

PROconcept

Providing advice to care and nursing homes



**SPECIAL
EDITION**

*5 visions for the
care sector*

POINTING TO THE FUTURE

Clever ideas for tomorrow's world of care.
Which direction are things likely to take?



How can we shape tomorrow's world of residential care?

**SPECIAL
EDITION**

5 visions for the care sector

The world is currently in crisis mode. There is much talk of 'sea changes' and 'turning points'. What this means is that we must be ready to accept changes. And these times teach us something else, too: It is risky to keep putting off known problems. And by this we refer to the organisation and working conditions in care. In compiling this edition, we have spoken to people whose mission is to bring about changes. Concrete ideas, models and solutions for the sector from which care workers, patients and residents profit equally. It has to do with time, quality and an attention to detail, but also with personal responsibility. Topics which have always exercised Miele. And, naturally, these aspects are also relevant to laundries. That's why we visited a home in the Netherlands which sets standards when it comes to the working conditions of care workers. This engenders satisfaction. And this seems to be the most important signal: A good feeling after a day's work. But how? Let us provide you with some inspiration.

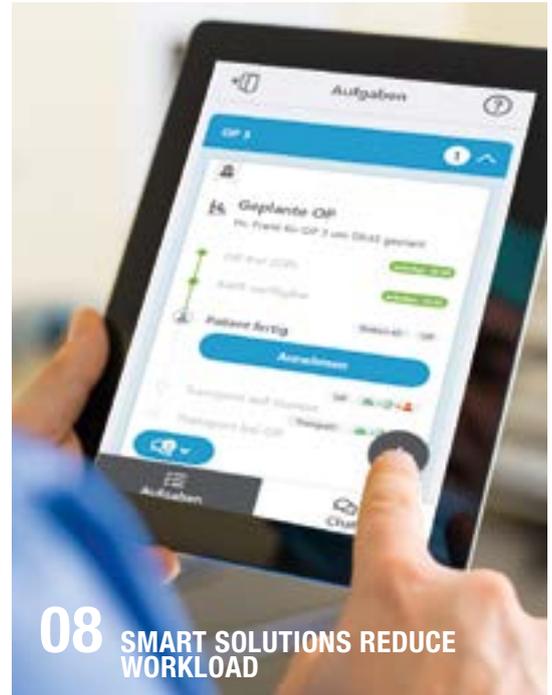
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LEGAL NOTICE

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STATUS QUO

People in the care sector: Patients forever suffering from fatigue

Lots of stress, little recognition – Who would want a job which is so exhausting? If the nursing profession is to become more attractive, we must rethink.

Helping, supporting and accompanying the elderly – an important task. An activity with purpose. There's no debate: Nursing and care is hard work. But they are essential jobs. And we will all one day be old. This makes the nursing profession future-proof. And, for many, it is still a fulfilling calling in life. The figures, though, speak a different language. Fewer people are willing to do these jobs. And many who work in care are throwing in the towel as they are no longer prepared to work under the prevailing conditions. Or are no longer capable, either mentally or physically. Just to give you a feeling for the situation: In an industrialised country like Germany, employers are still searching for replacements on average 183 days after people hand in their notice. That paints a very clear picture. And even

the WHO is raising the alarm. In their report published in 2020, the WHO claimed that the shortage of care workers worldwide amounted to around 5.9 m. In order to avoid a care crisis, each country ought to increase the number of care workers trained each year by 8%. But how can that be achieved?

Create time and quality for care

The problems in the care sector are very similar the world over according to the International Council of Nurses (ICN): Firstly, work includes too many tasks which have little to do with providing care. Secondly, the huge potential of trained carers is often underestimated, and, thirdly, qualified carers are less well paid than comparable professions with a similar level of responsibility. The writing is on the wall. And has been for a long time.

FACTS AND FIGURES



27.9

MILLION

people currently work in care professions. 19.3 m were also trained in these professions. Already, millions of lateral recruits provide support in the branch.



90

%

of all care workers worldwide are female. The only exception is in-patient care in Japan, where 35% of employees are young men. The difference: The care sector consists almost entirely of full-time contracts.



50

YEARS OLD

is the average age of care workers in Germany, Sweden and Canada. The image of the nursing profession may be better in Sweden, but this does not resolve the recruitment problem.



100

%

of nursing workers in Sweden and Great Britain are university trained. In these countries, nursing is considered an academic profession.



