care or adult education preferred.
Working Conditions:	Day centres; group settings; emotionally and physically active.
Career Path:	Senior activity coordinator, community care supervisor, social services manager.
Additional Info:	Ongoing professional development recommended in digital tools, sustainability, and creative programming.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Managing diverse needs in group settings; ensuring inclusion for adults with varying disabilities; balancing safety with active engagement.

• Systemic Challenges: Integration of green and digital practices; meeting evolving social care regulations; staff shortages.

• Implementation Barriers: Lack of formal EQF recognition; limited training opportunities for digital and green skill development.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital competence in engagement and record-keeping; structured green practices; entrepreneurial/financial awareness.

• Upskilling Needs: Training in digital communication and activity planning tools; eco-friendly daily operations; budgeting and creative funding.

• Training Recommendations: EQF 4-aligned programs covering digital and green modules; creativity and leadership training for activity design and resource management.

9. Profile 3412.4.9

1. General Information

Profile Title:	Residential care home worker
ESCO Code:	3412.4.9
Job Overview:	Residential care home workers follow a specific plan to provide day-to-day care to clients. They develop a client-focused environment in the care homes where they work and look after the physical and mental wellbeing of clients by providing social care in residential centres.

2. ESCO Profile Description

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Profile Description	Residential care home workers follow a specific plan to provide day-to-day care to clients. They develop a client-focused environment in the care homes where they work. They look after the physical and mental wellbeing of clients by providing social care in residential centres.
Key Responsibilities	Not specified in the ESCO profile. However, as noted in the recommendations, this role substantially overlaps with the Care home worker profile (ESCO 3412.4.2), which includes tasks such as applying person-centred care, monitoring health, maintaining records, and ensuring safety and inclusion.
Skills and Competences	Not specified in the ESCO profile. Recommendations suggest adopting the same skills and competences as for Care home worker (3412.4.2), including applying person-centred care, assisting individuals with disabilities, protecting vulnerable users, following health and safety precautions, monitoring service users' health, and maintaining records.
Qualifications	Not specified (recommendation: vocational training in social care or older people care).
EQF Levels	Not specified (recommendation: EQF Level 4).

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; WP3 focuses on quality of service, innovation, and sustainability.)
Skills and Competences	Quality of service; problem solving; creativity; leadership through communication and motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational skills – time and task management.
Digital Skills	Daily digital communication tools; digital tools for animation purposes; administrative tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and waste management strategies; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership skills through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Provide daily care, ensure physical and mental well-being, create client-focused	Quality of service and innovation orientation	Match in service quality and user well-being focus; WP3 adds sustainability and innovation

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	environment (as per care home worker 3412.4.2)		
Skills and Competences	Person-centred care, health monitoring, maintaining records, safeguarding (inferred from care home worker profile)	Problem solving, creativity, leadership, financial awareness	Match in problem solving and leadership; WP3 adds creativity and financial/entrepreneurial elements; ESCO lacks explicit innovation focus
Soft Skills	Empathy, communication, patience, trust-building (inferred)	Patience, adaptability, resilience, communication, empathy, organisational/time management	Strong alignment; WP3 adds adaptability and resilience
Digital Skills	Not specified (recommend adopting care home worker updates: digital record-keeping, e-health monitoring)	Daily digital communication, digital animation, administrative tasks	Gap: ESCO lacks explicit digital competence; WP3 details modern digital expectations
Green Skills	Not specified	Waste reduction, daily practice changes, travel reduction	Gap: ESCO lacks sustainability and green practices
Entrepreneurial Skills	Not specified	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial and financial skills
Qualifications/EQF Levels	Not specified (recommended EQF 4, vocational social care training)	Not specified	Gap: No formal educational or EQF standards provided

5. Key Observations and Recommendations

Matches Identified:

- Alignment in quality of service, problem solving, leadership, empathy, and communication.

Gaps Identified:

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- Lack of explicit digital skills (record-keeping, e-health monitoring, communication tools).
- No reference to green skills or sustainability practices.
- Absence of entrepreneurial/financial competencies.
- Missing EQF level and education requirements.

Discrepancies Noted:

- ESCO profile is minimal and marked as obsolete; most operational content overlaps with care home worker (3412.4.2).
- WP3 emphasises future skills (green, digital, entrepreneurial) that are not included in ESCO.

Recommendations:

- Merge or align with care home worker (3412.4.2) profile while adopting updated recommendations (EQF 4, digital monitoring, organisational and managerial skills).
- Add explicit digital competencies and green care practices.
- Introduce entrepreneurial/financial awareness and creative problem-solving elements.

