

Good Practices on securing vocational rehabilitation schemes in case of sickness or accident



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List of abbreviations

EASPD: European Association of Service providers for Persons with Disabilities

ESG: Environmental, Social and corporate Governance

EU: European Union

NGO: Non-governmental Organisation

SDG: The Sustainable Development Goals

UDL: Universal Design for Learning

UNCRPD: Convention on the Rights of Persons with Disabilities

VET: Vocational and Educational Training

WISE: Work Integration Social Enterprise

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Introduction

Vocational rehabilitation schemes in situations of sickness or accident are critical in achieving the objectives of increasing employment and inclusion for people with disabilities. These schemes are integral to guaranteeing sustainable enhancement of labor market participation for individuals with disabilities, by providing necessary support for reintegration into work and ensuring their continued employment.

Vocational rehabilitation in the context of sickness or accidents requires tailored mobilisation of a set of services. These include, but are not limited to, medical rehabilitation, occupational therapy, counselling, skills training, job adaptation, and support for employers to facilitate necessary accommodations. The ultimate goal is to ensure that individuals can return to their job or enter new professional pathways as quickly and effectively as possible, thus minimising the period of economic inactivity and social exclusion.

It plays a crucial role in fulfilling multiple dimensions of the EU Disability Employment Package. Employment retention is facilitated by guaranteed tailored support and adjustments. Vocational rehabilitation helps in retaining employees who might otherwise leave the workforce due to their disabilities. It provides people with disabilities the necessary support to adapt to new circumstances, acquire or upgrade their skills, and find suitable employment opportunities. It not only benefits the individuals by maintaining their income, social connectivity but also aids employers by preserving valuable skills and reducing turnover costs.

Vocational rehabilitation schemes facilitate entry or re-entry of persons with disabilities into the labor market, contributing to raise the overall employment rate in this particular vulnerable group. By addressing the specific barriers people with disabilities face, such schemes strengthen their economic independence and social inclusion.

Also, implementing vocational rehabilitation schemes stows a particular strong message on the value of inclusivity and diversity in the workplace. Emboldens employers to adopt more inclusive hiring practices, to ponder reasonable accommodations for employees with disabilities, hereby fostering an inclusive labor market overall.

The focus on vocational rehabilitation by service providers for persons with disabilities contributes to enact the objectives of the Disability Employment Package. In particular, to address the fact that 17.7%, 1 in every 5 persons with disabilities were unemployed in the EU, with a dire impact on their lack of financial autonomy. In 2022, 28,8% of people with disabilities were signalled to be at risk of poverty or social exclusion. Vocational rehabilitation programs play a crucial role in ensuring that persons with disabilities can access more employment opportunities by offering tailored support, such as adaptive technologies and flexible work arrangements, that cater to their specific needs. The Strategy for the rights of persons with disabilities 2021-2030, aligned with the UN Convention on the rights of persons with disabilities (UNCRPD), underscores the relevance of vocational rehabilitation schemes to enhance the social and economic inclusion of people with disabilities, ensuring their full participation in an equal basis with others, towards creating a just, sustainable and inclusive society.





Beyond individual level considerations, vocational rehabilitation schemes offer broader economic and social benefits. These programs help individuals recover from sickness or adjust to life after an accident, promoting their independence and reducing reliance on social protection systems. By increasing the employment rate among people with disabilities, these schemes contribute to create added value with a direct positive impact on disability benefits and healthcare, while also promoting a more diverse and inclusive society. Furthermore, The European Care Strategy aims to enhance access to quality, affordable, and accessible care services across the EU. It focuses on improving the lives of care receivers and caregivers, ensuring high-quality care that empowers people with long-term care needs, strengthening their autonomy. Thereupon, service providers for persons with disabilities have the potential to sustain and bring forward innovation in the just transition to fully enact the rights of people with disabilities.