”

How can the need for care be tackled early, perhaps even prevented?“

Prof. Dr. Michael Isfort
Care researcher

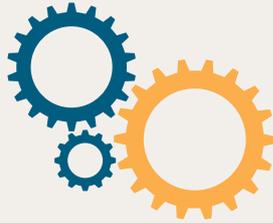
Ask any care worker about their everyday problems and needs, and it soon becomes clear that there is always a lack of time and too much bureaucracy. From filling a syringe with insulin to helping out with the midday meal – everything is done at the double. What suffers are social contacts and quality time with residents. And, naturally, all the preventative measures which maintain the health and wellbeing of elderly persons. Let's not forget: Geriatric care training is about holistic care, catering for individual needs. But that is often neglected in everyday working life. Solutions which free up time for care are called for: from digitalisation of care documentation to new, more flexible working time models

and the targeted use of voluntary helpers. Basically anything which creates more time.

Greater recognition of care

And what about the potential of care workers? There are countries where personnel carries greater responsibility. Whilst, in Germany, doctors delegate tasks to care workers, the principle of individual responsibility applies in countries such as Switzerland, the Netherlands and Sweden. Carers have greater latitude when it comes to taking decisions, allowing them to come up with their own solutions as to how best to treat persons in their care. This results in greater recognition of the work they do.

And opens up the opportunity for self-organisation. This upgrades jobs and makes them more attractive. The academisation of this vocational field can also make a contribution, whilst at the same time ensuring higher levels of qualification. This, paired with fair wages, creates esteem. Which takes us back to what we said at the outset: Jobs in care must be meaningful. And it should be in the interest of all to start changing tomorrow's world of care right now. After all, none of us is getting any younger. Persons born in 2020 have an average life expectancy of 81 years. And who doesn't wish to be well cared for in the last phase of life? And stay fit and healthy for as long as possible? //



Staffing ratio and workload:

In the USA, each nurse looks after 5.3 patients on average. In Switzerland it is 7.7, 10.7 in Belgium and 13 in Germany.

73%

of nurses in Germany claim to regularly suffer from stress in their jobs. In Japan, the figure is 53% and 40% in Sweden.



1
ORGANISATION

CARE FACTOR

An overview.

Working conditions in the care sector have to change if more people are to enter the profession. What can countries learn from each other in international comparisons? And what are the central problems?

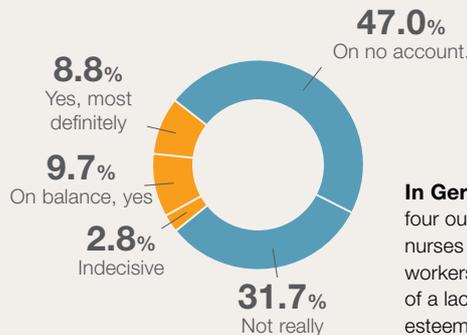


5
APPRECIATION



More than 80% of nurses worldwide work in countries which are home to around half of the world's entire population.

Do you feel that your work as a nurse gets the public recognition it deserves?



In Germany, four out of five nurses and care workers complain of a lack of public esteem.



The Netherlands as an example?

56% of Dutch employees consider their job in care excellent. Only around 10% of nurses feel emotionally drained from their work. (Study by TU Berlin, 2019)

” *The mortality rate is always higher where there are too few nurses and care-workers.*“

Howard Catton, Chief Executive of the International Council of Nurses

2
QUALITY



Time per activity and shift

15% of time is spent by nurses on direct patient care per shift, according to an international study. 19% of time is taken up by documentation.



Overtime

Paid overtime is worked each week by 52% in Germany, 28% in Japan and 13% in Sweden.

3
TIME

Japan is always considered the technological showpiece. But even there, robotic-assisted care is still in its infancy. This is due, among other things, to a lack of acceptance and insufficient knowledge of how to deploy this technology. So do robots free up more time for care? Open.

A survey from 2021
showed a high level of agreement among nurses to the statement: 'I am ready to get to grips with new technologies. They feel ready for digitalisation.'

4
PERSONAL RESPONSIBILITY



78%

of participants in a survey of 2,800 nurses maintain that they are unable to put their professional knowledge and expertise to full use.

” *Many nurses would rather do a proper job in their own profession than taking the workload off doctors. A key prerequisite for this is assuming greater personal responsibility.*“

Christine Vogler (2019), Vice President of the German Care Council (DPR)

1

ORGANISATION

Digitalisation of everyday care

Cliniserve founders: Julian Nast-Kolb (M.) with his business partners Jaakko Nurkka (left) and Quirin Körner (right).



How a single click takes the pressure off care workers

Julian Nast-Kolb and his partners from the Munich-based Cliniserve startup develop task and absence management systems which digitalise and automate care processes. The workload on nursing staff is reduced, allowing them to take greater care of patients and residents.

