A MULTI-COUNTRY BURNOUT PREVENTION INITIATIVE BASED ON MENTORING AND TRAINING – THE CASE OF PROCARE

Introduction

Caregivers in the long-term care (LTC) sector are often exposed to chronic work-related stress and high demands, which has led to a significant share of caregivers suffering from occupational burnout. The PROCARE project is an interesting initiative that focused on the prevention and management of occupational burnout among formal LTC staff. Formal LTC encompasses care provided by professionals in either home, community-based or residential care of patients with chronic illness, disability or age-related conditions.[1] More specifically, the project focused on professional LTC caregivers for the elderly and people with disabilities, because their work addresses patients' physical and mental health, which can have a significant impact on the caregivers' health. The responsibilities of caregiving and other stressful occupational factors make those in the profession highly susceptible to occupational burnout.[2]

The PROCARE initiative focused on developing a new mentoring methodology and training tailored to the LTC sector, the effectiveness of which was tested in a transnational pilot. The main goal of the initiative was to train managers of LTC units to support their caregiving staff in an effort to prevent and manage occupational burnout.[3] As caregivers themselves, the managers already had a deep understanding of the challenges their colleagues faced, and the training by PROCARE provided the knowledge to act as mentors to their caregiving staff.

This case study is part of a research project[4] carried out with the aim to provide an overview of research on the occupational safety and health (OSH) of homecare workers.

Description of PROCARE

Background

PROCARE
Professional Caregivers Burnout Prevention Initiative

Source : https://www.procareproject.eu/

[1] Council of the European Union, Recommendation (ST-13948-2022-INIT) of 25 November 2022 *on access to affordable high-quality long-term care*. https://data.consilium.europa.eu/doc/document/ST-13948-2022-INIT/en/pdf
[2] EAN. (2022). *PROCARE*. https://www.ean.care/en/articles/procare
[3] Torój, M. et al. (2023). *Policy Paper*, Project Number: 2021-1-PL01-KA220-VET-000025014. https://drive.google.com/drive/folders/1eKPKW0pGjLooXDSnmgxKw1WQFU3TbB6q
[4] The full report is available at: https://osha.europa.eu/en/publications/home-care-workers-comprehensive-overview-occupational-safety-and-health-risks

The PROCARE project, which stands for *Professional Caregivers Burnout Prevention Initiative*, was a transnational project that ran for two years between 2021 and 2023 in Poland, the Czech Republic, Greece, Cyprus, Italy and Slovakia. It was co-funded by the Erasmus+ Programme of the European Union under Key Action 2 – Strategic Partnerships in Vocational Education and Training.[5]

Burnout is defined as a prolonged response to chronic emotional and interpersonal stressors on the job, which manifests in three primary dimensions: emotional exhaustion, cynicism or depersonalisation (detachment from oneself), and a diminished sense of personal and professional efficacy.[6] According to the policy brief of the PROCARE project, the symptoms of burnout among caregivers develop in four phases: (1) feelings of energy depletion or exhaustion; (2) increased mental distance and negative feelings towards work; (3) reduced professional efficacy; and (4) trauma and chronic burnout. Symptoms that caregivers might experience in these phases include a decrease in energy levels, increased susceptibility to illness, self-neglect, lack of satisfaction in their work and a sense of hopelessness.[7]

The goal of the PROCARE project was to prevent occupational burnout and reduce its impact on the LTC sector. LTC is defined by the Council of Europe as 'a range of services and assistance for people who, as a result of mental and/or physical frailty, disease and/or disability over an extended period of time, depend on support for daily living activities and/or are in need of some permanent nursing care'.[8] LTC settings can pose specific challenges that may increase the risk of occupational burnout among its caregivers. The impact of occupational burnout on the sector is often significant given caregivers' importance in the healthcare system. LTC workers provide intensive and personal support, such as washing, dressing, administering medication and assisting with activities of daily living, for individuals with chronic illnesses or disabilities. These responsibilities can be emotionally, psychologically and physically challenging. The high demands of the job can lead to burnout, which has a significant and enduring impact on caregivers and the quality of care they can provide. Burnout can lead to physical and psychological health consequences, deterioration in the quality of care provided to patients, and challenges in workforce retention and recruitment. It is therefore important to directly address the issue of occupational burnout to protect and increase the wellbeing of caregivers and the quality of care they provide, while also improving the attractiveness of the occupation to attract future caregivers.[9]