6. Job Role Description Template

Job Title:	Residential care home worker
Job Code (ESCO):	3412.4.9
Job Overview:	Provide day-to-day personal and social care to residents in care homes, ensuring physical and mental well-being in a client-centred environment.
Key Responsibilities:	Deliver personal and social care according to individual plans; monitor health and report changes; maintain accurate records; ensure safe, hygienic living spaces; promote social inclusion and independence; communicate effectively with residents, families, and multidisciplinary teams.
Required Skills:	Empathy, communication, patience, organisational and time management, problem solving, digital record-keeping and communication, adaptability, resilience, basic health monitoring.
Qualifications:	Recommended EQF Level 4; vocational training in social or older people care.
Experience:	Experience in residential care settings preferred.
Working Conditions:	Residential care home environment; physically demanding; requires emotional resilience.
Career Path:	Care home supervisor, team leader, or manager; potential transition to social service management.
Additional Info:	Continuous professional development in digital tools, green practices, and leadership recommended.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Managing complex resident needs in group settings; ensuring a client-focused and safe environment; handling emotional stress.

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• Systemic Challenges: Integration of new green and digital practices; staff shortages; evolving health and social care regulations.

• Implementation Barriers: Limited training resources for digital and green upskilling; lack of standardized EQF requirements; resistance to adopting digital tools.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital engagement and e-health monitoring; structured green practices; entrepreneurial/financial awareness.

• Upskilling Needs: Digital care coordination, sustainability and waste management training, leadership and creative problem-solving.

• Training Recommendations: EQF 4-aligned care programs with digital and green modules; workshops on financial awareness, leadership, and creative activity planning.

10. Profile 3412.4.11

1. General Information

Profile Title:	Residential home adult care worker
ESCO Code:	3412.4.11
Job Overview:	Job Overview: Residential home adult care workers counsel and support vulnerable adults with physical or mental disabilities or addiction issues. They monitor progress and provide care in a positive living environment, working closely with families to meet individual needs.

2. ESCO Profile Description

Profile Description	Residential home adult care workers counsel and support vulnerable adults who have physical or mental disabilities or addiction issues. They monitor their progress and provide care in a positive living environment. They work with families to support individuals' development and meet their needs.
Key Responsibilities	- Provide personal care (hygiene, mobility, nutrition) - Monitor and report residents' health status - Provide companionship and emotional support - Follow individualized care plans - Collaborate with healthcare professionals and families - Maintain health & safety standards and infection prevention practices
Skills and Competences	Empathy and compassion; effective communication; basic healthcare knowledge; knowledge of older people care procedures; ability to assist with personal hygiene; understanding of health & safety and infection prevention; monitoring and reporting; emotional support; teamwork; stress management; problem solving; promoting independence; record-keeping; cultural sensitivity; handling

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	emergencies calmly; active listening; knowledge of dietary needs; time management.
Qualifications	Typically vocational education in healthcare or related field; certifications in older people care or first aid advantageous.
EQF Levels	3 or 4 depending on national framework.

3. WP3 Documented Skills and Competences

Key Responsibilities	Focus on future-oriented upskilling for older people care providers
Skills and Competences	Quality of service; problem solving; creativity; leadership/communication for motivation; financial awareness.
Qualifications	Not specified.
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational skills (time and task management).
Digital Skills	Daily digital communication tools (personal/professional); digital tools for animation/engagement; digital administration tasks.
Green Skills	Changes in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Care, hygiene, health monitoring, emotional support, reporting, safety, collaboration	Broad focus on quality of service, innovation	Mostly match; WP3 less detailed but aligns in quality-of-service and innovation orientation
Skills and Competences	Empathy, communication, health & safety, infection control, record-keeping, independence promotion	Problem solving, creativity, leadership, financial awareness	Matches on problem solving and communication; WP3 adds creativity and entrepreneurial aspects absent in ESCO
Soft Skills	Empathy, communication, patience,	Patience, adaptability, resilience,	Strong match; WP3 adds adaptability and resilience,

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	stress management, cultural sensitivity, teamwork	communication, empathy, organisational/time management	which can complement ESCO's stress management
Digital Skills	Digital literacy (recommended as update)	Daily digital communication, animation tools, digital administration	Gap: ESCO suggests digital literacy but not detailed; WP3 specifies concrete digital practices
Green Skills	Suggestion to include green practices	Daily practices, waste management, travel reduction	Gap: ESCO only recommends inclusion; WP3 specifies actions
Entrepreneurial Skills	Not present	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial dimension
Qualifications/EQF Levels	Vocational healthcare education, EQF 3–4	Not specified	Minor gap: WP3 doesn't address formal EQF levels

5. Key Observations and Recommendations

Matches Identified:

- Strong alignment on empathy, communication, patience, problem solving, and time management.
- Health and safety overlaps with WP3's quality-of-service focus.

Gaps Identified:

- Digital skills: ESCO only recommends future updates; WP3 defines specific skills.
- Green skills: WP3 outlines clear practices; ESCO only mentions future need.
- Entrepreneurial/financial/leadership skills absent in ESCO.

Discrepancies Noted:

- ESCO is occupation-specific, while WP3 adds cross-cutting future-oriented competences.