Mr. Nast-Kolb, how is Cliniserve mitigating the effects of the nursing crisis?

Our nurses are spending as little as 10 to 15% of their working time actually providing care. They waste valuable time through unnecessary legwork, poor communication and tasks which are better suited to service staff. Activities can be delegated or automated, allowing nurses to concentrate once again on providing care to those in

their charge. We offer the appropriate software.

How do your Cliniserve Care and Cliniserve Team products work in practice?

Cliniserve Care, a task communication system for everyday work on wards, allows activities to be assigned fully automatically and digitally to staff members according to requirements and qualifications. A digital

care assistant informs carers who can then react promptly and provide a response to residents. This puts paid to unnecessary journeys and time wasted on telephone calls between staff members.

Cliniserve Team is a digital absence management tool. Short-term personnel absences and bottlenecks can be managed more simply and faster as all available employees together with their qualifications

are displayed and can be contacted at the click of a mouse. Long communication chains are a thing of the past.

What potential do Cliniserve Care and Cliniserve Team offer?

Cliniserve Care saves up to 25 minutes per 8-hour shift and employee – time which can be immediately invested in looking after patients. At the University Clinic of Schleswig-Holstein, around 1000 walked kilometres could be saved last year. Managers of a team of employees spend only half of the time on coordinating staff members or stopping gaps in the rota.

All involved are engaged in the search for solutions aimed at taking the workload off care workers whose resources are already stretched. Many of the ideas consume lots of time and money. These tools have to be



We aim to become the leading care operating system in Europe.

Julian Nast-Kolb, co-founder of the Cliniserve startup

integrated into existing IT systems. The costs and efforts are horrendous. From initial tests to decision-making and implementation, Cliniserve requires no more than four hours. Simple smartphones are all the hardware needed.

How many hospitals and care homes are already using the Cliniserve apps in Germany today?

Currently 20 institutes use our product in a wide range of applications, whereby at the moment, the focus is on big teaching hospitals. We can now manage, for instance, how, when and by whom a patient is transferred to theatre. In theatre itself, processes have long been automated and most pieces of equipment have been digitalised. But what use is all this to surgeons if the person requiring care is missing?



Thanks to a cooperation between Cliniserve and Miele, robots now run errands in hospitals.



What is your objective?

We aim to become the leading care operating system in Europe. We are already represented in Austria with Cliniserve. In Autumn, Luxembourg and France will come under starter's orders. We are currently in the throes of preparing for this event. The system only needs to have one further language added. The same applies to any further countries.

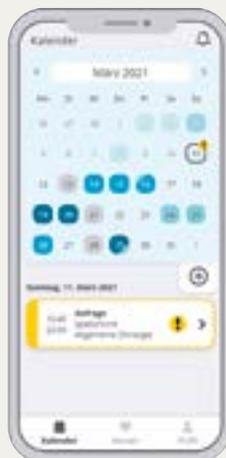
increasing number of use cases. Last year, for example, we were approached by the Miele company. Together, we managed to integrate robots into everyday hospital life. They now run errands such as for example bringing blood samples to the laboratory. //

Have you reached the end in terms of your mobile application taking work off staff?

We are far from finished and are expanding our range of products to cover an ever

CLINISERVE AIMS AT LETTING CARERS CARE AGAIN

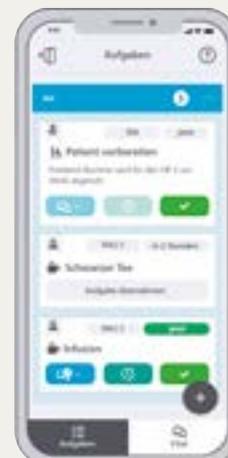
Cliniserve Team



Personnel planners have access to all employees at the click of a mouse.