The EASPD has a specific expertise in this field, including through its participation in the PATHWAYS project, and in particular the recommendations delivered for the Disability Employment Package. In view of the guidelines for effective vocational rehabilitation schemes covering frequent diseases and types of accidents by EU-OSHA, to ensure coordinated support to people with disabilities at risk of early retirement, social exclusion and to motivate employers, this collection of good practices aims to shed light on initiatives helping the care and support sector in this transition to inclusive employment. This collection of good practices provides a strong evidence base for action and aims particularly to facilitate exchange of experiences. All practices will be available on the e-Library of EASPD and disseminated via several channels..

Structure and methodological approach of the report

In the context of this analysis, a best-case practice is conceptualised as a multifaceted approach that facilitates the (re)integration of individuals with disabilities into the workforce following periods of illness or accidents. This approach is operationalised through a coordinated vocational rehabilitation strategy, which offers a tailored suite of services. These services include, but are not limited to, medical rehabilitation, occupational therapy, psychological support, vocational training, job role adjustments, and assistance to employers in implementing essential workplace modifications.

The primary objective of these interventions is to expedite the process of reintegration into former employment positions or to support transitions to new vocational opportunities, thereby optimising efficiency and effectiveness. Such methodologies aim to substantially mitigate periods of economic inactivity and reduce the risk of social marginalisation, contributing to the comprehensive rehabilitation of the individual and achieving inclusive employment outcomes.

Furthermore, these practices are developed through a participatory design process that incorporates the perspectives, needs, and preferences of individuals with disabilities (co-design criterion). Additionally, these practices are aligned with the principles of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), ensuring respect for the autonomy, choice, and control of persons with disabilities over their lives and promoting their full and equitable inclusion in society (rights-based criterion).

To meet the objective of a comprehensive rehabilitation of the individual and achieving inclusive employment outcomes, the collection of good practices focused on the following criteria:





- 1. Inclusive Employment and Education: it places a strong emphasis on measures promoting inclusion of persons with disabilities in the labor market and educational, training settings. It involves all measures, both in sheltered and supported employment models, providing individuals who have acquired disabilities due to sickness or accidents, the concrete support to adapt to their new circumstances, acquire or upgrade their skills, re-integrate or find adequate employment opportunities.
- 2. Accessibility and Equality: it signals all practices that contribute to equal and barrier-free access to employment, education, and training opportunities. Including measures that create access for persons with disabilities to these opportunities, offering tailored support, such as adaptive technologies, flexible work arrangements, that cater to their specific needs.
- 3. Social Protection, Health and Sustainability: it comprises assessing additional health and social protection needs of persons with disabilities, and a comprehensive sustainable system of practices, both in sheltered and supported employment towards vocational rehabilitation. These measures help individuals recover from sickness, adjust to life after an accident, promoting their independence and reducing reliance on traditional support schemes, while fostering sustainable models.
- 4. Awareness-Raising and Combating Discrimination: it emphasises practices raising awareness about the rights and capabilities of persons with disabilities, including their right to work. By showcasing the potential of persons with disabilities to contribute meaningfully to the workforce, it combats stereotypes and discrimination.
- 5. Partnerships and Collaboration: it signals activities that require collaboration between various stakeholders, including public structures, social economy and community operators.

To identify the respondents, EASPD <u>launched a call for good practices</u> distributed through its website, and in particular its Employment Member Forum. The call included a Word survey, including 13 questions regarding the 'inclusive employment models and vocational rehabilitation schemes in case of sickness or accidents', the methodology used for the co-design, the impact of the practice, its financial support, the sustainability, the replicability. EASPD assessed and selected the practices that are in line with the UNCRPD.

Professionals representing 3 organisations across Europe responded to the survey. Following the screening process, all the practices met the selection criteria to be included in this report. A table showcasing the geographical distribution and a list of these best practices included is presented below.

	Country	Number of selected practices
1	Austria	6
2	Belgium	6
3	Israel	5

Table 1: Organisations included in the European Inspiring Practices report





The key elements of each of the selected practices are presented below.