Recommendations:

- Integrate WP3's explicit digital and green skills into ESCO profile updates.
- Add entrepreneurial/financial awareness and creativity to support innovation in care services.
- Strengthen adaptability and resilience training.

6. Job Role Description Template

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Job Title:	Residential home adult care worker
Job Code (ESCO):	3412.4.11
Job Overview:	Provide personal and emotional care for adults with disabilities or addiction issues in residential settings.
Key Responsibilities:	Assist with hygiene, nutrition, and mobility; monitor health; maintain safety and infection control; provide companionship and emotional support; keep records; collaborate with families and professionals.
Required Skills:	Empathy, communication, problem solving, teamwork, patience, time management, digital communication and reporting tools, green practices, adaptability, resilience.
Qualifications:	Vocational healthcare education; certifications in older people care or first aid.
Experience:	Preferably experience in residential care settings.
Working Conditions:	Residential care facilities; shift work; emotionally demanding.
Career Path:	Senior care worker, team leader, care coordinator, further specialization in geriatric care or mental health support.
Additional Info:	Ongoing professional development (digital, green, and mental health support) recommended.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Emotional stress; need for up-to-date infection control and care technologies.

• Systemic Challenges: Workforce shortages; limited training resources; adapting to digitalization and green policies.

• Implementation Barriers: Resistance to digital tool adoption; costs of continuous training; lack of formal frameworks for entrepreneurial skills.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital, green, and entrepreneurial/financial skills.

• Upskilling Needs: Training in digital communication and eHealth tools; sustainable practices; leadership and creativity.

• Training Recommendations: Blended learning programs on eHealth and green care; modules on financial awareness and innovation; stress resilience and adaptability workshops.

11. Profile 3412.4.12

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1. General Information

Profile Title:	Residential home older adult care worker
ESCO Code:	3412.4.12
Job Overview:	A Residential Home Older Adult Care Worker provides care and support to older adults in residential care homes. Responsibilities include daily living assistance, emotional support, and ensuring safety and dignity, while collaborating with healthcare professionals and families.

2. ESCO Profile Description

Profile Description	A Residential Home Older Adult Care Worker is responsible for providing care and support to older adults residing in residential care homes. Duties include assisting with daily activities (personal hygiene, mobility, nutrition), ensuring a safe environment, providing emotional support, and facilitating social engagement. They collaborate with healthcare professionals to meet residents' physical, mental, and emotional needs.
Key Responsibilities	- Assist with personal hygiene (bathing, dressing) - Support mobility and exercise routines - Monitor and report health status - Provide emotional support and companionship - Promote residents' independence and social well-being - Ensure health & safety and infection control - Maintain records and documentation - Collaborate with multidisciplinary teams and families
Skills and Competences	Empathy and compassion; effective communication; knowledge of older people care procedures; assistance with personal hygiene; understanding health & safety; infection control; monitoring and reporting; emotional support; teamwork and collaboration; basic healthcare knowledge; promoting social well-being; active listening; cultural sensitivity and inclusiveness; handling emergencies; record-keeping; knowledge of dietary and nutritional needs; time management; stress management.
Qualifications	Vocational education in healthcare or related field; specialized training in older people care; first aid or geriatric certifications beneficial.
EQF Levels	3 or 4 depending on national framework.

3. WP3 Documented Skills and Competences

Key Responsibilities	Focus on forward-looking competences for older people care providers.

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Skills and Competences	Quality of service; problem solving; creativity; leadership/communication for motivation; financial awareness.
Qualifications	Not specified.
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation/engagement; administrative digital tasks.
Green Skills	Changes in daily practices; structural changes for waste reduction/management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Assist hygiene, mobility, nutrition; monitor/report health; emotional and social support; infection control; record-keeping; team collaboration	Broad focus on quality of service and innovation	Matches overall; WP3 less operational, more strategic
Skills and Competences	Empathy, communication, health & safety, infection control, teamwork, stress management, social well-being promotion	Problem solving, creativity, leadership, financial awareness	Matches in problem solving & communication; WP3 adds creativity and entrepreneurial/financial dimensions
Soft Skills	Empathy, patience, stress management, cultural sensitivity, teamwork	Patience, adaptability, resilience, communication, empathy, organisational/time management	Strong match; WP3 expands with adaptability and resilience
Digital Skills	Recommend use of assistive and health-	Digital communication, animation/engageme	Gap: ESCO mentions technology integration;

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	monitoring technologies (future update)	nt tools, digital administration	WP3 specifies concrete digital skills
Green Skills	Recommendation to include sustainable practices	Daily practice change, waste management, travel reduction	Gap: WP3 provides actionable green practices; ESCO only recommends
Entrepreneurial Skills	Not present	Financial awareness, leadership, creativity, problem solving	Gap: No entrepreneurial focus in ESCO
Qualifications/EQF Levels	Vocational healthcare education; EQF 3–4	Not specified	Minor gap: WP3 silent on EQF levels

5. Key Observations and Recommendations

Matches Identified:

- Alignment in empathy, communication, patience, problem solving, and teamwork.
- ESCO's infection control and health & safety are consistent with WP3 quality-of-service emphasis

Gaps Identified:

- Digital skills are only a recommendation in ESCO; WP3 provides detailed requirements.
- Green skills are underdeveloped in ESCO compared to WP3.
- Entrepreneurial/financial/leadership elements absent from ESCO.