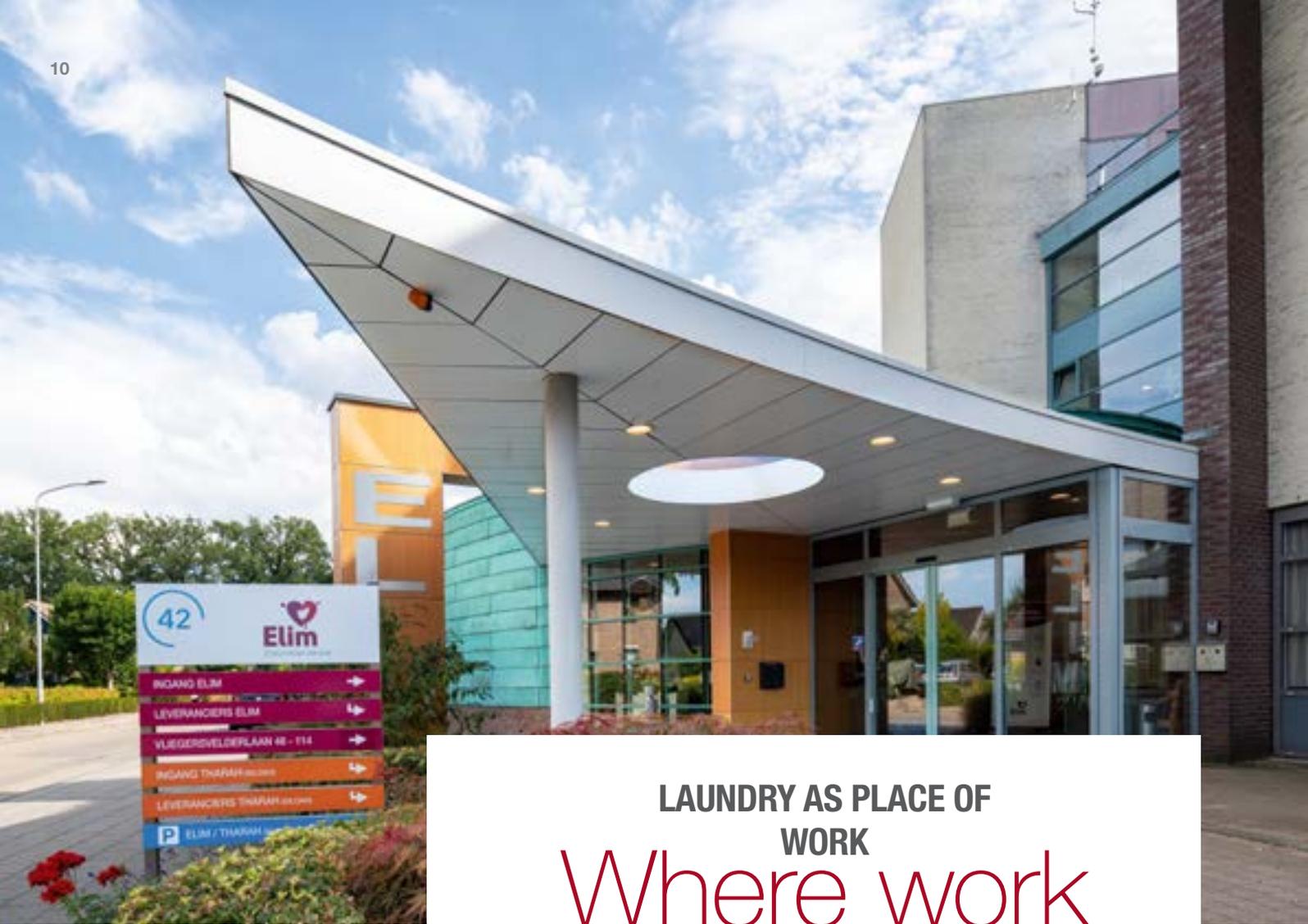
- Replacements found fast
- Prevents the need for telephone chains

Cliniserve Care



Patients and persons in care express their wishes. Care staff can respond directly.

- Saves on unnecessary legwork
- Shortens waiting times



LAUNDRY AS PLACE OF WORK

Where work is fun

The Elim care home in the Netherlands shows how clever measures can increase the efficiency of a laundry. A key building block: Teamwork.



The atmosphere among employees in the laundry is good. It may sound trite, but it hits you immediately. The three staff members Anja, Teuny and Sabine are just ironing the laundry. They have arranged their ironing boards in a triangle. This allows the team to chat while they work. And it is this interaction which ensures a pleasant working climate in the laundry of the Elim nursing home in the Dutch

town of Barneveld. One of the three women, Teuny, confirms this: 'Since refurbishment and modernisation, work is much more fun. The atmosphere and layout of the premises are conducive to good communication. There is plenty of space and room to move. It's simply pleasant to work here'. Anyone who has worked in a laundry knows full well that aspects such as providing sufficient space and good lighting can be challenges. Henry Vos, technical manager at the

2

QUALITY

Laundry report

facility and, inter alia, responsible for the laundry, is also satisfied. He was commissioned with looking into whether the modernisation of the 17 year old laundry would make economic sense or whether laundry should be contracted out to an external service provider. The objective of his analysis: More efficient processes, improved workplaces and, of course, top quality in the reprocessing of laundry.

