U-DIGITALIZE

U-Digitalize Model

Chapter 5. Necessary skills & competence for successful implementation

Introduction

As the U-Digitalize National report on the digitalization experiences of third sector care organizations has revealed, the digital skills of professionals and caregivers are the most important requirements for social and health care organizations, along with resources and infrastructures.

For successful implementation of digitalization, it is fundamental that the benefits of digitalization are obvious to all involved: There must be a willingness to change on the part of both staff and institutions in order to avoid confusion and duplication of workload due to digitalization. Measures should always be oriented towards the benefits for the beneficiaries, as digitalization provides opportunities to foster inclusion of people with functional diversity. To overcome a possible digital divide and change the attitude of staff and beneficiaries towards digitalization, organizations need to focus on the soft skills and hard skills required and provide tools and measures to improve them.

The following guidelines and recommendations are based on the Digcomp framework (Vuorikari et al., 2022), and adapted to the needs of the third sector employees, according to the project research previously conducted.

Basic skills & literacy

The digital transformation requires so-called digital literacies on the part of both professionals and target groups, which means knowledge and competences on different levels that enable the use and critical engagement with them (Klinger et al., 2022).

Basic digital skills are mostly taken for granted today, but to ensure these core competencies are met, adequate training opportunities need to be provided to create standards for all employees (Becka et al., 2020).

It is necessary to allocate financial and time resources and to analyse the needs and equipment for e-learning and training courses.

It is a prerequisite that all employees at all levels of the organisation are equipped with the appropriate hardware according to their activities in order to be able to use digital applications adequately, as well as barrier-free accessibility for professionals and beneficiaries (Klinger et al., 2022).

For a successful implementation of digitalisation, it is crucial to improve basic digital skills of all stakeholders. A first step could be to identify the digital competence level of professionals. This can be done using existing digital competence frameworks such as the DigComp model, and targeted training objectives can be set based on the results (e.g., the DigiComp model for Austria: Kompetenzmodell - fit4internet). Special attention should be given to basic skills such as searching and evaluating digital information, storing and retrieving information. It is important to deal with statistical data and online information for relevant support opportunities, e.g. finding jobs or training and funding opportunities, digital searches for special health needs, technologies or support methods.

In addition to training in basic digital skills (Office package, documentation tools, etc.), permanent support from the IT department is recommended. A digital platform (e.g., Wiki, Ilias, Intranet, MS Teams) is suitable for support, where information can be permanently accessed and training videos are available showing instructions for the digital applications in simple language (Klinger et al., 2022).

A further support for employees is the creation of a central, low-threshold information and contact point for learning opportunities, e.g., through the use of platforms such as Ilias, which support self-learning.

An important role is also played by so-called key users, i.e., particularly digital-savvy employees who are willing to support their colleagues in making new digital applications usable for their daily work practice, as well as peer-to-peer exchange among employees.

As digitisation is based on the principle of standardisation, it can have a negative impact on the individual needs of beneficiaries in different areas (e.g., digitised documentation). For example, deviations from the set standard can become a disruptive factor. With regard to the person-centred design of the care relationship, special challenges arise from the use of standardisation-oriented tools. For example, important information gained in interpersonal contact may be lost due to unfeasible translatability into digital systems. The person-centred perspective, which perceives the person as a whole, is contrasted here with the economic-organisational perspective, which evaluates the person on the basis of risk factors (Becka et al., 2020).

It is crucial that professionals participate in the development, implementation and evaluation of digital tools and software to ensure that the new applications meet their daily work practices (Klinger et al., 2022).

Further training should be linked to the concrete work practice of the professionals and additional time resources should be made available to enable the staff to try out and learn digital tools independently (Klinger et al., 2022).

As a best practice, the project Digibegleiter*innen für Senior*innen - nowa, in which the use of digital tools in care is to be taught, can be cited. In this training series, caregivers can take modules on various digital topics such as technology competence and communication. The aim is to increase caregiver competence in everyday digital topics such as smartphones, tablets, etc.

Personal skills & attitudes

The development of necessary competences for the implementation of digitalisation cannot be reduced to the ability to use new technologies. This would ignore possible dangers of alienation from the target group and the devaluation of acquired qualifications and competences of professionals. Therefore, it is necessary to identify and train relevant competences for the preservation of identity, the use of competences relevant to the profession and the experience of self-efficacy in the digitalised work context (Becka et al., 2020).

The most important personal skills are probably the ability to adapt to change, the ability to work in a team and the willingness to develop personal skills. Curiosity and motivation for personal development is crucial for acquiring digital competences for sharing with and empowering beneficiaries.

In addition to curiosity and willingness to learn about digital technologies, the creativity of the professionals is also important, for example in the adaption and creation of digitalized documents for cognitive exercises for beneficiaries, that should be easy, funny and motivating.

Employees and beneficiaries must be sensitized to the interplay between people and technology and develop an awareness of the importance and benefits of digitalization. It must be clear which needs of beneficiaries and staff need to be met in order to successfully integrate digitalization into their daily interactions.

Possible resistance to digitalization can be countered by communicating the practical benefits and showing how the use of digital tools actually makes work easier (Klinger et al., 2022).

On the part of employees, there is often a fear of replacing human labour.

From the perspective of professionals, the introduction of digital tools can also lead to de-skilling or de-professionalization. This would be the case, for example, if the introduction of work process-related software contributes to the standardisation of work. When work processes and detailed instructions and work steps are prescribed, there is less critical questioning, professional development and change (Becka et al., 2020).

