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INDUCATE

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INDUCATE road-map and
toolkit
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Table of Contents

Abbreviations.....	4
Introduction	5
List of recommendations.....	6
I. Leadership & Management Recommendations	6
General Overview of road-map & toolkit/ Leadership & Management	7
II. Educators Recommendations.....	11
General Overview of road-map & toolkit/ Educators.....	12
Quality improvement plans.....	15
QuIP/ Leadership & Management.....	16
QuIP/ Educators	21
Best Practices List.....	24



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Abbreviations

HRC: Health Related Conditions

IAF: Integrated Assessment Framework

QuIP: Quality Improvement Plan

Introduction

This document contains a series of general ideas and recommendations for adult learning providers to improve their inclusive practice as well as the recruitment, retention and possible outcomes for learners with health related conditions. These recommendations arose from adult learning providers across Europe who are keen to engage in the INDUCATE project to improve the effectiveness of Adult Education for learners with Health Related Conditions (HRC). The recommendations are also examples of current good practices across a wide field of providers who have been involved in both development and delivery and consider them to be effective in inclusive practice.

These recommendations provide inspiration and ideas for adult learning providers to improve their inclusive practice. For maximum impact, they should be viewed in conjunction with the other INDUCATE Outputs, mainly, the INDUCATE Integrated Assessment Framework (IAF): a resource provided for adult education providers to understand and self-assess their inclusive practice and systematically plan for improvement.

Contained within this document are:

- A **list of recommendations** per group of criteria assessed in INDUCATE IAF online tool, regardless of the performance achieved, together with a **series of values linked** i.e., impact, suitability of methods, outreach, inclusion, equity; illustrated in a **general overview of road-map & toolkit** template addressed to leadership & management staff and educators.
- A catalogue of best practices collected from partnership via qualitative research, implemented online from July to September 2021.
- A series of quality improvement plan (QuIP) templates based upon results reached at INDUCATE IAF and ready to be used by educational bodies.

List of recommendations

In this section, we present general recommendations per group of factors assessed during the completion of INDUCATE IAF regardless of the score achieved and performance reached.

Recommendations include informative descriptions of future steps, guidelines and/or measures to be taken by relevant providers in order to improve their educational effectiveness and enhance inclusion of learners with HRC.

I. Leadership & Management Recommendations

This section refers to the **leadership and management** part of IAF deliverable (IO2-T2). Based on the ten criteria from the research performed during the first intellectual output (IO1-T3), four levels have been identified within the IAF, which are directly addressed in this section:

A: Inclusive Strategy Development

B: Inclusive and Targeted Planning and Recruitment

C: Quality Improvement

D: Learners' Voice

For each level we provide below a list with general recommendations, values linked and relevant best practices.



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General Overview of road-map & toolkit/ Leadership & Management

<i>Leadership & Management</i>	<i>Recommendations</i>	<i>Good practice</i>	<i>Values linked</i>
Inclusive Strategy Development	<ul style="list-style-type: none"> • <i>A special communication plan is recommended to be developed targeting learners with HRC; the communication plan in question will be adult – centered, measureable, monitored and well diffused via appropriate communication channels at a local and national level.</i> • <i>A new educational inclusive plan must be developed taking into consideration HRC learners; the plan will be adult – centered, measureable, and monitored in accordance to national educational system criteria.</i> • <i>Establish the development of a cooperative scheme involving educational consultants and health facilitators/ mediators to ease learners with HRC employed via third party partnership or in-house.</i> • <i>Ensure that course planning is inclusive across abilities and needs, and that all learners can benefit from mixed experiences, abilities and perspectives. Plan curriculums inclusively, rather than categorizing purely based upon need/health condition(s).</i> 	<ol style="list-style-type: none"> 1. Fachschule für Heilerziehungspflege 2. Universität Salzburg, 3. Universität 55-PLUS 3. Münchner Volkshochschule 4. Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras 5. Vilniaus suaugusiųjų mokymo centras 6. Vilniaus "Židinio" suaugusiųjų gimnazija 7. GIP FCIP de Créteil 8. COS CRPF 9. Escuela de Personas Adultas de la Verneda-Sant Martí 10. Ami3 	<ul style="list-style-type: none"> • Outreach • Inclusion • Impact