Selected promising practices

1. Vocational trainings and rehabilitation centre BBRZ (Berufliches Bildungs und RehabilitationZentrum BBRZ- Austria

Organisation: Berufliches Bildungs und RehabilitationZentrum BBRZ- Austria.

Website: www.bbrz.at

Description of the organisation:

BBRZ is providing services for persons who cannot work in their previous jobs anymore due to all kinds of physical and/or mental health conditions. There are different services addressing the individual requirements of the participants. All have in common the following approach:

- Individual
- Support by a Reha Coach throughout the entire process
- Empowerment
- The participant is expert for himself/herself
- Providing space to learn more about the own capabilities and strength based assessment
- Considering the health conditions and the impact on employment
- Training of soft skills, digital skills
- Training of health competence
- Additional support of psychologists, pedagogues, occupational therapists, physiotherapy on demand

Different services like:

- Assessment and vocational orientation (a period of 1 16 weeks) to learn more about the own strengths (soft skills, knowledge, vocational skills, etc.), the regional labour market, training possibilities, insight in professions (also through internships in companies), occupational assessments considering the impact of the health condition on employment, coaching and support in decision making, etc. At the end of this service the participant has a rehabilitation plan about his/her future vocational path and concrete next steps, which are also agreed with potential funding bodies.
- Training/Education (between a few weeks and 24 months) to update the knowledge and/or to learn new skills in order to be able to join the labour market. All these trainings are built upon the skills and





interests of the person, considering the health condition and are done together with companies of the open labour market. Many of these companies hire the person after finishing the training.

There are more services on offer than can be described here. Overall, it can be said that the services cover the entire spectrum of diagnostics, assessment, training/education, and job search support.

The services are offered at 23 locations throughout Austria. The services have been in place for more than 40 years and are constantly being adapted to the new needs of the individual target groups as well as to the constantly changing situation on the labour market. In recent years, yearly up to 1,000 people have successfully completed a training program at the BBRZ and 50-80% gained employment.

Target group of the practice:

Persons who can no longer pursue their work due to physical or mental illness and/or accidents. Most of them are already long term unemployed before they start Vocational Rehabilitation at BBRZ.

The participants are aged between 16 and 63. The largest proportion, usually more than 50%, are aged 30-50. In terms of health conditions, around 40% have physical conditions, 36% have psychiatric (mental health) conditions and 24% have both physical and psychiatric (mental health) conditions.

The gender distribution is approximately 44-47% women and 53-56% men.

All these persons have problems entering employment again after their illness/accident. That is the reason why they are assigned to a service at BBRZ.

Description of the model/policy initiative:

The services follow the idea of supporting and enabling persons to go back to employment on the open labour market that is suitable for their health condition and in line with their skills, competencies and interests.

The idea is to support a person for a (short) period of time to empower him/her to regain a foothold again in the labour market. It focuses on the strengths and skills, takes into account the environment of the person (family, community, regional profile, etc.). Opening up a space for the person to find out their skills and competences, interests in order to find a suitable new workplace. All longer trainings are organised in a way that the person is already included in a company on the first labour market to be sure to meet the needs required in corporate world and to gain real-life experience.

To what extent does the model meet inclusive employment?

The different provided services are all focusing on supporting persons, who cannot pursue their previous job any more to find out how they could get back in employment on the open labour market in a sustainable way. The aim is always long-term employment on the open labour market with the equal payment, as other employees. To reach that goal the participants are supported in a holistic way to find out what they are good in, what they like to do and how that could fit in the labour market. Participants have the opportunity to learn





more about their chosen job field in a "try-out internship". If they are also doing an education/training at BBRZ, this is carried out together with and in a company on the open labour market. The training schedule is adapted to the needs of the person and the company. This equips the participants with practical experience.

This also provides feedback for BBRZ, which in turn is incorporated into the training content and new programme designs. Each participant is supported throughout the entire process by a Reha Coach and, if necessary, by other experts. So, the services attended at BBRZ are always seen as a limited intervention enabling the persons to get and keep long term employment.