The PROCARE initiative aimed to address the problem of occupational burnout in LTC in Europe by including a variety of countries with differences in their LTC sectors. Previous mentoring programmes in the LTC sectors did not directly address the wellbeing of workers, instead external support was provided, especially in extreme short-term situations such as the COVID-19 pandemic. PROCARE was developed for long-term use and widespread social benefits, regardless of national differences.[10] The PROCARE training focused on the managers of LTC units to create a supportive environment that relies on mentors within the daily work environment.[11] Mentors were trained to recognise early burnout signs, implement stress management strategies and offer ongoing support.[12]

The project was built by a consortium of EU countries that involved the following organisations:

- John Paul II Catholic University of Lublin (KUL), Poland (www.kul.pl)
- European Ageing Network (EAN), Luxembourg (www.ean.care)
- IASIS NGO, Greece (www.iasismed.eu)
- EDUFORMA SRL, Italy (www.eduforma.it)
- DEKAPLUS BUSINESS SERVICES, Cyprus (www.dekaplus.eu)
- Centrum Memory Bratislava, Slovakia (www.centrummemory.sk)[13]

[5] Project number: 2021-1-IT01-KA220-VET-000032949.
[6] Maslach, C., & Leiter, M. (2007). Burnout. In G. Fink (Ed.), Encyclopedia of stress (2 ed., pp. 368-371). Elsevier.
[7] Torój, M. et al. (2023). *Policy Paper*.
[8] Council of the European Union, Recommendation (ST-13948-2022-INIT) of 25 November 2022.
[9] Torój, M. et al. (2023). *Policy Paper*.
[10] Torój, M. et al. (2023). *Policy Paper*.
[11] PROCARE. (2022). *PROCARE Professional Caregivers Burnout Prevention Initiative*. https://www.procareproject.eu/
[12] Torój, M. et al. (2023). *Policy Paper*.
[13] IASIS. *PROCARE*. https://www.iasismed.eu/iasis/procare/?lang=en

Description of the initiative

The PROCARE initiative yielded three primary outputs: a Mentoring Delivery Methodology; a Mentoring Training Course; and Pilot Testing of the mentoring methodology and training course, which also involved composing a policy paper.[14]

The PROCARE **Mentoring Methodology** was designed to support LTC caregivers by offering structured, meaningful and reciprocal mentor–mentee relationships. The methodology views mentoring not as one-way teaching but as a dynamic, empathetic and supportive exchange that addresses caregivers' development holistically. Mentoring under the PROCARE Mentoring Methodology is a structured yet nurturing connection in which the mentor provides practical insights, shares their own caregiving experiences, and helps the caregiver set and achieve professional goals. Mentors have to 'meet certain personal and professional prerequisites' in order to take up their roles successfully. Effective mentors are expected to be skilled in active listening, empathy, and clear and precise communication.[15]

Mentoring phases

- **Initial phase.** The first phase focuses on establishing the mentor–mentee relationship and determining the goals for the mentee.
- **Main phase.** In this phase, goals are realised, solutions are found, and there is an overall supportive relationship between the mentor and mentee.
- **Final phase.** When goals have been met, the road towards self-sufficiency is prioritised, and the end of the mentor–mentee relationship is realised.[16]