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Recommendations



Good practice

Values linked

Leadership
&
Management

Inclusive and
targeted
planning and
recruitment

- Accessible education materials for all educational programmes must be provided taking into account the needs of learners with HRC.
- Integrate assistive technologies to enable equitable access to materials that could be available anytime; this can improve attendance and minimize risk of drop out. Especially after learners' health problems relapse.
- Set out flexibility of additional teaching session's provision, paired or individualized, where needed.
- Ensure flexibility to prolong or re-adjust learning, teaching and/or assessment period due to health status and medical relapses.
- Ascertain financial resources to invest in appropriate technology and communication systems to facilitate online learning and online repositories of educational materials.
- Motivate educational staff to listen to and engage with learners with HRC. Set 1:1 meetings so as to create a safe, comfortable and supportive environment to nurture effective teaching and learning practices, such as positive and constructive feedback.
- Ensure that validation and certification schemes offered by educational organisation entail valorization of formal and non-formal education.
- For those adults who are not ready to access formal learning programmes due to health problems' limitations, creative non-accredited/non-formal courses as a first step into learning.

1. [Vilniaus Gabrielės Petkevičaitės- Bitės suaugusiųjų mokymo centras](#)
2. [Vilniaus suaugusiųjų mokymo centras](#)
3. [Vilniaus "Židinio" suaugusiųjų gimnazija](#)
4. [VŠĮ Soros International House](#)
5. [GRETA MTE77](#)
6. [COS CRPF](#)
7. [Greta MTI 94](#)
8. [GMTE 93](#)
9. [Escuela de Personas Adultas de la Verneda-Sant Martí](#)
10. [Universidad de Extremadura](#)

- **Suitability of methods**
- **Inclusion**



*Leadership
&
Management*

Recommendations

Good practice

Values linked

**Quality
Improvement
Criteria**

- *Invite educational body members and administrative staff, including nurse and/or social workers employed in the adult education center, to attend an evidence-based health literacy programme relevant to chronic health conditions, as part of their continuous educational training plan.*
- *Establish a two-way communication channel between leadership and trainers in relation to obstacles encountered during daily teaching delivery to learners with HRC; this will facilitate trainers and leaders to re-adjust or re-consider their teaching methods or educational programmes upon needs.*
- *Motivate learners with HRC to become members of adult education center's learner union so that their needs become visible.*

1. [Fachschule für Heilerziehungspflege](#)
2. [Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras](#)
3. [VŠĮ Soros International House](#)
4. [COS CRPF](#)
5. [Greta MTI 94](#)
6. [GMTE 93](#)
7. [Greta des Yvelines](#)
8. [Escuela de Personas Adultas de la Verneda-Sant Martí](#)
9. [CFA Can Folquera](#)

- **Equity for all**
- **Inclusion**



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Leadership & Management



Recommendations



Good practice

Values linked

Learners' voice

- *Establish a two-way communication channel between leadership and learners with HRC; this will facilitate managerial and educational members to re-adjust or re-consider their teaching and assessment methods according to learners with HRC needs.*
- *Ensure that personal meetings between educational staff and learners with HRC are taking place prior to their enrolment so as learners are encouraged to share their health status and their expectations from the educational programme. (in accordance with GDPR)*
- *Ascertain that evaluation from learners with HRC is collected in relation to overall learning and assessment experience and results are shared and discussed in Quality circles among educational staff.*
- *Appoint one person from the managerial or educational staff to whom learners with HRC can address and express their complaints and/or concerns.*
- *Encourage learners with HRC to actively participate at the learners' body of the educational center and get equally represented.*