Impact of the model/policies on people with disabilities:

Employment (Re)Integration figures are determined by a complex set of factors(labour market situation, region, level of education, age, disability, gender, etc). Conversely, the rate of persons who find work on the open labour market after completing training measures remains consistently high (between 50% and 80%). This is significantly higher than the ex-ante integration rate for persons with disabilities (about 30%).

Financial support:

The services are funded by the Austrian Public Employment Service (AMS), the Austrian Pension Insurance and other Insurances.

Sustainability:

BBRZ offers these services for more than 40 years.

The benefits for individuals and their families are remarkably positive. In particular, at personal level (being reintegrated, increased skills, more self-confidence, well-equipped for employment, etc.). Also, it has a financial impact. The person earns money again - in many cases even more than before.

The benefits for society Vocational Rehabilitation pays off for society. After completion of vocational orientation and training, persons who enter the job market after illness/accidents and unemployment will, not only as workers but as tax payers, contribute again to social welfare. Investment in vocational training brings higher returns in the medium to long term. Work integration is accompanied with a positive impact on public health costs. It fosters cohesion and social inclusion.

Replicability: The concept of Vocational Rehabilitation at the BBRZ is very flexible. It has been applied and further developed for many years with people with a wide range of health impairments. The concept works at large and small locations. It can be adapted to different target groups. It takes the local and regional labour market into account. It builds on the skills, competences and interests of the persons.





The concept of training/education is particularly noteworthy: all are done together in collaboration with companies, in the open labour market. This means that participants can learn professions offered by the BBRZ and also prepare for work in an area closer to their interests, that matches their skills and that is also available locally on the labour market. They are not only trained in a specific training organisation but experience as well work in a real environment.

BBRZ has been sharing its expertise to experts in other countries. The approach and parts of the services have been taken as inspiration and adjusted by organisations or bodies in some countries (e.g., in Croatia).

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2. Groep Maatwerk - Belgium

Organisation: Groep Maatwerk, Flanders, Belgium

Website: https://www.groepmaatwerk.be

Description of the organisation:

Groep Maatwerk is the Flemish employer federation of Custom Work Companies.

Custom work companies employ people who have difficulties accessing the labour market due to a (intellectual, psycho-social, physical, mental or combination of several factors) disability that makes it hard or impossible for them to find work in the open labour market. The primary goal of a social enterprise is not to make a profit but to create sustainable and adapted employment.

It represents 70 companies which employ more than 23.000 people, where 80% are people with disabilities.

Target group of the practice:

The target group are people with disabilities. About 75% of the people with disabilities have intellectual disabilities. About 20% have a psycho-social disability, others have other mental or physical disabilities. Most of them have a combination of disabilities.

The disability is recognised by the Flemish Employment office. This fits into the inclusion idea: a person with a disability who needs support to work, does not go to a specific Agency for people with disabilities, but to the general employment office. This avoids stigmatisation from the beginning. The employment office works together with a service that is specialised in guiding people with a disability to the labour market.

The employment office recognises the person either based on eligible certificates, or based on a ICF assessment.

Description of the model/policy initiative:

Custom work companies employs people officially registered at the employment office as "jobseekers", but also employ people who were on long term illness.

This consist of people who were employed and became ill, or people who were employed by another company, became ill and are not able to return to their previous job.

Custom work companies offer people who are long-term ill new job opportunities.

Two models are mobilised (or combined):

- progressively integrating people (after) illness, into paid employment, and/or;
- occupational activities towards work: for people who are not (yet) ready to do paid work: by offering them firstly employment care (not yet paid) and work-related activities, as a step-stone to paid work.





This is done by offering occupational activities (in Dutch: AMA to work, ArbeidsMatige Activiteiten) as transition to paid work..

To what extent does the model meet inclusive employment?

Groep Maatwerk aim is to always activate people to paid work, and to transition towards fully-fledged employees.