More in need of care, fewer carers

Henry Vos is the sort of technical manager who is probably personally familiar with every single cable shaft in the entire building. Everyone greets him. Hardly surprising, given that he covers many miles each day throughout the building. The laundry is close to his heart. That is evident when he talks about modernisation measures. He is employed by the Sirjon group of care and nursing homes which runs 20 homes in the Netherlands. Elim in Barneveld is one of them. The promise given by the operators: High-class care, individual offerings and a family-like atmosphere. And demand for places in the home is large. This approach to holistic development and an analysis of the laundry set the ball rolling: 'On the one hand, there is a dramatic increase in the number of residents requiring care. On the other, it is becoming increasingly difficult to find and retain staff. Besides that, it is my task to plan the deployment of personnel as efficiently as possible'.

The technical manager, like many other with responsibility, is feeling the growing pressure in their sector. Some are quick to call for job cuts and outsourcing. But those calls fell on stony ground from the outset in Henry Vos' case. 'When reprocessing laundry, the focus is always on quality. And on individuality. I would have been loathe to outsource the personal clothing, towels and bed linen of our residents'. Henry Vos contacted the Dutch company Intrakoop, a sort of consultancy for care and nursing homes which provides support in transformation processes – from energy issues to personnel – and has access to a large partner network of specialists. One of the partners in this network is Miele. The company agreed immediately to scan the laundry and highlight new avenues and

opportunities. 'This collaboration was a stroke of luck', says Henry Vos, looking back. 'Miele recommended extending and modernising the premises. Joint calculations revealed that an on-premise laundry would still be cheaper for Sirjon than ploughing work out to an outside laundry'.

Employees were given a say in decisions

In a first stage, Henry Vos and the advisory team from Miele created technical drawings. And, indeed: Thanks to intelligent changes to the structure of the building, the room was increased in size from a previous 75 m² to 110 m². And thanks to the additional space gained, work processes were much better and more efficient. And much thought was

Exemplary teamwork: Teuny, Anja and Sabine (from left to right) are pleased with their new working conditions.



All is geared to ergonomics and streamlined work processes. All work surfaces are height-adjustable. This helps for example when sorting and folding laundry.

”
The laundry is designed to support our every move'.

Teuny,
Member of laundry staff



Henry Vos is the technical manager of the Elim nursing home and was instrumental in modernising the laundry. He intends to offer his employees the best possible working conditions.

'An investment in the future from which residents and employees profit alike'.

What is the biggest change since the laundry was modernised?

The biggest change is in our employees. They communicate more frequently and the atmosphere in the team is good. But also the processes which are so important to us are just perfect. To put it succinctly: The changes make for fun at work. And that is the way it should be.

How was the collaboration with Miele?

Miele was an important partner and advisor during the entire process. The key impulses, – the game-changers, so to speak –, for example extending the premises, all came from Miele. It was exciting for me to see how our contacts at Miele worked hard to come up with an individual solution. Sirjon and my team benefited greatly from the experience and expertise of Miele.

Why did you opt for Miele machines? Are you satisfied?

Technically speaking, the machines are the heart and soul of our laundry. During the advisory stage, we obviously took a hard look at Miele machines. At the end of the day, it all boiled down to the simple formula: My team and I place the highest demands on the quality of reprocessed laundry. Looked at on a quality scale of 1 to 10, we wouldn't be satisfied with a 7. We aim to achieve at least 9 out of 10. That is why we opted for Miele machines. And there is no remorse: The washing machines, dryers and the electronic components are reliable, easy to use and – it will come as no surprise – they make working fun.

given to the employees. Vos stresses: 'I am responsible for working conditions and wanted to grasp the opportunity to make the best of the space available. And, naturally, my employees – including two persons with a handicap – came up with lots of ideas. With hindsight, nothing better could have happened to us'.

And if, when you started reading this article, you were wondering how the employees of a laundry can carry on their conversations with the washing machines and dryers around them running – well, that has to do with a central feature of the modernised laundry, the brainchild of Henry Vos: a so-called 'Klankkast'. This refers to the encapsulation of the Miele machines which makes for reductions in sound emissions. This signals a battle against noise which creates stress and an important move towards health protection. Making sure things are different in Elim. All machines and surfaces are ergonomic and designed to virtually eliminate bending and lifting. The tables in the laundry, too, are all height-adjustable, allowing folded laundry to be transferred from the ironing board to the tables in a smooth, sweeping movement.

The machines are not only quiet, they have the perfect height for loading and unloading.



”

Anyone who wants to can look over our shoulders'.

Sabine,
Employee in the laundry



As part of the modernisation, laundry racks on castors (top) were purchased alongside the Miele machines (large photo and right). This allows laundry to be rapidly assigned to owners, sorted and issued.



