

## **MigraCare Survey**

### **English translation**

#### **Further training**

1) What tasks/activities do you carry out in your work?

- a.) Preparation of meals, errands, cleaning activities, carrying out housework and errands
- b.) Keeping company, holding conversations, maintaining social contacts, accompanying people on various activities
- c.) Assistance with eating and drinking
- d.) Assistance with personal hygiene and urination
- e.) Assistance with dressing and undressing
- f.) Assistance with getting up, walking, sitting down, lying down
- g.) Other supportive activities in living
- h.) Household work with animals (except pets) and (heavy) gardening

2) Do you carry out any other caring activities?

If yes, which ones? (e.g. observation of the sick, prophylaxis, other)

- a.) Yes
- i.) Which ones?
- b.) No
- c.) I do not know

3) Have you received a delegation from a qualified nurse or doctor for the nursing activities listed above?

- a.) Yes, for one
- b.) Yes, for all nursing activities that I carry out
- c.) No
- d.) I do not know

4) Who trained you for the delegated nursing activities?

- a.) I was not trained
- b.) Yes, I was trained by a doctor or a qualified nursing professional (nurse)
- c.) Yes, I was enrolled by a family member
- d.) Yes, I was enrolled but I don't know by whom
- e.) others

5) Do you carry out one or more of the following medical activities during your working hours?

- a.) Administering medication (taking tablets, etc.)
- b.) Applying and changing bandages and dressings

- c.) Administering subcutaneous insulin injections and subcutaneous injections of anticoagulant drugs
- d.) Taking blood samples to measure blood glucose levels
- e.) Simple light and heat applications
- f.) Other:

6) Have you received a delegation from a doctor for the medical activities listed above?

- a.) Yes, for one
- b.) Yes, for all medical activities that I carry out
- c.) No
- d.) I do not know

7) Who trained you for the delegated medical activity?

- a.) I was not trained
- b.) Yes, I was trained by a doctor or a qualified nursing professional (nurse)
- c.) Yes, I was enrolled by a family member
- d.) Yes, I was enrolled but I don't know by whom
- e.) Other:

8) Are there any activities that make you feel uncomfortable?

- a.) no
- b.) yes, during the following activities:
  - i.) Preparing meals, running errands, cleaning, doing housework and errands
  - ii.) Keeping company, holding conversations, maintaining social contacts, accompanying people on various activities
  - iii.) Assistance with eating and drinking
  - iv.) Assistance with personal hygiene and urination
  - v.) Assistance with dressing and undressing
  - vi.) Assistance with getting up, walking, sitting down, lying down
  - vii.) Other supportive activities in living
  - viii.) Other:

9) Are there any activities you would like to know more about?

- a.) no
- b.) yes, about the following activities:
  - i.) Accompanying to the last - last aid
  - ii.) What to do when someone dies
  - iii.) Eating in old age and with dementia
  - iv.) Mobilisation and kinaesthetics (support when walking, mobilisation out of bed, mobilisation from chair to bed, from bed to wheelchair, mobilisation in bed)
  - v.) How do you deal with difficult care situations in the household? (Problems with relatives, the person being cared for)
  - vi.) How do you deal with a sudden deterioration in the health of the person being cared for?

- vii.) Preparing meals, running errands, cleaning, doing housework and errands
- viii.) Assistance with living arrangements
- ix.) Keeping company, holding conversations, maintaining social contacts, accompanying various activities
- x.) Assistance with eating and drinking
- xi.) Assistance with personal hygiene and urination
- xii.) Assistance with dressing and undressing
- xiii.) Assistance with getting up, walking, sitting down, lying down
- xiv.) Other supportive activities in living
- xv.) Other:

9b) If yes, how would you like to be informed

- c.) short video
- d.) Brochure
- e.) Internet
- f.) personal enrolment
- g.) through carers cafes
- h.) Other, which:

10) On which topic would you like to have a short explanatory video?

