

Identify the requirements and realities of the targeted sector

Comments collected on each of the sentences from the Namur services (Belgium) that employ home helpers¹.

1. The home help profession is a specialisation of the household helper profession.

The home helper is not a domestic helper. He or she works in a profession in its own right, for which there is specific training. You need a diploma to work as a home helper, which is not the case for a domestic helper.

The home helper carries out tasks that can be taken care of by a household helper, but also takes care of other additional tasks: shopping, meals, formalities outside the home with the beneficiary (medical appointments, bank, etc.), hygiene, support (in the context of palliative care or particular pathologies), presence, prevention, educational role (accompanying children). The home helper also plays an important role in stimulating the beneficiary's autonomy. Not all these roles are performed by the domestic helper.

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2. The home helper is a person who takes care of children.

Yes or no.

The home helper does not care for children as such. He or she is always and first in the service of an adult.

Nevertheless, the home helper can intervene with children, but in a role of accompaniment and education, not day-care. There is always a need for help content for the adult beneficiary behind his or her role with children.

3. At home, the home helper does not perform a hygiene toilet.

Yes, the domestic helper makes toilets for hygiene or comfort, but no toilet including treatment. He or she can make a change, wash the hair or beard of the beneficiaries, but cannot do anything involving drug treatment. So no bandages, medicated creams or drops in the eyes. He or she will also not be able to prepare medication, glue a patch or put on compression socks because these are nursing procedures. Similarly, the home helper is not allowed to cut the nails of the beneficiaries, because there is a danger if they have diabetes, and this information is not always known.

¹ Comments from the educational brief "Enhancing the value of the family assistance sector", produced by a working group set up at the initiative of the Namur Chamber of Education as part of its 2015-2019 redeployment plan and with the financial support of the Wallonia-Brussels Federation.



The toilet is also an opportunity for the home helper to observe the beneficiary. If a health problem is detected, the home helper then notifies the service, social worker or doctor who will take over. This observation role is an important part of the home help profession.

- 4. We see home helpers working in hospitals, nursing homes and at home.
 - The home helper only works at home.
- 5. To become a home helper, you have to be sociable and certainly not shy.
 - Pretty much yes. Relational ease is very important for this profession. So you have to at least be person-oriented. The performance of practical tasks can always be improved, but life skills, on the other hand, will be more complicated. To be a home helper, you have to be in a relationship. Being shy is not necessarily an obstacle if you are willing to evolve.
- 6. The home helper must be generous in nature.
 - Yes and no. To do this job, you must of course be open to others and have a sense of humanity, but above all you must be able to step back and set limits. When a service is completed and a beneficiary leaves, it must be possible to cut and move on to the next beneficiary without taking with you the concerns heard from the first beneficiary. Similarly, in the evening, when you go home, you must be able to "forget" your day and leave it outside. It is essential to set limits.

It is also important to be able to transmit problems that go beyond the mission of the home helper, to pass the relay on to qualified workers. Concrete example: the home helper notices that a beneficiary has nothing to eat. If he or she does not set a limit, he or she will be tempted to go and buy something with his or her own money so as not to leave the beneficiary without eating. However, the home helper should rather think about notifying the social service or social worker so that they can react quickly.

Finally, having your heart on your hand, loving people, is not enough to be a home helper, there are other essential learnings to do to practice this profession.

- 7. The home helper is a lonely worker, who has little contact with other home helpers.
 - No. It is a profession where you work alone as a family caregiver, but it is also a team job. There is a close team collaboration with the other home helpers, but also a relationship with the other stakeholders (nurse, home guard, property manager, social domestic assistant). It is a profession that is part of a multidisciplinary team. In this respect, home help is not alone.
- 8. The liaison booklet is the only means of communication between home helpers and the department that employs them.



No. The notebook remains at home and allows home helpers to communicate with each other and possibly with other people (doctor, family,...).

In addition, home helpers also have team meetings about once a month, in the service where they meet with the social worker. These meetings are therefore also an opportunity to identify situations or problems experienced in the field. In addition, in some services, home helpers have a service telephone to contact each other. There is also a standby social worker on duty on duty to answer any questions you may have.

Finally, home helpers are required to communicate all important information to their manager.

9. The work of the beneficiaries' aid consists essentially of cleaning up. It's boring and monotonous.

Not at all! It is a job that is neither monotonous nor repetitive. On the one hand, by the diversity of the type of beneficiaries met on the same day; and on the other hand by the nature of the tasks performed. In the morning, the home helper often starts with a wake-up assistance, he or she can also sometimes help a nurse with a toilet, then there is the preparation of one or two meals a day, shopping with a beneficiary, accompanying to a medical appointment, dinner tasks in the evening, going to bed,... In short, the tasks are constantly changing.