The laundry as part of a whole

Henry Vos and the planning team had another brainwave: Alongside large windows, LED daylight lamps ensure uniform lighting and create a pleasant atmosphere. Vos is full of pride when he claims: 'We have got the most out of the refurbishment and can now offer a service with top-class quality and logistics'. Within two working days, we are able to provide fresh laundry to residents and staff'. The technical manager has good reason to be satisfied. His employees certainly are. And there is another aspect which makes Elim an interesting location for a laundry: The facilities are on the ground floor, with no steps or ramps and therefore barrier-free. Every now and then, residents poke their head through the door and greet the trio working at the washing machines and

dryers. The senior citizens even have the opportunity to help fold laundry at a separate workplace. This, too, results in a feeling of belonging and recognition. The Elim model is likely to catch on. And so it should. Alongside the pressure to run the operation efficiently, ensuring satisfaction among employees is high on the agenda. The first is achieved through intelligent processes and good machines. The latter is a case for team work and a sure instinct. //

FACTS AND FIGURES



RESIDENTS
currently live at the Elim care home in the Netherlands.



MACHINES IN USE

- 1 x PWM 916
- 1 x PWM 920
- 1 x PW5136 el WEK
- 1 x PW6107 el
- 1 x PT7501 EL
- 1 x PT8407EL
- 2 x PT8337EL



KG OF LAUNDRY
are reprocessed each week in the laundry.

Only **active senior citizens** reduce costs

Traditionally, many grandparents in Greece requiring care live with their children. For them and all who live in homes, Stelios Prosalikas, President of the Association of Care Homes (PEMFI), has long been demanding programmes for 'active ageing'.

The elderly should be able to actively go about their everyday life and not simply be kept safe. A physically fit person not only engages more in life but also saves the home and the state thousands of expensive hours of care, according to Prosalikas' philosophy.

For persons of pensionable age in Greece, and indeed throughout the EU, he demands publicly financed training and fitness programmes. Prosalikas is convinced that the cost of such a programme would be recuperated several times over as such measures would 'improve the general state of health of the elderly both physically and

psychologically'. This is taken from the brochures published by the care home run by the Greek citizen. 'Nine out of ten elderly persons could continue to live actively within their own four walls and do not need to be admitted to a care home', he believes. Programmes for 'active ageing' are necessary because 'the elderly lose a large proportion of their muscles over decades. They need a daily programme to remain nimble'. And he leads by example: 'We do everything in our home to ensure that not only our treatment and physiotherapy but also diets and activities are tailored to the needs and wishes of our residents'.

How that works out in practice is demonstrated by a visit to his care home on the outskirts of Athens. To start with, the design of the lobby is friendly and inviting. Moving on, the visitor next encounters a combined reading and fitness room on the ground floor. The 'active' room contains a specially designed walking course encircled by a rugged steel railing. Right next to it is a leather-upholstered bench with weights on small pulleys. Even to the unaccustomed eye, this is obviously fitness apparatus – in this case for the more able-bodied elderly persons wishing to strengthen the muscles in their abdomen and back.

3

TIME

Stelios Prosalikas, health promotion and disease prevention



”

9 out of 10 elderly persons could continue to live actively at home'.

Stelios Prosalikas
President of Greek care home association



22.64%

OF THE GREEK POPULATION ARE AGE 65 OR OLDER.

Further pieces of equipment complete the collection. This room is precisely where Prosalikas employs specialists: 'Thanks to our experienced physiotherapy team and modern apparatus, we achieve the best kinetic improvement and enhancement of the vitality of residents'. Many other special features make his home a hive of activity. Equipment like that used in the care home run by Stelios Prosalikas would be desirable for many institutions, not only in Greece. //

Buurtzorg – a care model with a future?

In the Netherlands, the 'Neighbourly Help' care programme has been well established now for the past 15 years. Now, the focus is once again on persons in need of care rather than on more bureaucracy and excessive regulations.

Jos de Blok is often seen as somewhat of a revolutionary, the Steve Jobs of ambulatory care. The Dutchman is a trained nurse and later went into nursing management. He loves his work and the time he was able to spend with the elderly. However, as the years passed, the world of care became subject to change: more and more bureaucracy, horrendous cost increases – and a deterioration in quality which was simply unacceptable to him. To sit next to the old lady, take hold of her hand and to talk to her for a brief moment: all that was no longer possible. And that is what awakened the revolutionary in him: de Blok separated bureaucracy and care.

Increasing quality of care

He created Buurtzorg, or 'Neighbourly Help'. His teams, each comprising around 10 staff members, are self-organising and driven by personal responsibility. They manage budgets, organise their own tours, and deploy colleagues.