In the **Mentoring Training Course**, participants were taught several approaches to mentoring, making it more likely that the sessions and mentor–mentee relationships would be successful, regardless of the specific context of the mentee's problems. The training aims to equip mentors with both theoretical understanding and practical tools to deliver effective, ethical and empathetic mentoring. The PROCARE Training Curriculum for LTC, as well as for vocational education and training (VET) educator mentors, consists of six modules and can be taught remotely, in a blended learning environment and at physical training seminars:[17]

1. Understand the concept of mentoring for caregivers, profile of a mentor, and the definition of occupational burnout, and how mentoring can help.
2. Understand the context of the mentoring programme, create a positive and effective mentoring environment, and understand the differences between one-to-one and group mentoring.
3. Development of soft skills and creating knowledge about the ethical aspects relevant to mentoring.
4. Development of competence in the use of mentoring tools.
5. Comprehension of potential challenges and preparation to assess and overcome them.
6. Comprehension of the importance of a multidimensional evaluation process.

The **PROCARE curriculum** was developed to support mentors in developing the knowledge and skills to ensure a safe, ethical and trustworthy mentoring relationship and environment. The **first two modules** introduce participants to the concept of mentoring, how it can be tailored to the LTC context, the concept and impact of burnout, and guidance on planning and conducting mentoring sessions. In the **third module**, the soft skills and ethical aspects of mentoring are discussed, including active listening skills, confidentiality protocols and building a trust-based mentor–mentee relationship. **Modules four and five** build upon the introduction to mentoring with a mentoring toolkit and information on how to deal with common mentoring challenges. These two modules require the most active engagement with the materials and can be used by mentors as a reference for guidance in challenging mentoring situations. Lastly, in the **sixth module**, the participants focus on the process of reviewing

[14] PROCARE. *About.* https://www.procareproject.eu/about/
[15] Torój, M. et al. (2023). *Policy Paper*.
[16] Torój, M. et al. (2023). *Policy Paper*.
[17] PROCARE. *Project Results*. https://www.procareproject.eu/project-results/

and assessing the effectiveness and success of mentoring sessions. The final module offers mentors conceptual guidance and practical tools to help them reflect on and further develop their work.[18]

Both the PROCARE curriculum and the Mentoring Methodology were developed with the understanding that LTC workers are routinely exposed to emotional, physical and psychological stress, working in a high-demand environment with resource restraints and are often isolated, feel undervalued and at risk of compassion fatigue. Tools **specifically designed for the LTC sector** are the *Mentoring Relationship Contracts* (to clarify boundaries in the care team), the *Mentor-Mentee Diary* (to encourage self-reflection and feedback), the *Needs and Aspirations Tool* (to personalise mentoring to each caregiver's context), and exercises that *role-play realistic care scenarios*. Furthermore, as most mentors are also LTC caregivers, training has been designed for flexible delivery. It can be taught in a blended, in-person or fully digital environment, and it can be either fully self-paced on the LEAP e-learning platform or in six three-hour sessions that would suit LTC's shift-based scheduling.[19,20]

The curriculum was not only meant to train LTC management later in their career. To have a long-lasting positive impact on the LTC sector, the curriculum was also developed to train professionals in VET and create the opportunity for VET institutions to teach the curriculum to caregivers at the start of their education. The development of standardised mentorship training modules, not only in existing LTC facilities but also right at the start of caregivers' education, would help guarantee that all future LTC managers are equipped with the skills to prevent, recognise and handle occupational burnout.[21]

The PROCARE Pilot Test was a necessary part of the two-year project, serving as a test, validation and chance to refine the mentoring methodology and training for the LTC sector. The pilot involved approximately 100 managers, coordinators, experienced caregivers and other professionals from public and private LTC units in Cyprus, the Czech Republic, Greece, Slovakia, Italy and Poland. During the pilot, a rigorous selection process for the mentorship training was implemented to ensure the quality of candidates for the programme. After the selection, candidates took part in a training course with a duration of three full working days for a total of 24 training hours. After the training course, they returned to their LTC facilities and piloted the mentor activities as described above.[22]