Discrepancies Noted:

- ESCO emphasizes hands-on caregiving, while WP3 stresses systemic innovation and sustainability.

Recommendations:

- Integrate WP3's digital, green, and entrepreneurial skills explicitly.
- Include adaptability and resilience training as part of stress management and continuous professional development.
- Highlight technological tools (e.g., health-monitoring devices) as core skills, not just optional updates.

6. Job Role Description Template

Job Title:	Residential home older adult care worker
Job Code (ESCO):	3412.4.12
Job Overview:	Provide physical, emotional, and social care to older adults in residential settings, ensuring dignity, independence, and well-being.

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Key Responsibilities:	Assist with hygiene, mobility, and nutrition; monitor and report health status; provide companionship and social engagement; maintain records; uphold infection control and safety; collaborate with families and multidisciplinary teams.
Required Skills:	Empathy, communication, teamwork, problem solving, patience, time management, digital reporting and engagement tools, green practices, adaptability, resilience.
Qualifications:	Vocational healthcare education; specialized older people care training; first aid or geriatric certifications advantageous.
Experience:	Experience in older people care preferred.
Working Conditions:	Residential care homes; shift work; emotionally demanding.
Career Path:	Senior care worker, team leader, care coordinator, geriatric care specialist.
Additional Info:	Continuous professional development recommended, particularly in digital tools, sustainable care, and mental health support.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Age-related health complexity; need for palliative and active ageing care; emotional stress.

• Systemic Challenges: Workforce shortages; adapting to digital and green transitions; increasing demand for palliative skills.

• Implementation Barriers: Limited resources for training; resistance to digital or green practice adoption; lack of structured entrepreneurial skill pathways.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital competence (eHealth, monitoring devices), green practices, entrepreneurial/leadership skills.

• Upskilling Needs: Training on digital communication and assistive technologies; sustainability and waste management; leadership and creativity.

• Training Recommendations: Integrate blended learning on eHealth and assistive technology; green care modules; leadership and financial awareness workshops.

12. Profile 5322.1

1. General Information

Profile Title:	Home care aide
ESCO Code:	5322.1
Job Overview:	Home care aides provide daily personal assistance and promote autonomy for individuals unable to care for themselves due to illness, ageing, or disability. Following healthcare professional instructions,

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	they help with hygiene, feeding, communication, and medication while supporting overall well-being.

2. ESCO Profile Description

Profile Description	Home care aides provide personal assistance and promote autonomy for people who are ill, elderly, or disabled. They assist with personal hygiene, feeding, communication, or medication according to healthcare instructions, ensuring safety, dignity, and comfort.
Key Responsibilities	- Accompany and support individuals with physical disabilities or special needs - Apply first response and provide basic first aid - Monitor patient health and report changes - Support clients in daily activities (feeding, communication, hygiene) - Provide in-home support for disabled individuals - Help older adults maintain independence and adapt to physical limitations - Prepare meals (ready-made dishes, sandwiches, dietary meals) - Perform household tasks: cleaning, laundry, ironing, making beds, dishwashing - Manage errands (buy groceries, walk dogs, feed pets) - Prevent domestic accidents and promote healthy lifestyles - Actively listen and provide companionship
Skills and Competences	Essential: Empathy; patience; communication; active listening; first response and first aid; ability to lift weights and work ergonomically; organisational skills; ability to prevent accidents and assess risk; basic knowledge of disability types and older adults' needs. Optional: Advising on healthy lifestyle; managing community activities; digital scheduling and record-keeping; understanding food allergies; care for hearing/visual/mobility disabilities.
Qualifications	Not specified (recommended: vocational home care/older people care training, basic first aid, disability care certificates).
EQF Levels	Not specified (recommended EQF Level 3 or 4 depending on specialization and responsibilities).

3. WP3 Documented Skills and Competences

Key Responsibilities	(Not specifically detailed; focus on quality of service, innovation, and sustainability in older people care.)
Skills and Competences	Quality of service; problem solving; creativity; leadership and motivational communication; financial awareness.
Qualifications	Not specified.
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.