- [1. Fachschule für Heilerziehungspflege](#)
- [2. Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras](#)
- [3. VšĮ Soros International House](#)
- [4. COS CRPF](#)
- [5. Greta MTI 94](#)
- [6. GMTE 93](#)
- [7. Greta des Yvelines](#)
- [8. Escuela de Personas Adultas de la Verneda-Sant Martí](#)
- [9. CFA Can Folquera](#)

- **Equity for all**
- **Inclusion**
- **Suitability of methods**



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II. Educators Recommendations

This section refers to **educators'** part of IAF deliverable (IO2-T2). Based on the ten criteria from the research performed during the first intellectual output (IO1-T3), four levels have been identified within the IAF, which are directly addressed in this section:

A: Qualification of professionals / educators

B: (Possibilities for) Action by professionals / trainers

C: Creating and cooperating within structures and networks

D: Learners' Voice

For each level of criteria we provide below a list with general recommendations, values linked and relevant best practices.



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General Overview of road-map & toolkit/ Educators

<i>Educators</i>	<i>Recommendations</i>	<i>Good practice</i>	<i>Values linked</i>
Qualification of educators	<ul style="list-style-type: none"> • <i>Motivate trainers/ educators to attend & participate in Continuous Training Programmes, especially in relation to identifying health related conditions and how they might affect their teaching procedure.</i> • <i>Nourish educators' interest and awareness in adult learners' welfare in relation to their health status.</i> 	<ol style="list-style-type: none"> 1. GIP FCIP de Créteil 2. COS CRPF 3. Greta des Yvelines 	<ul style="list-style-type: none"> • Impact • Inclusion • Outreach
Action by educators	<ul style="list-style-type: none"> • <i>Trainers/ educators deliver one-to-one feedback to learners with HRC on their academic achievements and progress.</i> • <i>Trainers/ educators comprehend that HRC learners' progress is bound up to their health status and acknowledge that diversity requires special support and treatment.</i> • <i>Trainers/ educators are familiar with using technologically aided teaching methods, such as virtual or online teaching platforms, open educational resources, digital resources.</i> • <i>Trainers/ educators expect equally the same from learners with or without health related conditions.</i> 	<ol style="list-style-type: none"> 1. Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras 2. Vilniaus suaugusiųjų mokymo centras 3. Vilniaus "Židinio" suaugusiųjų gimnazija 4. VŠĮ Soros International House 5. GRETA MTE77 6. COS CRPF 7. Greta MTI 94 8. GMTE 93 	<ul style="list-style-type: none"> • Suitability of methods • Inclusion • Equity for all



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Creating and cooperating with structure and networks Learners' voice

- *Establish a contact person from your educational organization and allocate communication and coordination tasks and responsibilities interconnecting adult educational peers, local career services, local medical associations and other relevant services to HRC learners' needs in order to develop strong partnerships*

- *Ensure that personal meetings between trainers and learners with HRC are taking place prior to learners' enrolment at the educational center in order to establish confidence and openness for sharing potential learning and health concerns.*
- *Ascertain that feedback from learners with HRC and their families/ carers is collected in relation to overall learning experience and results are shared and discussed among all interest parties (under protection of GDPR law).*
- *Decisions concerning learners' educational process are made in egalitarian dialogue between educators and learners.*

9. [Escuela de Personas Adultas de la Verneda-Sant Martí](#)
 10. [Universidad de Extremadura](#)
 11. [CFA Can Folguera](#)

1. [Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras](#)
 2. [Vilniaus suaugusiųjų mokymo centras](#)
 3. [Vilniaus "Židinio" suaugusiųjų gimnazija](#)
 4. [Greta MTI 94](#)
 5. [GMTE 93](#)

- **Equity for all**

- **Equity for all**
- **Inclusion**



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- [6.Greta des Yvelines](#)
- [7.Escuela de Personas Adultas de la Verneda-Sant Martí](#)
- [8.Universidad de Extremadura](#)
- [9.Ami3](#)
- [10. Münchner Volkshochschule](#)

Quality improvement plans

The quality improvement plans outline the key strengths and areas for improvement of each adult education center that has completed the IAF self-assessment tool. The following templates are designed to be filled-in by the managerial or educational staff of the center and set out a series of priorities for actions required per criterion as described in IAF, a time plan, description of milestones in achievement and persons in charge.