All employees of custom work companies have a full wage (at least the official minimum wage), they have their own joint committee, with collective agreements (13th month, extra holidays on top of the Belgian minimum of 20 days, compensation for transport to work, ...). A normal working week consists of 38 working hours a week.

Custom work companies also have lots of "company contracts", so called enclaves: in these cases employees are no longer within the (walls of the) custom work company, but working on the premises of the client. The disabled workers remain on the payroll of the custom work company.

Impact of the model/policies on people with disabilities:

People who are progressively integrated into work after illness: get an substantial increase in income, especially when combining a part-time job with an income allowance. About 2,5% has a labour agreement of less than 40%, 80% a labour agreement between 40-60%, and 17,5 % has a labour agreement of more than 80%.

People who are participating in occupational activities towards work: will also have a potential increase in income when successful transitioning to paid work. The UCLL study, hereby mentioned concludes there is an increase in psychosocial well-being, day structure and social contact.

For more details:

https://d3tlmbayzyalmi.cloudfront.net/files/publicaties/Eindrapport studie Meerwaarde-van-Arbeidszorg.pdf

Financial support: No.

Sustainability:

Commercialisation of the products produced.

Replicability:

The models/policies can be replicated elsewhere, especially considering the (low) cost-benefit ratio.

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3. The Good Coffee Project – Israel

Organisation: Shekulo Tov Group, Israel

Website: https://inspire.org.mt/

Description of the organisation: 'Good Coffee' Vocational Engagement Enterprise active in Mental Health Centre's – offers people with severe Psychosocial Disabilities a 'pre-rehabilitation' program that increases transition From Mental Health Centre vocational rehabilitation into community-based training.

Target group of the practice: People who were hospitalised due to mental health challenges.

Description of the model/policy initiative: "Good Coffee" is a chain of social enterprise cafés that serves as a professional vocational rehabilitation training centre for people with psychosocial disabilities, previously referred day cares and sheltered employment. tο Good Coffee's main objective is to enhance vocational and interpersonal skills and promote practical experience in working in the kitchen, as a barista, providing customer service, and various other positions necessary to work in this field.

The vocational rehabilitation team at each café includes a professional rehabilitation manager, placement coordinator, and staff member who specialises in food service.

Vocational training includes: coffee making, kitchen work, food service hygiene, customer service, cashier and stock management.

"Good Coffee" has now 17 coffee shops, out of them 6 are in mental health centres, part of our partnerships with the Israeli Ministry of Health. These six cafes serve 162 service users, a mix of service users with complex psyco-social disabilities that live in the community and of patients who are hospitalised due to mental health reasons and participate in "Pre-rehabilitation" program.

This program offers training and activities while being hospitalised, in order to maintain and empower vocational abilities. Once discharged, individuals can choose to go back to work with supported employment (if needed), continue their training process with and in good-coffee or any other 148 training units they have around Israel.

This model allows a smoother transition between hospital and the community, between the realm of 'health' and the realm of 'social'. It allows both individuals and regulator to maximise training and participation while minimising health-related and social-related cost.

To what extent does the model meet inclusive employment?

Good Coffee's 17 branches are part of 148 training units that are operated under an award-winning Integrative Unit Model (Some examples here). These units resemble and operate like conventional businesses, offering service users to choose from various training roles. In the units, rehabilitation and training programs are socio-contextual and person-centered.





The IUM prioritises rehabilitation, placements, and career development over revenue generation. The IUM's P3 (Preparation, Placement, Progress) supported employment model is implemented across all our units. Individual Placement and Support (IPS) job coaches positions are available and play an integral role in each unit, encouraging and empowering service users to seek open market positions.

Impact of the model/policies on people with disabilities:

Ex ante: 81% of people with disabilities have worked in mainstream employment or participated in vocational engagement activates (such as sheltered workshops or vocational training) prior to hospitalisation

Ex post: 59% of the service users, once released form the mental health centre, transition to vocational training or vocational rehabilitation in the community.