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Digital Skills	Daily digital communication tools; digital tools for animation and engagement; digital administration tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Hygiene, feeding, communication, medication assistance; health monitoring; companionship; meal prep; domestic chores; accident prevention	Quality of service and innovation focus	Strong match in service quality; WP3 broader, less task-oriented
Skills and Competences	First response; empathy; active listening; risk prevention; organisational and household skills	Problem solving, creativity, leadership, financial awareness	Matches on problem solving and organisational abilities; WP3 adds creativity and entrepreneurial/financial elements
Soft Skills	Empathy; patience; communication; active listening; responsibility	Patience; adaptability; resilience; communication; empathy; organisational/time management	Strong match; WP3 adds adaptability and resilience
Digital Skills	Recommended updates: record-keeping, scheduling, secure communication, GDPR compliance	Daily digital communication, animation tools, administrative tasks	Good overlap on communication and administration; WP3 includes animation/engagement beyond ESCO's scope
Green Skills	Recommended: waste	Waste reduction, daily practice	Gap: ESCO suggests but does not detail green practices

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	management, energy efficiency, eco-friendly products	changes, travel reduction	
Entrepreneurial Skills	Not specified	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial and leadership development
Qualifications/EQF Levels	Not specified (recommend EQF 3–4)	Not specified	Gap: no formal EQF or education specified in either

5. Key Observations and Recommendations

Matches Identified:

- Strong alignment on empathy, communication, patience, and problem solving.
- Organisational and time management skills consistent with WP3.

Gaps Identified:

- Green skills not fully integrated.
- Entrepreneurial and financial skills absent.
- Digital skills need expansion to include secure data handling and coordination tools.

Discrepancies Noted:

- ESCO lists very detailed daily tasks; WP3 emphasizes higher-level innovation and sustainability.

Recommendations:

- Include explicit EQF 3–4 level and examples of relevant qualifications (e.g., first aid, home care training).
- Integrate digital skills: record keeping, scheduling, GDPR compliance, telecommunication.
- Add green skills: energy-saving practices, eco-friendly cleaning, waste management.
- Encourage entrepreneurial and career development skills for growth into supervisory or specialized roles.

6. Job Role Description Template

Job Title:	Home care aide
Job Code (ESCO):	5322.1
Job Overview:	Provide personal assistance and promote autonomy for individuals unable to care for themselves due to illness, ageing, or disability.
Key Responsibilities:	Assist with hygiene, feeding, communication, and medication; monitor health; provide companionship; prepare meals; perform household tasks; prevent domestic accidents; use digital tools for records, scheduling, and communication; respect privacy and

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	confidentiality.
Required Skills:	Empathy, patience, communication, active listening, problem solving, organisational/time management, first response and basic first aid, digital literacy (record keeping, secure communication), eco-friendly household management, adaptability, resilience.
Qualifications:	Recommended EQF Level 3–4; vocational training in home care, first aid, or older people care.
Experience:	Prior caregiving or home care experience advantageous but not always required.
Working Conditions:	Private homes or community settings; physically demanding; emotionally sensitive.
Career Path:	Specialization in dementia or palliative care; supervisory or managerial roles; advanced social or healthcare roles.
Additional Info:	Continuous professional development strongly recommended (digital, green, and interpersonal skills).

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Physically demanding tasks; emotional stress; maintaining privacy and dignity while working closely with clients.

• Systemic Challenges: Low pay and social recognition; unequal regulation of training across EU; rapid digitalization and environmental requirements.

• Implementation Barriers: Limited access to affordable training; lack of standardized EQF recognition; varying home environments for green practices.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital security and coordination; structured green practices; entrepreneurial skills.

• Upskilling Needs: Digital record-keeping and GDPR compliance; eco-friendly care methods; creativity and leadership for career advancement.

• Training Recommendations: Provide accredited courses in home care with digital and green modules; offer career development and entrepreneurial training.

13. Profile 5322

1. General Information

Profile Title:	Home-based personal care worker
ESCO Code:	5322
Job Overview:	Home-based personal care workers assist individuals needing support due to aging, illness, injury, or physical/mental conditions, often in

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	private homes or residential settings. They follow care plans set by health professionals and provide physical, emotional, and social care to enhance quality of life.

2. ESCO Profile Description

Profile Description	Home-based personal care workers assist individuals needing support due to aging, illness, injury, or physical or mental conditions, often in private homes or residential settings. They provide services tailored to care plans and ensure a safe, clean living environment.
Key Responsibilities	- Personal care and therapy (hygiene, feeding, dressing, mobility, exercise, communication, medication, wound care) - Monitoring and reporting client health status and concerns to healthcare professionals - Mobility support (positioning, lifting, using wheelchairs or vehicles) - Emotional and informational support (nutrition, hygiene, adaptation to health conditions) - Environmental maintenance (laundry, dishwashing, cleaning) - Psychological support (conversation, reading, engagement) - Meal preparation (dietary planning and cooking) - Parenting support (care for newborns and postpartum support) - Errands and appointments (scheduling, accompanying to medical visits)
Skills and Competences	- Technical: Basic therapeutic care (medication administration, wound care), safe lifting and mobility assistance, meal preparation for special diets. - Digital: Use of digital tools for record-keeping, telemedicine, and communication with families and professionals; GDPR-compliant data management. - Communication and interpersonal: Effective communication, empathy, patience, conflict resolution, emotional support. - Administrative: Appointment scheduling, care documentation (including electronic health records). - Organisational: Time management, household task management respecting hygiene and ecological standards. - Personal: Physical fitness, responsibility, reliability, ethical practice (privacy, confidentiality).
Qualifications	Not specified (recommendation: basic first aid, home care certificates, older people care training, EQF 3–4).
EQF Levels	Not specified (recommendation: EQF Level 3 or 4).