- a.) Tax law issues
  - i.) Registration and deregistration of business activities with the tax office
  - ii.) Income tax return)
  - iii.) Filing a tax return
  - iv.) Tax office tax number application (Verf24)
- b.) Trade law issues
  - i.) Re-registration and deregistration of the trade
- c.) Social security
  - i.) Recognition of SVS - social/health insurance in the country of residence (Form S1 (formerly 106))
  - ii.) Health insurance
  - iii.) Accident insurance
  - iv.) Pension insurance Pension insurance
  - v.) E-Card
- d.) Family benefits
  - i.) Childcare allowance
  - ii.) Family allowance
- e.) Setting up a mobile phone signature
- f.) Death of the person to be cared for
- g.) Dealing with dementia
- h.) Safe means of transport from home to work
- i.) Sexual harassment in the workplace
- j.) Issues relating to contracts with clients and agencies
- k.) Questions about the scope of competences of the carers
- l.) Questions about catering in the family (board and lodging for carers)
- m.) Questions about conflict situations in the caring family
- n.) Questions about conflict situations with the placement agencies

- o.) Specific illnesses and complaints of cared-for persons
- p.) Other:

- 11) Do you need information on the following legal regulations for care work in Austria?
- a) Home Care Act
  - b) Trade Licensing Act (§§ 159, 160)
  - c) Health and Nursing Care Act (§ 3b Para. 2 Z 1 to 5, § 3b and § 15 Para. 7)
  - d) Medical Practitioners Act (§ 50b)
  - e) Professional and practice regulations for personal care services
  - f) Professional and practice regulations for the organisation of personal care services

- 12) Which labour law issues are you not familiar with/would you like to know more about?

- a.) What is the tax office responsible for and how can I obtain information about my rights and obligations?
- b.) How do I register a business?
- c.) What are my rights and obligations as a self-employed person?
- d.) What are my duties as a caregiver?
- e.) What contracts are there?
- f.) How do I draw up my own employment contract?
- g.) What are my rights and obligations towards the childcare family?
- h.) What are my rights and obligations towards the placement agency?
- i.) How do I act in legal conflict situations with the family?
- j.) How do I act in legal conflict situations with the carer?
- k.) How do I deal with the agency in legal conflict situations?
- l.) What do I do if the person I am caring for needs medical assistance?
- m.) Which institutions can I turn to if I have problems?
- n.) What is the role of my official interest group, the WKÖ, and how can I make myself heard within the WKÖ?

### **Agencies**

- 13) What criteria do you use to select the clients you work for?
- a.) According to nursing skills
  - b.) Language skills
  - c.) I do not search, but an agency mediates
  - d.) Amount of remuneration
  - e.) Duration of the cycle
  - f.) Journey/distance
  - g.) Travel options (transport options to the place of work)
  - h.) Place of work (urban or rural)
  - i.) Informal networks
  - j.) Others, which ones:

- 14.) Why do you use an agency?

- a.) Because I have no other access to care cases
- b.) I didn't realise that I could or am allowed to work without an agency
- c.) Because I can't cope with the administrative side on my own
- d.) Because it seems safer to work with an agency
- e.) Because I don't have the confidence to negotiate a contract myself
- f.) Because the agency also organises the transport for me
- g.) Because I don't speak German well
- h.) Many clients do not realise that it is possible to work without an agency and therefore refuse to sign private contracts
- i.) I do not use an agency

15) Could you carry out your work without an agency?

- a.) Yes
- b.) No, because
  - i.) Contractually bound to agency
  - ii.) I do not know how to find a new client
  - iii.) I don't know how to organise transport
  - iv.) I don't know how to sign a contract with new clients
  - v.) Language barrier
  - vi.) Others:

16.) Can you negotiate your working conditions independently of the agency?

- a.) yes
- b.) no
- c.) I don't know

### **Health & well-being**

17) What physical complaints/illnesses do you have that affect your work or that you suffer from during working hours?

- a.) Back pain
- b.) Headache
- c.) Exhaustion
- d.) joint pain
- e.) Gastritis
- f.) Metabolic diseases
- g.) Depression
- h.) burnout
- i.) Chronic pain
- j.) Diabetes
- k.) Not applicable
- l.) Other:

18.) Have these complaints worsened since you started working as a carer? If yes, which ones?