Upon the IAF online tool is completed and results table with scoring is generated (see image below), the adult education provider will be able to locate which areas are excelling & developing (key strengths) and which areas are emerging & pre-emerging (Key areas for improvement). The actions described in the development plan cover key areas for improvement.

For example, from the image below, the user should fill in the *QuIP for Educators/ Learners' Voice*, because the self-assessment descriptor is emerging.

However, we encourage the adult education provider to develop the QuIP for the developing areas as well.

Provider's Self-Assessment Rating			
	Self-assessment score	Self-assessment grade	Self-assessment descriptor
Leadership and Management	142	54%	Developing
Inclusive Strategy Development	33	52%	Developing
Inclusive and Targeted Planning and Recruitment	55	51%	Developing
Quality Improvement	20	56%	Developing
Learners' Voice	34	63%	Developing
	Self-assessment score	Self-assessment grade	Self-assessment descriptor
Educators	46	46%	Developing
Qualifications of professionals / educators	7	39%	Developing
Actions by professionals / educators	25	56%	Developing
Creative and cooperating with structure and network	4	44%	Developing
Learners' Voice	10	10%	Emerging



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QuIP/ Leadership & Management

Area to be addressed	Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria as described in IAF
A	ISD	Leadership & Management: Inclusive Strategy Development			
ISD1					Strategic Action
ISD2					Addressing the target group (learners with HRC)
ISD3					Communicative support
ISD4					Coaching and cooperation
ISD5					Internal structure
ISD6					Overcoming obstacles
ISD7					Institutional cooperation



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Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
B	ITPR	Leadership & Management: <i>Inclusive and targeted planning and recruitment</i>				
	ITPR1					Curriculum-based planning
	ITPR2					Variety in educational options
	ITPR3					Individual tutoring
	ITPR4					Access to full spectrum
	ITPR5					Efficient networking
	ITPR6					Necessary equipment
	ITPR7					Interest in the challenges of dealing with HRC learners in practice
	ITPR8					Individual needs of learners
	ITPR9					Support from family, classmates and educational community support



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ITPR10					Extensive teaching time
ITPR11					Validation of all types of learning and vocational skills
ITPR12					Inclusive measures



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Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
C	QI	Leadership & Management: <i>Quality Improvement Criteria</i>				
QI1						Educators' training
QI2						Inclusion
QI3						Feedback from Professionals / trainers to the leadership / management level and programme planning.
QI4						Critical self-reflection



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Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
D	LV	Leadership & Management: <i>Learners' voice</i>				
	LV1					Feedback
	LV2					Contact persons
	LV3					Quality strategy
	LV4					Enrolment
	LV5					Get to know the needs
	LV6					Participation in decisions



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QuIP/ Educators

Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
A	Q	Educators: Qualification of educators				
Q1						Professionals' / Educators' training
Q2						Knowledge about individual problems / needs of learners with HRC

Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
B	PA	Educators: Action by educators				
PA1						Individuality and resource-oriented feedback
PA2						Learners' diversity and support
PA3						Teaching technologically aided methods
PA4						Creativity
PA5						Learners' motivation



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Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
C	CC	Educators: <i>Creating and cooperating with structure and networks</i>				
CC1						Multidisciplinary working environment



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Area to be addressed		Action required	Target date for achievement	Milestones in achievement	Person(s) responsible	Criteria
D	LV(P)	Educators: <i>Learners' voice</i>				
	LV(P)1					Communication, dialogue and individual tutoring
	LV(P)2					Feedback
	LV(P)					Learners' educational process decision



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Best Practices List



1. Universität Salzburg, Universität 55-PLUS (Austria)

All courses are physically and digitally accessible for people with disabilities. An occupational health service (University of Salzburg), a psychological counselling service (City of Salzburg) and the Austrian Students' Union are also contact and counselling points for the participants of the University 55-PLUS. Furthermore, the University 55-PLUS has committees, the management committee in cooperation with the Participants' Council and the Teaching Forum, which work out solutions for specific cases.