At its core, Buurtzorg consists of lots of networking. In other words: Care workers, doctors, therapeutic staff and family members are all in contact with each other via the 'Buurtzorg-Web' digital platform. This makes requirements in the care of individuals transparent for all.

And Buurtzorg has also resulted in key changes: Health insurance schemes are now billed on an hourly basis. This means that each activity is valued at the same rate. Dusting or making a bed was not previously included in the rather conservative cost structures in the Netherlands. These were the job of housekeeping, not of care workers. This resulted in a financial shortfall in the case of services not covered by costs.

Since the 'Neighbourly Help' programme was founded in 2007, each care worker can decide for themselves what persons in care need to promote their independence, for instance in

4
**PERSONAL RE-
SPONSIBILITY**

Buurtzorg,
'Neighbourly
Help'

putting on socks. The quality of care rises in keeping with the satisfaction of patients and care staff (Buurtzorg was awarded best employer status in the Netherlands several times over). It is also a win-win situation for health insurance companies. Buurtzorg employs more than 15,000 staff members. Cooperations exist with 25 countries. Many are trialling the system with a view to it becoming a care model of the future. //

A DUTCHMAN REVOLUTIONISES THE CARE MARKET

2 hours ...

... Every Buurtzorg care worker saves working time compared with the care of patients by conventional care services, says Jos de Blok, founder of the new care concept from the Netherlands.



Young people are currently shunning professions in the care sector.

RETHINK NOW

'We must explore new avenues'

Martina Dietrich has been working in the care sector for the past 30 years. Personnel bottlenecks were never bigger than they are now. Together with a team of colleagues, she is therefore working on new ways of recruiting.



A job offer in the local newspaper has little clout nowadays. This is something Martina Dietrich is adamant about. She is responsible for housekeeping and administration at the Kardinal Frings House, a nursing home run by the Caritas organisation – and knows full well how difficult it is to find good nursing staff. 'We must explore new avenues', she says. For this very reason, Dietrich co-founded a working group three years ago which aimed to launch concrete measures for recruiting and retaining employees in the Cologne region.

The benefits programme includes onboarding gifts for new colleagues, a small treasure trove with products for the teams which is replenished every fort-

night, bonuses for recruiting new staff members, etc. A € 20 shopping voucher awaits those taking on additional shifts. If the work involves helping out in another nursing home, a lump-sum travel allowance of € 80 is granted.

Financially well positioned

'We want to create incentives so that people think: 'I would like to work for Caritas', Dietrich stresses. Three-shift days,

'Good publicity is important'.

work on bank holidays and at weekends – that is what a lot of young people shy away from, the resolute lady believes. 'You are looking for a job with regular working hours. Many school-leavers went on to study because they had hopes of earning more money than in the care sector in the medium to long term. 'But even there we can deliver'. Good public relations is important in showing how attractive careers in the care sector can be. Dietrich also sees social media as a meaningful additional channel for recruiting.

The market is empty

A lack of enthusiasm for this career path is not the only problem, though', says the 61 year old: 'Nursing professionals and housekeeping staff cannot tackle the



5

APPRECIATION

Practical example: Caritas Cologne



”

We want to create incentives'

Martina Dietrich,
Head of Housekeeping and
Administration at a Cologne
care home run by Caritas

mountain of work because there is such a lack of trainees and students in this field. The market is empty. The situation became even more precarious in Germany when conscription was abolished, also marking the end of alternative community service as a way to whet the appetite of young people for a career in care'. Corona also put an end to school visits, during which Dietrich advertised her trade among school-leavers. And, to add to it all, placements in care and nursing homes no longer take place. 'The young people can no longer be given a foretaste of working life and decide for themselves whether it's for them – and that means

fewer potential applicants'. This means that recruiting measures, however good they may be, go down like a lead balloon for the most part.

Support from abroad

Caritas sees possible opportunities in hiring foreign care workers. In each care home in the Cologne region, a care worker from Tunisia will be employed in the foreseeable future. 'The six men and women were already nursing specialists in their home country; in Germany they will start as ancillary care workers. Within a year they will learn the language, be integrated into their new environment

and be introduced to everyday life in the home. They will get to know their colleagues and the elderly residents. After twelve months, they will begin service as nursing specialists'. Dietrich has high hopes of the programme. After all, care workers will be needed in future more than ever before. //

Further information:

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THE BENEFITS



Team members recruit team members and receive a **bonus** of up to € 1500 for their efforts.