3. WP3 Documented Skills and Competences

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Key Responsibilities	(Not explicitly detailed; focus on innovation and sustainability in older people care provision.)
Skills and Competences	Quality of service; problem solving; creativity; leadership and motivation; financial awareness.
Qualifications	Not specified
Soft Skills	Patience; adaptability; resilience; communication; empathy; organisational/time management.
Digital Skills	Daily digital communication tools; digital tools for animation and engagement; administrative digital tasks.
Green Skills	Change in daily practices; structural changes for waste reduction and management; professional travel reduction.
Entrepreneurial Skills	Financial awareness; leadership through communication and motivation; creativity; problem solving.

4. Comparative Analysis Table

Criteria	ESCO Profile	WP3 Findings	Matches/Gaps/Discrepancies
Key Responsibilities	Personal care, therapy, monitoring, emotional support, meal preparation, mobility support, cleaning, telemedicine (recommended)	Emphasis on quality of service and innovation	Matches in quality-of-service orientation; WP3 less task-specific
Skills and Competences	Technical care, digital record-keeping, empathy, organisational, communication, GDPR-compliant data use, physical fitness	Problem solving, creativity, leadership, financial awareness	Matches in problem solving and organisational skills; WP3 adds creativity and entrepreneurial aspects
Soft Skills	Empathy, patience, communication, reliability, ethical standards	Patience, adaptability, resilience, communication, empathy, organisational/time management	Strong match; WP3 adds adaptability and resilience explicitly
Digital Skills	Digital record-keeping, telemedicine,	Daily digital communication, digital animation	Match on basic digital use; WP3 suggests broader

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	secure digital platforms	tools, administrative tasks	engagement and entertainment applications
Green Skills	Hygiene and ecological household management (recommended)	Waste reduction, daily practice changes, travel reduction	Gap: ESCO only hints at green hygiene; WP3 specifies structured green actions
Entrepreneurial Skills	Not specified	Financial awareness, leadership, creativity, problem solving	Gap: ESCO lacks entrepreneurial/financial skills
Qualifications/EQF Levels	Not specified (recommend EQF 3–4)	Not specified	Gap: both lack concrete formal qualifications, though EQF 3–4 is recommended

5. Key Observations and Recommendations

Matches Identified:

- Shared focus on empathy, communication, patience, problem solving, and time management.
- Digital competence overlaps in record-keeping and telemedicine.

Gaps Identified:

- No explicit green skills or entrepreneurial/financial awareness in ESCO.
- Digital skills need to expand beyond record-keeping to interactive engagement.
- No formal EQF or education specified.

Discrepancies Noted:

- ESCO is task-focused; WP3 emphasizes innovation, sustainability, and soft skills for long-term adaptability.

Recommendations:

- Include clear EQF level (3–4) and sample qualifications (first aid, home care certifications).
- Add structured green skills (waste management, eco-friendly cleaning).
- Integrate entrepreneurial skills: financial awareness, creativity, leadership.
- Expand digital skills to telemedicine, secure digital data use, and interactive client engagement.

6. Job Role Description Template

Job Title:	Home-based personal care worker
Job Code (ESCO):	5322
Job Overview:	Provide physical, emotional, and social support to individuals in their homes or residential settings following care plans set by healthcare professionals.

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Key Responsibilities:	Assist with hygiene, mobility, and nutrition; administer basic therapies; monitor and report health status; prepare meals; maintain cleanliness; provide emotional and psychological support; use telemedicine and digital tools for care coordination; manage appointments and errands.
Required Skills:	Empathy, patience, communication, organisational skills, problem solving, adaptability, resilience, basic therapeutic and mobility assistance, digital record-keeping and telemedicine, eco-friendly household management, confidentiality and ethics.
Qualifications:	Recommended EQF 3–4; training in home care, first aid, or older people care support.
Experience:	Previous care experience advantageous but not always required.
Working Conditions:	Private homes or residential settings; physically demanding; emotionally sensitive.
Career Path:	Advanced home care specialist, team leader, or transition to higher social/healthcare roles.
Additional Info:	Continuous professional development recommended, especially in digital tools, green care, and emotional support.

7. Comparative Analysis: Difficulties and Challenges

• Profile-Specific Challenges: Physical strain; managing multiple household and care tasks; emotional load of caring.

• Systemic Challenges: Low pay and recognition; variable regulation across countries; pressure to adopt digital and green practices.

• Implementation Barriers: Lack of standard EQF levels; limited resources for training; resistance to digital tools in some home environments.

8. Comparative Analysis: Skills Mismatches and Upskilling Practices

• Identified Skills Gaps: Digital engagement beyond records; structured green skills; entrepreneurial/financial awareness.