Digital technology should support the health and care sector, but not replace professionals and lead to a deterioration in the quality of life of the beneficiaries (Jannes & Woopen, 2019).

The potentials of digitalisation can therefore only be used if skilled workers acquire not only digital competences but also competences that are useful for assessing the ethical implications of digitalisation on their professional work. These competences should help to reflect on and shape the development and

introduction of digital tools and the accompanying change in operational forms of work and organisation (Becka et al., 2020).

The use of digital applications also raises a number of ethical issues, in particular the protection of dignity and privacy. A trusting interaction relationship with the beneficiaries can be threatened by the use of digital applications if, for example, the contents of the conversation are documented during the conversation. This can alienate the conversation situation and jeopardise trust by making the client assume that information shared will be made available to others (Becka et al., 2020).

Ethical competences in the context of digitalisation include assessment competences, reflexive competences and design competences, which are necessary for the ability of employees to act at all qualification levels in the care and health sector (Becka et al., 2020).

Particularly in ethical terms, the process of digitalisation requires additional competences and qualification measures. Digitalisation reorganises and subdivides work processes, and there is a danger that "overqualifications" will be lost by focusing on the performance of tasks. In the context of using and testing digital tools, competences for the reflexive design of one's own working environment or dealing with technostress are hardly addressed (Becka et al., 2020).

Sensitive handling of digital tools and careful documentation is the basis for a trusting relationship between clients and professionals.

A fundamental challenge of digitalisation is the protection and security of the sensitive data collected and evaluated and the question of whether the self-determination of the target groups can be influenced positively or negatively (Jannes & Woopen, 2019).

A particular ethical challenge here is the protection of privacy through the collection and evaluation of a large amount of sensitive data and partly continuous monitoring with the help of algorithm-based AAL and monitoring systems. The question here is to what extent the beneficiaries like people with functional diversity are aware of the invasion of privacy or can be aware of it due to cognitive limitations, consent or refuse, or can switch off the devices themselves. Security risks through unauthorized access must also be considered. Therefore, professionals need to consider when the benefits of using digital tools outweigh the impact on privacy and security risks (Jannes & Woopen, 2019).

It is therefore crucial to provide learning opportunities on data documentation and data protection in the context of the person-centred approach.

The use of digital applications offers a high potential to strengthen self-determination of the beneficiaries, but also bears the risk of limiting it through comprehensive monitoring and control and of creating a feeling of heteronomy. Informed consent is therefore relevant for the preservation of self-determination, but this includes a comprehensive understanding of the effects of the use of personal data on the part of the target groups. Information in this regard must be able to be communicated in a clear and understandable way, which is an enormous challenge for professionals and often requires the involvement of relatives or legal representatives (Jannes & Woopen, 2019).

Preventing exclusion or discrimination of certain groups of people from and in the use of digital technologies is also a question of social justice. On the one hand, digital applications, e.g., from the field of telemedicine or AAL systems, are associated with high costs and are therefore not equally accessible to all. On the other hand, access to new technologies is also difficult due to a lack of skills, fear and skepticism, which is why appropriate education and training of all stakeholders

(target groups, relatives and professionals) is necessary (Jannes & Woopen, 2019). Critical thinking is also important for professionals. They should be able to evaluate both the benefits and limitations of technical applications for the beneficiaries and the facilitation of work for themselves.

The successful implementation of digital technologies always depends on the acceptance and willingness of the users to use them, which is why the development of new tools must be based on the examination of profession-specific requirements so that solutions are offered that actually meet the needs of the users (Güsken et al., 2021).

Communication & pedagogical skills

The training offered to professionals should include measures that train communication and basic pedagogical skills necessary for the transfer of knowledge and the training of beneficiaries to enable and adequately support them in digital matters.

Professionals need to be able to work with digital communication channels and know which ones are appropriate for others. They should be able to decide which communication channel is appropriate for interacting with beneficiaries. They also need to consider the tension between face-to-face and digital communication channels.

For the appropriate use of communication tools in health and social care, it is advisable to follow professionals on social networks and consult specialized digital magazines and websites (e.g. AAL Competence Network | Your Partner regarding

all AAL questions (aal-competence.com) or https://www.futurehealthlab.at).
To promote networking and willingness to network, it is also helpful to create a supportive network and data collection system for sharing experiences between departments in your entity via common e-learning platforms.

The counselling centre LIFEtool (Home - LIFEtool) can be mentioned as a best practice for training digital communication skills. The counselling centre provides information about electronic and non-electronic aids and special software for people with disabilities in the field of augmentative and alternative communication.

Advanced technical skills

With the growing amount of data in the context of care and support, the importance of knowledge management is also growing. Already in the run-up to the introduction of new technologies, the significance of the collected information for practical work must be asked. It must be clarified how the organisation wants to and is able to deal with the new work processes and the large amount of personal data (Kollewe, 2018). This must also be clearly communicated to the employees.
It is important to educate staff about the benefits of further training in digitalisation and the use of professional documentation technologies and tools for networking. It goes without saying that it is crucial to train caregivers and professionals to facilitate the use of AAL services and promote the use of assistive technologies and virtual reality. Visits to assistive technology showrooms are recommended.

Active Assisted Living (AAL) technologies in particular have great potential to provide support and companionship, especially in care, as they can help people live independently for as long as possible (Kollewe, 2018).

As a best practice, the showroom around assistive technologies SMART AGEING Verein AAL-Zentrum Esther can be mentioned (Der Leichter Leben Raum || Vielfältige Chancen im AAL-Bereich - Smart-Ageing.at). This can be visited and hands-on technologies can be tried out on site using concrete case studies.