Participants with disabilities are also actively involved in the above-mentioned processes through the participants' council.

Professional support is provided in class via facilitated access and individual solutions in consultation with the Uni 55-PLUS management.

University 55-PLUS would not exist without the teaching staff. Therefore, in 2020, the Teaching Forum was set up as a committee that meets twice a year for 2 hours to further develop the teaching offer according to the needs and requirements for 55+.

Salzburg Adult Education (SEB): 55-PLUS is a member and exchanges information with the members of the SEB in the regular meetings.

Uni 55-PLUS was established in 2012 as a life-long learning initiative at PLUS and will celebrate its 10th anniversary next year. The diversity (between 300 and 400 courses from regular teaching; 30 courses specifically tailored for 55+) and the low-threshold nature (access without a university entrance qualification is possible at low cost) make the offer so special in Austria and beyond for the participants, the university and the city and state of Salzburg.

Link: <https://www.plus.ac.at/uni-55plus/rund-ums-studium/lehrangebot-der-uni-55-plus/>

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2. Fachschule für Heilerziehungspflege (Germany)

The organization does training for teaching staff, change of methods, special aids (PC, visual aids, and enlarged worksheets).

The organization has a classroom which was moved to the ground floor so that the wheelchair users could attend lessons. Lecturers speak frontally to students so that they can read their lips, change methodology so that background noise is eliminated, worksheets handed out to students in greatly enlarged form.

The organization offers in-service courses if required. Every year, wishes can be expressed which will be reflected in the training programme.

Learners with HRC have the possibility of participating in different committees: Student representatives, course representatives, complaints management, which can be used to express needs and give feedback.

Good cohesion of the community and social cooperation and attention to each other, commitment to the person concerned is what the organization is proud of.

3. Münchner Volkshochschule (Germany)

The organization offers barrier-free accessible course locations, sign language interpreters in selected courses on request, guidance system for the blind in selected houses, courses with a slow pace and small groups, special courses for the hard of hearing, cooperation with institutions for the disabled.

The specialist area "barrier-free learning" develops offers specially tailored to different target groups. We also advise colleagues in the field when it comes to enabling people with disabilities to participate in courses in other subject areas.



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On the one hand, our department involves cooperation partners in the programme planning and, on the other hand, also asks the participants and multipliers about their needs.

The organization cooperates with Caritas, Lebenshilfe, Federation of the Blind, Association of the Deaf, residential homes, institutions for people with physical disabilities... the cooperation provides for meetings twice a year in order to ascertain the current status, further develop or redevelop courses. Tried and tested courses are consolidated.

Teachers are the be-all and end-all for the educational process, the most accurate planning possible in advance and the evaluation at the end of an offer are also very important factors.

Depending on the impairment, there are different requirements for course planning, course size, use of aids, assistance. For many people with disabilities - despite all the advantages of inclusion - a non-inclusive place of learning is better suited.



4. Vilniaus Gabrielės Petkevičaitės-Bitės suaugusiųjų mokymo centras (Lithuania)

There are specialists at our educational center (a psychologist and a social worker) providing help to students with health-related problems. They are full-time workers whose working hours are adjusted to the students' timetables and their work is organized according to the regulations provided in position rules. These staff members provide psychological and social help based on the needs at that time, also, together with other teachers' educational support is provided. Students are offered extra lessons, consultations and activities with specialists. Students study more than one year, so they get integrated into community, they achieve personal goals and improve according to their abilities.

Considering the needs and problems, challenges or situations occurred we organize courses where speakers from our school as well as guest speakers give talks.