The share of housekeeping remains important among the tasks performed, but it is a maintenance that is carried out in support of the person: the person is present, there is human contact. And then the situation can change very quickly: sometimes the home helper starts coming 4 hours a week for the maintenance, then 3 months later she comes every day for the start-up and the more global support of the beneficiary.

Maintenance tasks sometimes seem daunting, but they are often the gateway to other support tasks.

However, if the service receiving the request for assistance realises that it is essentially a maintenance, it will redirect the beneficiary to a domestic worker.

10. The older people are the main public to whom home helpers provide their services.

Not only that, even though older people represent more or less 80% of the public. There are also regularly adult beneficiaries who leave the clinic, who need temporary help, people with a physical or mental disability, young adults who leave psychiatric institutions, but also families who ask for help because the mother or father is overwhelmed, disorganized or sick, and where the home helper acts more in prevention, to avoid the situation from changing. Home support workers also work within the framework of the mandates of youth protection services or youth services.

Finally, in the care of the older people, home help can also be provided in the context of palliative care at home.



11. Being a home helper is like being a home guard.

- Not quite. There are common points between the two businesses, but also elements that differ:
 - 1. The type of schedule. Home helpers provide fixed hours, usually from 8am to 4pm for a full day's work, with the possibility of working sometimes on weekends or in the evening.
 - The home guard works a variable schedule; he or she generally provides services of at least three hours at the person's home but he or she can spend a full day at the beneficiary's home or even work nights (depending on the services). He or she can work on weekends, and can therefore cover 24-hour shifts (in relay with other home guards).
 - Finally, the time required to provide a home care service is often longer than that of a home helper, who provides at least one hour for every three hours for the home guard service.
 - 2. The tasks performed. The nurse is really oriented towards the presence and supervision of people with a greater loss of autonomy. He or she is responsible for all aspects of the person's support. He or she therefore does not manage maintenance, ironing, shopping. On the other hand, he or she will be able to take care of hygiene toilets, meal preparation and handling assistance. The nurse will have more time to do activities with the client, to stimulate independence (especially for people with Alzheimer's disease), while the home support worker, who will have other tasks to perform, will be able to devote less time to this type of activity to occupy, entertain, stimulate the client.

12. To practice the profession of home help, you must be attentive, empathetic and caring.

Yes, see comments already made above.

13. To practice the profession of home help, it is essential to own a vehicle because various services must be carried out every day.

It depends on the region where you work. Outside the big cities, yes, you need a driver's license AND a car. This is essential because there are several beneficiaries to be seen per day, and often public transport cannot meet this need (especially outside city centres).

In some areas there are sometimes 15km between two homes. It is therefore necessary to be able to travel from one home to another. It must also be possible to meet the needs of beneficiaries, such as shopping or accompanying them to medical appointments.

14. Being a home helper requires versatility.

- Yes (see comments already expressed above).
- 15. In general, the home helper sees 3 to 4 beneficiaries per day.



That's true, but it's still an average. In some cases, the home helper may be able to provide 5 or 6 services per day, but sometimes it is 2 per day, depending on the sector and period.

16. Adaptability, organisational skills, creativity and initiative are useful qualities for the homecare profession.

That's true. Versatility has been mentioned above, the initiative is essential because the beneficiary does not always give all the instructions and creativity will be used to cook with leftovers, stimulate the appetite of a beneficiary who does not want to eat, propose activities to the beneficiaries, find solutions if there is not the necessary equipment, or to take care of people with dementia (to help them find their way around their home for example, set up little tricks), take care of children,... Which clearly shows that the home helper is not just a simple performer.

17. Working as a home helper means carrying out your tasks at home and at home.

Not really: the home help must comply with what the beneficiary wants and requests. You have to respect his request, and adapt, even if you don't do the same at home.

Some clients let the home helper do things as he or she sees fit, but others ask for specific things. It is necessary to ask questions, observe, probe and understand the recipient's habits, to adapt to them.

Concrete example: some people fold the laundry after ironing it, and others hang it on hangers.

Similarly, some people do not want chairs to be placed on the table for cleaning, while others do not have a problem with that;

This is also the case for meals: it is not enough to cook what the person has asked for, but it is necessary to follow the recipe of the beneficiary, as he or she liked to cook it.

But you have to be able to set limits too: some people have exaggerated demands and the home help must be able to say no.

18. Nothing that is seen and heard in the beneficiary's home should leave his or her home.

Yes and no. The home help is bound by a duty of discretion. However, important and relevant information, which can lead to better support and assistance more adapted to the person, must be relayed, either to colleagues (for practical information) or to the social worker (for all matters relating to health).