26% of the service users, once released form the mental health centre, transition to mainstream employment using supported employment services.

This represents a total of 85% of the discharged, who participated in Good Coffee's pre-rehabilitation program, continue to mainstream employment, vocational training, or vocational rehabilitation.

Financial support: No.

Initiatives to sustain the practice and its impact:

Through applying various community-based services such as the IUM – they are proven to have strong social and economic ROI at the macroeconomic market level. Over the past two decades, approximately half of all Israeli hospitalisation days have been prevented through models of community support, saving over €220 million.

Replicability:

The model is very transferable. In some countries where there is a tougher distinction between Medical Care (Usually Ministry of Health), social and community based vocational engagement (Usually Ministry of Social Affairs) and mainstream employment (Usually ministry of labor and work insurers) – a greater, smoother, person-oriented approach will need to be promoter in a cross-agency way.

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Analysis: key findings on securing Vocational rehabilitation schemes in situations of sickness or accident

Vocational rehabilitation schemes for persons with disabilities present a multifaceted challenge, demanding a comprehensive capacity for adaptation and innovation across various sectors and the mobilisation of multiple stakeholders. This challenge encompasses not only tailoring vocational programs to meet diverse needs but also fostering an inclusive employment landscape.

The multifaceted challenge of vocational rehabilitation for people with disabilities involves recognising and addressing the wide range of barriers people with disabilities may face. These barriers can be physical, psychological, societal, or related to the workplace itself. Effective vocational rehabilitation requires understanding these challenges and the capacity to develop innovative tailored solutions.

Adaptation in the context of vocational rehabilitation programs in situations of sickness or accident refers to the need to actively engage employers, governance structures, the society at large to modify practices, environments, and attitudes to support the inclusion of individuals with disabilities in the workforce. This includes: Adapting training programs to accommodate various learning styles and abilities, modifying workplace environments and adapting tasks and work profiles job to match the unique capabilities of each individual. Adjusting recruitment, hiring, and retention in employment practices to be more inclusive.

Innovation is a crucial tool to address vocational rehabilitation challenges towards more inclusive working environments, through the support of new technologies and assistive devices. These can enhance workplace accessibility, efficiency and safety for persons with disabilities. Also, promoting creative employment models, such as remote work or flexible scheduling, empowering the individual while opening new professional pathways. A fundamental aspect remains on crafting policies that incentivise employer participation in vocational rehabilitation programs and on the hiring of individuals with disabilities.

Strengthening the ecosystem surrounding vocational rehabilitation to build comprehensive capacity involves: training service providers in innovative practices for supporting individuals with disabilities. Assisting, raising awareness of employers on the benefits of a diverse workforce and how to create inclusive workplaces.

Promoting communities active engagement in towards reducing stigma and the promotion of the social inclusion of persons with disabilities. Achieving meaningful outcomes in vocational rehabilitation for people with disabilities requires collaborative efforts that span public administration, private sector employers, social economy organisations, and the individuals themselves. Systemic change is necessary to create a more equitable labor market.

The following analysis sheds light on which initiatives can be adopted to empower persons with disabilities in the process supporting and transition to inclusive employment. The key-findings can be a starting point for service providers to think about how to engage taking into consideration issues related to the inclusion of persons with disabilities.





The different aspects of vocational rehabilitation in the context of sickness or accident for persons with disabilities

Services for persons with disabilities can tackle supporting transition to inclusive employment throughout a large range of actions. To potentiate systemic and long-term inclusive effects a comprehensive, integrated approach mobilising all relevant community and civil society stakeholders is required. Conversely, each and every activity empowering people with disabilities, independent of its scale, compounds.

Vocational rehabilitation schemes in the context of sickness or accident can be multifaceted. Mobilising various models and practices involves a comprehensive approach to ensure successful outcomes for both service providers and persons with disabilities. This concept emphasises the importance of a broad spectrum of interventions, collaborations, and tailored strategies to meet the unique needs and potential of individuals with disabilities.