• Upskilling Needs: Training in telemedicine and digital communication; eco-friendly care and cleaning; creativity and problem-solving in independent work.

• Training Recommendations: Short courses on telehealth and secure data management; workshops on sustainable household practices; financial awareness and leadership modules.

ANNEX III Job Profile Template

Job Title

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Please provide the title of the job.

Job Code (ESCO Classification)

May include more than one ESCO Codes.

Job Overview

Provide a brief summary of the job, its purpose, and how it fits within the organisation.

Key Responsibilities

List the primary duties and responsibilities of the role.

Required Skills and Competencies

Based on the ESCO classification, list the key skills and competencies needed for the role.

Qualifications

Specify the educational background, certifications, and other qualifications necessary for the role.

Experience

Outline the amount and type of experience required.

Working Conditions

Describe the working environment, including any specific conditions or requirements such as travel, physical demands, or shift work.

Career Path and Development

Provide an overview of potential career progression opportunities from this role.

Additional Information

Include any other relevant information or special instructions that candidates might need to know.

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ANNEX IV National Occupational Profile of older people care Profession

Country:	
National Authority for occupational profile:	
Existing national occupational profile - name in english	
Existing national occupational profile - name in national language	
Alignment with ESCO Qualifications	
Short Description of the profile: **(300 words max)**	
Skills and Competences Required	
Educational Requirements	
NQF Levels (if available)	
Link to the national ocupational profile description	
More Info or comments: **(150 words max)**	
Recommendations for change	

ANNEX V Occupational Profile Template

General Coding

Enter a unique identifier for this Occupational Profile.

Hyperlink

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Provide a direct link to the current version of the relevant ESCO Occupational Profile, if available online.

Title

Provide the official title of the Occupational Profile.

Educational Background

Describe the minimum educational qualifications required for the occupation (specific degrees, certifications, etc.).

EQF/NQF Level

Indicate the European Qualifications Framework (EQF) and/or National Qualifications Framework (NQF) level associated with this occupation.

Core Skills and Knowledge

List the essential skills and knowledge required for the occupation.

Optional Skills and Knowledge

List additional, non-essential skills and knowledge that may enhance a candidate's suitability for the occupation.

Additional Sections (if applicable)

Include any additional relevant sections such as work experience requirements, professional certifications, or specific physical/cognitive abilities.

ANNEX VI Country-Level Workshops

1. **Organisation**

In each partnering country (Greece, Bulgaria, Czechia, France, Spain, Austria) at least 3 country-level workshops will be organized:

- One with policy stakeholders
- One with educational providers
- One with market representatives of the caregiving sector.

Umbrella organisations are going to help in finding stakeholders for the workshops, but partners should first focus on national participants.

2. **Duration:**

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Each workshop should last between 1 and 2 hours.

3. **Content:**

Each responsible partner should organize workshops for discussing what needs to be developed, based on the identified European Occupational Profiles and compared to the National ones. Each workshop will be comprised by at least 5 participants/ stakeholders and will be held either online or face to face. Through these workshops, the partners will verify – on a first level – the application of the identified Occupational Profiles in the labour market of their country.

4. **Expected results:**

Partners should gather information regarding the following:

- Are the identified Occupational Profiles at the European level relevant to the country ones?
- What are the skills and competences that similar or same country Occupational Profile require?
- What is the EQF/EQVET level of each Occupational Profile in country level (NQF)?
- Are there significant differences in the scope or focus of the profiles?
- What specific aspects of the European Occupational Profiles do not currently exist in the national profiles? How can these aspects be integrated into the national context?
- Do the European Occupational Profiles adequately reflect the current and future needs of the national labor market?
- Are there any country-specific factors, such as cultural or socioeconomic considerations, that should influence the adaptation of these profiles?

Partners should create an agenda for the workshops (template here) and take photos during the workshops (having first obtained the consent of the participants).

At the end of the workshops, partners should prepare a report, summarizing point 1-4 above.

ANNEX VII EU Validation Workshop Overview

Organisation

On September 25, 2025, a Transnational Validation Workshop on Elderly Care Occupational Profiles took place online, as per the WP4 Methodological Guidelines. This involved national partners and relevant labor market representatives.

The goal of the workshop per the Guidelines was:

> *'To analyze the findings of the profiles identified in order to point out discrepancies, mismatches and correlation comparing them to the EU Occupational profiles. During the workshop, MC will facilitate discussions, ensuring a clear agenda that focuses on analyzing the identified sectoral Occupational Profiles. An overview of the European Occupational Profiles will be provided, along with the methodology for comparison. In detail, National partners will present their National Occupational Profiles during the workshop. Using the provided templates, they will compare these profiles with the European Occupational Profiles to identify discrepancies,*

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mismatches, and correlations. The findings will be documented systematically, with particular attention to areas where the national profiles may require updating'.