Feedback from the pilot offered an opportunity to the PROCARE organisers to refine the mentoring methodology and training according to difficulties experienced by the mentors and mentees in the LTC environment. Subsequently, the lived experiences of mentors and mentees were used to create a list of best practices, which include selecting the right mentor, maintaining an atmosphere of trust and openness, the use of structured methodologies to guide the mentoring process, consistent mentoring support, fostering critical thinking and teamwork, setting both short- and long-term goals for burnout prevention, and, lastly, monitoring daily factors contributing to burnout. During the pilot the most common daily factors contributing to burnout were workload, social support and fairness at work. By encouraging mentors and mentees to regularly discuss these factors, mentors can identify early signs of burnout and provide support and strategies to reduce stressors on time.[23]

Success factors and challenges

Success factors

The awareness campaign of the PROCARE initiative shed light on the consequences of occupational burnout for LTC staff and management, serving as a driver for the implementation of the PROCARE initiative. Both multilingual information leaflets and multiplier events with local stakeholders were utilised to disseminate the project. The leaflets were developed and distributed digitally and in print in English, Polish, Czech, Greek, Italian and Slovak. To support the digital leaflets, social media was used to

[18] PROCARE Consortium. (n.d.). *PROCARE Mentor's Training Curriculum*. European Union. https://drive.google.com/drive/folders/1eKPKW0pGjLooXDSnmgxKw1WQFU3TbB6q
[19] PROCARE Consortium. (n.d.). *PROCARE Mentor's Training Curriculum*.
[20] IASIS. *Project Result 1: PROCARE Methodology and Digital Toolkit*. Available at: https://drive.google.com/drive/folders/1eKPKW0pGjLooXDSnmgxKw1WQFU3TbB6q (Accessed on: 7 April 2025).
[21] Torój, M. et al. (2023). *Policy Paper*.
[22] Torój, M. et al. (2023). *Policy Paper*.
[23] Torój, M. et al. (2023). *Policy Paper*.

actively promote the project's findings and engage with a wider audience on the topic of caregiver wellbeing and burnout prevention. Multiplier events served as platforms for networking and knowledge exchange and each project partner organised at least one event to engage local stakeholders, share project results and discuss the importance of mentoring to prevent occupational burnout in the LTC sector.[24]

In the mentoring methodology, mentors are trained to be able to **identify early and subtle signs of burnout**, such as physical and emotional fatigue, withdrawal, reduced job satisfaction and other warning signs commonly linked to burnout. Other skills mentors are trained in include the skills to intervene and prevent burnout from taking hold of the caregivers they mentor. Mentors equipped with the knowledge and skills to intervene early can guide LTC caregivers toward strategies that build resilience against burnout and foster a work environment less prone to burnout.[25] These processes in the workplace can effectively prevent employees from being forced into sick leave by burnout and advance the implementation of the mentoring programme.

During the pilot, gaining a new understanding of the **mentor–mentee relationship** and new insights into the work environment proved to be central to the mentoring programme and had a positive impact from a managerial standpoint.[26] Both mentors and mentees indicated that they benefited from the programme, as it helped improve caregiving skills such as interpersonal communication, and it also boosted their confidence and motivation in their caregiving roles.[27] LTC managers who took part in the PROCARE training pilot received **positive managerial evaluation** and the managers themselves expressed their belief that the mentoring programme had positive transformative potential for their LTC units.

The overarching evaluation of the PROCARE Training Pilot was positive, especially regarding the **effectiveness** of introducing trainees to new innovative approaches to mentoring sessions and applying new tools. LTC managers indicated that the training materials of the PROCARE Training programme were highly enriching, well-structured and user-friendly.[28]

Challenges

A key challenge for the pilot was that certain **soft skills** that were essential to the mentoring programme were underdeveloped in the pilot countries. Training mentors in these soft skills (active listening, empathy, decision-making and staff management) required additional time and effort, and in some instances even hindered the progress of the programme.[29] In addition, the focus on individual-level solutions to burnout can become less effective when situations exceed the mentor's expertise. The solution itself can therefore become a barrier in combating occupational burnout.

