Matrix - variation 1

Use the matrix as a self assessment tool by examining the required training needs while checking the reliability at the same time.
Start by listing all the competences needed for the chosen activity and ask the respondent to answer by marking one (or more) possibilities. The tool provides information regarding:
   1) how the respondent assesses his/her competences
   2) if the respondent works with the competences needed.

Competences needed: <insert activity chosen>	I am good at this task, because		I do not do it because		I always follow this principle	This is not my task	I need extra training at this part
	I know it myself	others have told me	I have no time	I do not have respective skills			
Competence 1							
Competence 2							
Competence 3							
etc.							

Matrix – variation 2

In this variation of the matrix you have a case study in which several problems are mentioned.
1. Identify and write down the issues caused by the mentioned problems in the case
2. Identify and write down what needs to happen objectively speaking but also concrete Skills Development Topis
3. Discuss the Skills Development Topics (skip this part, if you are not part of a group)
4. Choose 1-3 main Skills Development Topics and insert them in a grid as shown below.

<Insert Topic>	I know how to use it	I know it exists	I know it exists, but I never used it	I need training	No training needed
Topic 1					
Topic 2					
Topic 3					
etc.					

Example of a case – an elderly woman living in Estonia

Linda is 83 years old. She is a widow and lives in a small Estonian town in a flat which has no central heating. She uses wooden stove for heating.
PROBLEM: As Linda is well, no home care was offered by municipality.

Linda suffers from hypertension and type 2 diabetes. Some weeks ago, she was hospitalized because of Covid. Now she has recovered and back at home. During hospitalization an individual care plan was prepared to her. The total evaluation shows that she can manage quite well at home.
PROBLEM: Care plan means medical assessment made by a physician. The plan is seen only in hospital and the municipality care worker does not know Linda's information.

Linda has two children and five grandchildren, but they live far away – one daughter even lives in Finland and although they all care about their mother their visits are not very frequent. However, they are quite well off, and Linda does not have to worry about shopping. Her children have arranged everything, and the grocery is ordered to her flat. Also, one neighbour brings logs to her flat.
Her movements are restricted, she uses a stick, and she cannot go for a walk. She can move around in her flat and she manages to get outside in front of the house.
PROBLEM: As Linda is so-called normal and sent home from hospital declared well, no physiotherapy was offered to her, although she needs it. There is rehabilitation and recovery treatment in Estonia, but they are separated from one another – rehabilitation mainly being for people with disabilities.

Although her basic needs are covered, she feels lonely and isolated. Her neighbours are young families, and all her friends in the neighbourhood have passed away.

All her life she has been very active and now when her movements are restricted, she feels trapped. She has a computer, and her children encourage her to use it for communication, but she has not yet learned how to use it, because she is afraid of all kinds of changes. Linda only "trusts" the phone for talking to her children.
The social worker of the municipality visits her once a week, but the visits do not last long, because the social worker is overloaded with work.
PROBLEM: Social worker has no time or abilities to teach Linda how to use computer

Once a month the municipality has organized an inva transport for Linda so that she can go to the senior's day centre.

Assignment
1. **Issues caused by the mentioned problems in the case**
   a. Modest co-operation between health and social care – grey area
   b. Poor work of rehabilitation team – care plan?
   c. Social and work rehabilitation separated (educational rehabilitation)
   d. No precisely defined tasks between staff members
   e. Poor information flow

2. **What needs to happen objectively speaking as well as concrete Skills Development Topics**
   a. provide high quality care inc socialisation, security/ secure living

3. **Focus on Skills Development Topics**
   a. Improving digital skills for seniors to communicate using different digital tools
   b. Improving care givers digital tools in order for them to teach the elders
   c. Introduce and teach how to use different e-services and e-products (e-health, alarm button etc)

There's an overall improvement of skills within communication, teamwork and digital knowledge. A paradigmatic change for Estonia switching from a person centred to a task oriented approach in care.

In the example two main topics to further developing are:
1. *Task oriented not person centred approach*
2. *Developing digital skills for using e-services and products*

Following the positive health model the first topic supports meaningfulness and the second supports the daily functioning.

4. **Discuss the Skills Development Topics (skip this part, if you are not part of a group)**
   a. Network – who could belong to Linda's network?
   b. What are their tasks?
   c. What skills and knowledge are do they require to fulfil the tasks?

Developing digital skills for using e-services and products
The table below shows the different digital solutions used in Estonian homecare. Please mark your answer with an "X".

Digital solution	I know how to use it	I know it exists	I know it exists, but I never used it	I need training	No training needed
Alarm button					
Calendar clock for elders with dementia					
Vega GPS watch for the elders					
Automatic drug dispenser					

Skills Development Topic No. 1:

Competence area 1:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant

SOSU   praktikum   da Vinci college   CALASANZ

Skills Development Topic No. 1:

Competence area 2:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant

Skills Development Topic No. 1:

Competence area 3:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant

DK Skills Development Topic No. 2:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant

DK Skills Development Topic No. 2:

Competence area 2:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant

DK Skills Development Topic No. 2:

Competence area 3:

Competence	Not at all Relevant	Slightly Relevant	Quite Relevant	Very Relevant	Extremely Relevant