This report has identified 6 types of practices that can be adopted by service providers to amplify the positive impacts of (re)integration through employment of persons with disabilities: (A) holistic and person-centred approach by the service provider, (B) cross-sectors collaboration, (C) complementarity on mobilising employment model's diversity, (D) tailored training and education, (E) empowerment and active participation, (F) support systems and sustainability

A. Holistic and person-centred approach by the service provider

The first key finding of is that vocational rehabilitation for individuals with disabilities is successful when grounded in a holistic approach that considers the whole person, including their abilities, interests, and aspirations, rather than focusing solely on their disabilities.

This approach necessitates the development of tailored plans that align with each individual's specific situation, vulnerabilities, and talents. This is the case of Berufliches Bildungs und RehabilitationZentrum (BBRZ) - Austria, Groep Maatwerk, Flanders, Belgium and Shekulo Tov Group, Israel.

Choosing to adopt an overarching strategy centred in the person with disabilities also has the merit to involve and facilitate adaptations to all stakeholders including staff, families, community services, and employers. It also reinforces the engagement of the service provider in supporting transition to inclusion through employment. For example, the Groep Maatwerk supported an UCLL reports on its contribution to the Added Value of labour care of persons with disabilities.

B. Cross-sectors collaboration

Successful vocational rehabilitation schemes involve the cooperation of multiple stakeholders, including public services, private employers, educational institutions, and social economy organisations. Furthermore, transition opportunities to employment in the open labor market relies heavily on the support and active participation of employers and the broader community. This includes making workplaces more accessible, providing sensitivity training to employees, and promoting rights in a diverse workforce.



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European Association of Service providers for Persons with Disabilities

Again this is the case of Berufliches Bildungs und RehabilitationZentrum (BBRZ) - Austria, Groep Maatwerk, Flanders, Belgium and Shekulo Tov Group, Israel.

By pooling resources and expertise, these entities can create a more supportive ecosystem that facilitates the transition of people with disabilities into the workforce. BBRZ supports persons with disabilities throughout several modalities articulated with the Austrian public employment public services, including assistance in looking for a job in the open labour market with a Reha coach and if necessary other experts. An even closer collaboration between the Flemish employment office was established with Groep Maatwerk, which assists in an equal stand the support to people with disabilities.

C. Complementarity on mobilising employments models diversity

Vocational rehabilitation schemes in sickness or accident exist in all models of employment system for persons with disability. They are diverse include sheltered employment, supported employment, and direct employment in the open labor market. Each model serves different needs and stages of transition, offering various levels of support and integration. The dominance of one over the others is diverse and anchored on the specific context of how and why welfare systems developed as they did in each country.

Sheltered Employment: Provides a controlled environment where individuals can develop work skills and habits with significant support. Supported Employment: Individuals are placed in regular employment settings with ongoing support services to ensure their success. Direct Employment: Focuses on preparing individuals for employment in the open labor market.

An excellent example on mobilising complementarily the advantages provided by all 3 models to promote tailored solutions to the inclusion of diverse persons with disabilities in the labour market is provided by the employment opportunities generated by "Good coffee" project set by Shekulo Tov Group, Israel. Interesting alternative solutions for mobilising the models in accordance with the specific challenges are also brought forward by the **Groep Maatwerk**.

D. Tailored training and education

Education and training are pivotal in vocational rehabilitation, by equipping persons with disabilities, staff, employers with the necessary skills and knowledge to thrive in inclusive communities. Tailored training programs that consider the specific needs and learning styles of each participant can significantly enhance their employability and confidence. A successful transition to employment in an open environment is potentially easier to individuals when they are able to share views and wishes on the sustainable society they would like to build and live in.

Shekulo Tov Group, all offer training and the possibility to pursue education in their programmes. Contributing in a very substantive way to this objective is **Groep Maatwerk** and **BBRZ**, with an extensive portfolio of trainings, internships for people with disabilities, service providers, employers, public services, tailored in according to the specific needs.