We provide opportunities to study according to individual needs, and in these cases individual educational plan is made. The plan is made together with the student, teachers, help specialists, if necessary - parents.



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Based on their individual needs and health state, a student takes part in the process of preparing his/her timetable and educational plan. Together with other students they participate in formal and non-formal community meetings and activities. Students with health-related problems complete self-assessment questionnaires in the same way as other students.

We collaborate with other adult education institutions from Vilnius and other towns. We share our expertise and experience with these organizations as well as Pedagogical and Psychological Service if the student is a minor. We also collaborate with other organizations which provide social support, such as Caritas and the Red Cross. These partnerships allow to solve various problems of socializing, education; we collaborate with social workers representing the student.

Decisions on different aspects of educational process are made together. This includes forms, methods, improvement of accessibility and conditions, students' progress, evaluation or self-assessment.

Our uniqueness is our flexibility. We adapt to the needs, abilities and health-related problems of our students. We have students with mobility impairment as well as with serious mobility and developmental disabilities. We organize online training which meets their needs, we pick different subjects each year. We talk to their family members about the subjects our students would like to study, we make individual timetables and our students consult their psychologists, social workers or class tutor. We have had students with hearing or visual impairments or mental disorders. The key factor is working altogether to find the best approach, the best way to teach and learn and the best time for studying. This should be done considering individual needs. Also, it is very important to get those students involved in different events held in our center or various project activities outside the center.

Link: <http://www.gpbite.eu/en/>



5. Vilniaus suaugusiųjų mokymo centras (Lithuania)

We offer extra individual consultations to students given by class teachers, subject teachers and help providers.

Every year we organize courses according to personal teachers' in-service goals and priorities of the gymnasium. E.g., enhancing socio-emotional competencies, psychological resilience, ensuring safe environment,



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applying modern IT tools, challenges of distant education, positive communication, personal data protection.

Adult students with special needs are educated by using specific adapted curriculum, which is prepared by subject teachers based on recommendations of Pedagogical Psychological Service. The syllabus is prepared by a team of staff.

Different researches are carried out, the needs are identified and according to that the educational plans are corrected/adjusted.

We collaborate with other institutions, hold conferences, in-service trainings, seminars where best practices are exchanged.

Students are provided specialized help by professionals. Some students even graduate from school and are able to pass school leaving exams (adapted ones). Others fill out application forms where they ask to be released from examinations.

Link: <https://vsmc.lt/?lang=en>



6. Vilniaus "Židinio" suaugusiųjų gimnazija (Lithuania)

When a student starts studying at our school, we try to find out as much as possible about the reasons why they have chosen our school, how they have found out about our school, etc. Usually during such a conversation, we identify the health-related problems that the student has. So we can start providing help at that particular moment - we inform the class teacher about the health-related problems the student has. Then a class teacher can hold individual conversations with students concerning their emotional state at school, having in mind health-related problems they already had at the time they started their studies. Those with psychological issues may consult the psychologist on regular basis. If more serious problems occur, a special group is formed consisting of 5 competent staff members, they have a meeting where possibilities of helping such a student are foreseen.

Each teacher can decide which course to attend based on their own needs. In-service training is planned for 1 year ahead, but if the situation changes during the school year, a teacher can change or adjust the topics.



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A student can choose freely the best suitable study form - in the morning, afternoon or evening 4 days (5-6 hours each day) a week or 1 day a week (8-9 hours). If the health state is serious, or if the student is in the hospital, there is an opportunity to study online just join the lessons when it is convenient.

Students receive help from the tutor (group teacher). A student can approach any representative of administration; the telephone No of a school principal is provided on the school website so that the student could contact the head of school to avoid publicity. Students receive free psychological counselling; a student can be elected to the Student Board where urgent questions are discussed and suggestions are offered to administration or the School Council.

The organization collaborates and cooperates with other adult education institutions. In problematic cases, when a student changes schools, representatives of the former school get in touch with representatives of the new one and give comments on why the student had left, how they see the situation, both sides discuss various education and health-related questions. Collaboration with other institutions takes place based on the need, e.g., organizing common events, seminars, etc. in the town.