Onboarding gift, with further presents to follow after 3 and 6 months as well as after 1, 2, 10, 20 and 25 years: e.g. a rucksack, writing set, cinema voucher, cash bonuses



Treasure trove: opened every fortnight and contains, for example, organic tea, sparkling drinks, pasta



€ 20 **food voucher** for standing in for colleagues at short notice



€ 80 **travel allowance** for employees who help out in another care home



Garden parties for trainees, e.g. with raffle and a food truck

'We stand a **real chance**'

How can the nursing crisis be stopped? Prof. Dr. Michael Isfort on unnecessary treatment, new ideas and the role politics plays.

1 Prof. Dr. Isfort, how does Germany compare on care globally speaking?

No other country has experienced mergers among care and nursing homes to the same degree as Germany. In the field of domiciliary and inpatient care, Germany sees itself faced with both a sociodemographic and a vocational problem. Many nurses and care workers are aged 50 or over. In the next ten years, we are set to lose 30% of the workforce, or even 40% in the domiciliary care sector, as employees go into retirement. The results are extreme pressure and a lack of personnel across a broad front. We have been warning about this for years – I sometimes feel like a climate researcher warning of pending doom some 15 years ago.

2 And the supply of personnel to hospitals?

On an international scale, we have been able to catch up over recent years. Whereas up to January 31, 2021, up to 2.5 patients in intensive care were looked after on a day shift and up to 3.5 intensive cases were looked after by a single staff member on a night shift, the figures since February 1, 2021 have now dropped to 2 and 3 patients respectively. Our medical care has since been in excellent condition, but in nursing care we are still a developing nation in terms of staffing levels and far removed from Australia and the USA, for example.

3 How can care professions be made more attractive?

The branch has never lost its appeal. Even in the worst days of Covid-19, there was never the mass exodus from the nursing sector which had been forecast by the media. People are satisfied with their careers; they are less satisfied with their jobs. Simply because they no longer do what they originally set out to do. In their everyday working lives, they are under enormous pressure, and that's why they move from full-time to part-time employment. A dangerous downward spiral as this causes the number of employees to drop and the workload to rise – which

5 questions to
Prof. Dr.
Michael Isfort



Prof. Dr. Michael Isfort

researches and lectures at the Catholic University in North Rhine-Westphalia. Isfort, a trained nurse, is the Vice-Chairman of the German Institute for Applied Care Research, and was awarded the coveted German Care Prize (2017) for his commitment.

in turn results in even more part-time jobs. In clinics, the share has already risen to 50%.

4 How could things be done better?

A fixed rota and plannable leisure time – 'off-duty' should mean 'off-duty' and not that one needs to fear being called in. We must avoid unnecessary treatment and operations. On a European scale, Germany has most back, hip and knee operations. France is far behind us, and still people there are not hobbling across the road. Surgery here is partly superfluous and could be avoided using conservative therapy. And I find this figure dramatic: Hospitals employ more than 65% more medics than 25 years ago, but only 3% more nursing staff. That is doomed to fail.

5 The prospects for the future seem pretty dismal on the whole. Is there no medium- or even short-term solution to the shortage of nursing staff?

We have a real opportunity – if politicians address the subject and the operators of care homes don't simply continue to build homes for which there is insufficient staff. New care models must be defined. In other countries, care institutes and local authorities work hand in hand, and boroughs support the introduction of new technologies with technical subsidies and manpower. And yet in Germany, neither politicians nor care home operators seem to have any interest. //



HAVE YOU EVER MET PARO, THE SEAL-LIKE CARE ROBOT?

The plushy robot, developed in Japan, is used in the care of patients suffering from dementia. The seal responds to touch, sounds and voices. When spoken to, it turns its head in the direction of the speaker. It reacts to caresses with an endearing whimper. Paro is intended to relieve the stress of dementia patients and stimulate their cognitive capabilities.



How the elderly keep their mind fit

The OAP tablet PC from the Munich-based Media4Care company was specifically developed for older persons.

The idea: During a visit to a care home, Marc Aurel Engels shows his grandfather who suffers from dementia family photographs on a tablet. His granddad is not only interested in the photographs, but also in the device.

Special feature: Six easy-to-use apps which stimulate body and mind. The subjects covered are entertainment, games, photo albums and video telephony.

www.media4care.de

37
%



of Germans aged 80 or over use the Internet. There are big differences between the generations. For example, men and very elderly persons with a good education and a high income are clearly online more often than women and OAPs with a lower level of education and less income.

INTELLIGENT SENSOR RECOGNISES FALLS

A digital care assistant for emergencies! Persons in need of care carry the sensor from the moio.care system on their backs. This detects movements and interprets them. If a person trips or falls, the sensor recognises an incident and automatically informs a care person. moio, developed in Germany, can relay the person's location and sound an alarm as soon as the person leaves a secure area.