- a.) Back pain
- b.) Headache
- c.) Exhaustion
- d.) Joint pain
- e.) Gastritis
- f.) Metabolic diseases
- g.) Depression
- h.) burnout
- i.) Chronic pain
- j.) Diabetes
- k.) Not applicable
- l.) Other: \_\_\_\_\_

19) Do you go to the doctor with your health complaints?

- a.) yes, in Austria
- b.) yes, in my home country or a country other than Austria
- c.) no, I do not go to the doctor

20) If you do not go to the doctor in Austria, why?

- a.) Language barriers
- b.) not insured
- c.) Deductible
- d.) Distance
- e.) Lack of time
- f.) No family doctor found or I don't know how to find one

21) Do you feel alone or lonely in Austria?

- a.) yes
- b.) no
- c.) I don't know

22) Do you have contact with other carers in Austria?

- a.) yes
- b.) no
- c.) I don't know

23) Would you like to have more contact with other carers in Austria?

- a.) yes
- b.) no
- c.) I don't know

24) Do you have contact with friends in Austria?

- a.) yes
- b.) no
- c.) I don't know

25) Would you like to have more contact with friends in Austria?

- a.) yes
- b.) no
- c.) I don't know

26) Have you heard of carers' cafés and if so, have you been to one?

- a.) no, I have never heard of it
- b.) yes, I have heard of it but have never been there
- c.) yes, I have been there before
- d.) yes, I go there sometimes
- e.) yes, I go regularly

27) I would regularly visit a carers' café if ...

- a.) Transport to the carers' café is provided
- b.) I could visit the carers' café during my working hours
- c.) I could leave the carer alone/ with family
- d.) I could talk to others in my native language
- e.) I receive information relevant to my work
- f.) I get on well with other carers in the café
- g.) further training/seminar (with confirmation of attendance) takes place there
- h.) Others:

28.) Do you feel comfortable at your current workplace?

- a.) yes
- b.) no
- c.) I don't know

29) If no, why?

- a.) Lack of training
- b.) Dissatisfaction with family
- c.) Dissatisfaction with agency
- d.) Isolation
- e.) Mental overload
- f.) Physical overload
- g.) Own physical impairments that no longer allow care in the family
- h.) Other factors:

### **Working hours**

30) How many hours do you work within a 24-hour period (working hours excluding on-call duty)?

31) How many hours do you work on call within a 24-hour period?

32) How are your rest periods organised?

- a) The contract clearly states when I start work and when I am entitled to breaks and time off.
- b) The contract contains regulations. Which ones?
  - i. I am entitled to a certain number of rest periods/breaks in the contract
  - ii. The contract specifies the times when I have a break
- c) My rest periods are only regulated verbally
- d) The contract does not contain any rules for breaks or rest periods
- e) Other:

33) If your rest periods are contractually agreed, do they correspond to your actual working hours?

- a.) yes
- b.) no
- c.) partially
- d.) depends on whether relatives/family have time to relieve me

34) How often do you have to get up during the night to support the person you are caring for?

- a.) never
- b.) 1 to 2 times
- c.) more than 2 times

35) Are your night working hours regulated by contract?

- a.) yes
- b.) no
- c.) I don't know

36) How many breaks do you have within 24 hours?

37) Are there breaks during which you do not have to be present?

- a.) yes, how many :....
- b.) No

### **Demographic questions**

38) Age:

39) Gender:

40) How long have you been working as a carer?

41) Have you worked as a carer in other countries?

42) Do you have professional training in the care/nursing/medical field?

- a) Yes
- b) No
- c) I do not know

42b.) If yes, which one:

43) Where did you do your vocational training?

44.) Where do you work:

- a.) City
- b.) suburban
- c.) Small town
- d.) Country

45) In which federal state do you work?

- a.) Vienna
- b.) Upper Austria
- c.) Lower Austria
- d.) Burgenland
- e.) Carinthia
- f.) Vorarlberg
- g.) Tyrol
- h.) Salzburg
- i.) Styria