When reviewing the mentoring methodology as a whole, one of the main barriers to integrating mentoring in the LTC context is that mentoring programmes in OSH initiatives targeting the health and social care sector are still rare. This results in a lack of awareness among managers and caregivers about the project's existence and its benefits to the sector. Thus, without proper **promotion of the programme**, mentoring programmes cannot be implemented successfully. One of PROCARE's solutions for this challenge was to introduce the mentoring methodology and training in VET schools. Through the inclusion of mentor training modules in **care-related VET curricula**, the reach of the programme was extended. Especially if mentoring competencies were recognised within qualification frameworks and LTC managers were educated as mentors. However, it seems that it has been challenging for this curriculum **to gain a foothold in VET schools**, thereby decreasing the chances for widespread implementation of the mentoring programme.

Further factors that hinder the integration of mentoring into daily practices in the LTC sectors were **staff shortages, time constraints and limited institutional resources**. Time and scheduling conflicts were found to be the main barrier for effective mentor–mentee relationships.[30] Policy recommendations that were part of the last output of the PROCARE initiative recommended facilities to fund the time and

[24] Procare. *Publications.* Available at: https://www.procareproject.eu/publications/ (Accessed on 14 July 2025).
[25] Torój, M. et al. (2023). *Policy Paper.*
[26] Torój, M. et al. (2023). *Policy Paper.*
[27] IASIS. *Project Result 1: PROCARE Methodology and Digital Toolkit.*
[28] Torój, M. et al. (2023). *Policy Paper.*
[29] Torój, M. et al. (2023). *Policy Paper.*
[30] Centrum MEMORY. *Module 5: Strategies for Overcoming barriers and best practices in mentoring.* https://www.procareproject.eu/wp-content/uploads/2023/08/PROCARE_MODULE_5_CONTENT.pdf

coordination efforts required for mentoring and allocate time specifically for mentoring sessions. However, it became clear that this can be challenging in a highly demanding sector such as LTC, thus it was also proposed that **flexible and adaptable models**, such as digital or blended mentoring formats, could be more suitable for the practical realities of LTC work and to ensure that mentoring remains feasible and sustainable even under constrained conditions. [31]

Furthermore, policy recommendations illustrate that not all mentees are forthcoming with information on their current problems that can lead to occupational burnout, which can blindside their mentor. Thus, it is important for LTC managers to be vigilant and **continuously assess potentially harmful behaviours** in their units, such as frequent absenteeism from work, reduced quality of work and frequent staff turnover in (sub-)units, which might be caused by unhealthy work culture and conditions.[32]

Transferability

From the project's inception, it was implemented in six EU countries. The main problem that preliminary desk research and piloting of the project encountered was the lack of data on the benefits of mentorship in the LTC context. In the majority of the included countries, a lack of (available) training was highlighted. Additionally, even if welfare training was available, the development and promotion of mentoring tools remained largely unexplored and seldom utilised. The PROCARE project has provided significantly more data than were previously available for future research, making it more probable that the methods can be transferred to other EU countries.[33]

Further transferability potential is supported by the PROCARE Mentoring Methodology, along with corresponding VET and LTC Curriculum and Training Materials, which include all necessary information and tools to train VET Educators and subsequently train LTC Managers to take on a mentorship role in their organisation. This training material is made specifically to support the LTC sector in preventing and managing occupational burnout.[34]

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[31] Torój, M. et al. (2023). *Policy Paper*.
[32] Torój, M. et al. (2023). *Policy Paper*.
[33] Torój, M. et al. (2023). *Policy Paper*.
[34] PROCARE. *Project Results*.