Following these, MC organized the workshop and facilitated its delivery. National partners presented their National Occupational Profiles, as developed in the templates provided, focusing on the Profiles to be updated, for validation by the workshop members.

In their presentations, partners provided an overview of their National Profiles and compared them to the ESCO profiles, identifying discrepancies, mismatches and correlations, and providing recommendations for change, in each profile.

MC provided a comparison of the ESCO identified profiles with the skills and competences identified in WP3.

Session 1

MC presented WP4 main aims and targets 4.1, 4.2, and 4.3, and introduced the aim and structure of the workshop.

Session 2

LARES, OJAB, APSS, and FNAQPA presented ESCO profiles 322, 2635.3.14, 5322, and 2221.2 respectively. In analysing these, the partner recommendations for change are:

- 322: LARES recommended 1) to separate Nursing and Midwifery, 2) Include the skills and competences required for the profile, 3) Include specific Educational Requirements to the profile.
- 2635.3.14: OJAB recommended enhancing gerontology social work through modern competency frameworks, like innovation in care, digital integration and sustainable care.
- 5322: APSS recommended to Clarify EQF 3–4, to define educational requirements, to emphasise digital skills (DigComp), to add green and sustainability skills, to include ethical and soft skills, and finally to describe career development.
- 2221.2: FNAQPA recommended to plan nursing care, develop information and communication skills, management and risk management, include Entrecomp entrepreneurial skills, Digicomp digital skills, and Greencomp green skills.

BK presented the draft job role description template.

Session 3

AKTIOS, APSS, BLOCKS, FNAQPA, LARES, and OJAB presented a selection of their national occupational profiles, compared to the ESCO profiles and provided recommendations for change. In particular:

AKTIOS: presented the Greek national profile, which aligns with ESCO 3412.4, 5322.1 and 5322 profiles. The recommendations for change included 1) Differentiate Occupational Roles Across Care Settings, 2) Develop Intermediate and Advanced Role Pathways, 3) Include Digital Competence Requirements, 4) Strengthen Psychosocial and Dementia-Specific Skills, 5) Promote Interdisciplinary Team Integration, 6) Cultural and Language Competency Modules, 7) Establish National Register of Certified Care Workers, and 8) Introduce Mandatory Certification.

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APSS presented the Czech profiles and its recommendation evolved around the educational requirements and qualifications, the extension of duties, and practical skills.

BLOCKS presented the 3 Bulgarian national profiles and its recommendations included the enhancement of digital, entrepreneurial and green skills.

FNAQPA presented the Nurse for general care national profile which aligns with ESCO profile 2221.2. The recommendations for change evolved around 'emerging skills'.

LARES presented the 11 Spanish profiles and focused on profile 5269, which aligns with ESCO profiles 3412.4.2 and 3412.4.12. The partner recommendations evolved around the revision of the profile classification, the definition of training standards and the more effective governance and the strengthening of the policy-education-employment collaboration framework.

OJAB presented the Austrian profile which aligns with ESCO 2221. Its recommendations included the creation of a geriatric sub-profile, the enhancement of risk management, the formalization of leadership roles and the integration of sustainability skills.

Session 4

MC presented a comparative analysis of ESCO profiles 322, 2635.3.14, 5322, and 2221.2 vs the skills and competences identified in WP3. These are:

Soft Skills	• Patience • Adaptability • Resilience • Communication • Empathy • Organisational skills – time and task management
Digital Skills	• Daily digital communication tools use (personal and professional use) • Digital tools for animation purposes • Administrative tasks • Quality of service
Green Skills	• Change in daily practices • Structural changes for waste reduction and waste management strategies • Professional travel reduction
Entrepreneurial Skills	• Financial awareness • Leadership skills through communication and motivation • Creativity • Problem solving

The session was concluded with an overview of the matches, gaps, and discrepancies identified between the profiles and these WP3 skills, and recommendations for change.

Session 5

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This provided an overview of the workshop, endorsing the recommended profile changes, and concluded on the next steps, which according to the guidelines include the compilation of detailed reports by the partners.

Summary

Following the methodological guidelines, MC coordinated and facilitated the workshop, and presented a comparative analysis of ESCO profiles vs the skills and competences framework developed in WP3. MC presented the gaps, mismatches and discrepancies, recommending changes to update them per the project findings. The suggestions and recommendations were endorsed by the partners who had the opportunity to comment and ask questions.

Partners presented and analyzed the findings of the identified and selected profiles, pointing out mismatches, discrepancies and correlations compared to the ESCO profiles. They importantly presented their recommendations for change/update of the national profiles, allowing for questions and comments after each presentation, validating this way the profile findings.

Following the workshop, the findings will be systematically documented by the partners in detailed country reports. These reports will include the list of compared National Occupational Profiles, a summary of identified discrepancies and correlations, and recommendations for updating them to align with European standards. Metropolitan College will consolidate these findings into a comprehensive report with recommendations for updating the Occupational Profiles – National and ESCO ones.

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