E. Empowerment and active participation

Empowering persons with disabilities through vocational rehabilitation involves more than just training for employment. It means fostering a sense of agency, allowing individuals to make informed decisions about their careers and lives. Active participation of each and every individual to the extent possible in their own rehabilitation process is crucial for a successful inclusion.

This aspect is embedded in all activities carried by **BBRZ**– Austria, **Groep Maatwerk**, Belgium and **Shekulo Tov Group**, Israel.

F. Support systems and sustainability

Viability and sustainability of vocational rehabilitation efforts relies on ongoing support systems by service providers for persons with disabilities and their employers. This includes job coaching, assistive technologies, and mechanisms for feedback, adaptation and accommodation of employment arrangements.

Methodologies used for the co-design of sustainable practices

Particular attention is now guaranteed to the methodologies used by service providers to involve beneficiaries in the design of sustainable practices. This co-design of good practices is essential to adequately assist and ensure the participation of persons with disabilities in transition to employment and inclusiveness.

The different methodologies reported by service providers to involve beneficiaries in the design, implementation, and assessment of sustainable practices are listed below:

Co-creation & co-development of practices BBRZ includes participants in all service development stages. Groep Maatwerk, developed a personalised approach from the beginning. Engaging the person, and then trying to figure out how to integrate him/her in the workplace, bridging the gap between available competences and required competences. They work with a yearly personal development plan, and have developed a scientific tool to assess work values of the person, and have a social services that also takes care of non-work related Issues. Shekulo Tov Group has an interesting "Service Improvers" program. It facilitates active participation in decision making and service design. Over 250 service users have been trained to become Service Improvers in Shekulo Tov Group, and participate in strategic decisions as well as in professional staff HR recruitment screening.





Conclusions

The purpose of this report was to showcase a series of good practices in services for people with disabilities. The report aims to highlight how service providers through vocational rehabilitation in the case of sickness or accident tackle (re) integration in the labour market of vulnerable groups in particular of people with disabilities while ensuring empowerment and creating new pathways for open labour market.

The multifaceted nature of vocational rehabilitation schemes for people with disabilities underscores the complexity of creating effective (re) integration employment venues and transition opportunities to the open labor market. Success hinges on personalised, flexible approaches that engage a wide array of stakeholders, models, practices and resources. By focusing on empowerment, autonomy, tailored training, and community support, vocational rehabilitation can significantly contribute to building a more inclusive and cohesive society where individuals with disabilities can realise their full potential in the workforce.

There are a few inspiring practices represented here, from Austria, Belgium and Israel. The practices collected stress the importance of having sustained inclusive vocational rehabilitation involving persons with disabilities in the conception, implementation and evaluation. The report sheds light on the necessity to empower of persons with disabilities through employment, boosting their autonomy and creating new professional pathways to transition to open labour market, enabling full participation in a diverse, sustainable inclusive society.





Appendix: Questionnaire for the collection of good practices in vocational rehabilitation schemes in the case of sickness or accident for people with disabilities

Name of the organisation & country:	
1. Description of the service provided:	
2. Target group of the practice:	
3. Description of the model/policy initiative:	
4. To what extent does the model/policy meet the definition of inclusive employment?	
5. To what extent does the model/policy meet the definition of inclusive employment models?	
6. To what extent is it possible to have reliable access to information about the case?	
7. To what extent are the targeted groups involved in the set-up and further development of the case?	
8. How efficient is the measure in addressing barriers to employment for persons with disabilities?	
9. How do the costs compare to the benefits of implementation?	
10. What were the effects of the model/policy on the target groups involved?	



11. To what extent are the achieved benefits from the model/policy sustainable?	
12.How likely is it that the basic features/approach of the model/ policy can be replicated in other regions/countries?	
13. Is the model funded as an ESF+ project?	
Contact details	