All the staff members have been trained accordingly and this allows them to work with such students. If a young teacher or a teacher who just started his/her career does not have such a qualification, he/she is offered such a course at the earliest possibility.

Staff are the main mediator between service provider (administration) and service receiver (a student). Communication is not complicated due to the fact that the school is not big. Teacher's opinion about the student with health-related problems is the most important one. Administration puts effort to fulfill the expectations of teachers.

Individual conversations with the student about who could help him/her and how. If the student does not have relatives or anybody else to help him, the support team from school recommend what specialist will help him/her.

Up to 95% of our school students with health-related problems do not stop learning (do not drop out) and successfully complete the course.

Link: <http://www.zidinio.vilnius.lm.lt/>





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7. VšĮ Soros International House (Lithuania)

We offer discount on courses, an opportunity to study online and a flexible timetable.

Students with health-related problems can study online. For those studying individually, adapted individual educational plans are prepared according to their needs.

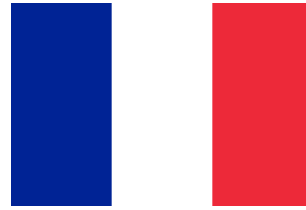
Students are constantly asked to evaluate the results achieved and the changes in the educational process. They fill out middle-of-year and end-of-year questionnaires, based on which teachers, trainers and administrative staff have discussions and individual talks and improve the educational process and interpersonal communication.

Link: <https://sih.lt/en>





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8. GIP FCIP de Créteil (France)

We provide upstream information where we invite people to report their possible disability. If necessary, we are able to adapt the pre-assessment tests. If necessary, we can approach organizations specializing in support such as Agefiph or FIPHFP. To do this, we have a disability advisor who is in contact with the teaching team. We can also take the necessary measures to adapt the pedagogy and make test taking accommodations (additional time).

Our organization offers training to our professionals in different formats. Indeed, we offer face-to-face training on subjects related to pedagogy, getting to know the audiences and also on the general professionalization of the actors. We also offer shorter and remote formats. We also offer exchanges of practices. We are also involved in European projects such as FESI or Erasmus + to improve our training services.

For the training carried out by the GIP-FCIP, some individualization is possible: it focuses on how to possibly adapt supports, the granting of longer deadlines, the pace of the training. However, there is no possibility to "choose among these courses"; the training is the same for everyone.

The evaluation of the learner's need is addressed during the collective information and individual interview with the trainee. No, learners do not participate in decision-making bodies but they evaluate their training and thus indirectly contribute to the decisions that concern them.

There are support organizations (such as Agefiph) which allow the trainee to be supported by offering many specific support services for all types of disabilities: visual, hearing, motor, mental, mental disabilities and cognitive disorders.

A dialogue with the pedagogical advisor, the training coordinator and the disability advisor (pedagogical accessibility and search for means of compensation)

It is important for the courses of course but the coordination team is essential to act as a link between the trainers and the different staff.

Our organization belongs to the public service of education. We are signatories of charters for equality and non-discrimination (Marianne Charter) and we are committed to a policy of universal accessibility.

In addition, we are committed to the Eduform process, which is particularly



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demanding with regard to beneficiaries with disabilities and which requires detailed evidence.

When recruiting trainees, during individual follow-up interviews, with the disability advisor. It is also possible on demand. The entire team (educational, administrative, etc.) works together.

Link: <https://www.forpro-creteil.org/>

Contact: <mailto:guytaine.traore@ac-creteil.fr>



9. GRETA MTE77 (France)

It is possible to appeal to the MDPH if appropriate equipment is needed. The adaptation of the schedules is implemented according to the needs.

All the courses are individualized according to the levels and needs of the learners. Positioning tests and individual interviews allow us to meet everyone's needs.

Link: <https://www.forpro-creteil.org/formation/greta/gmte77/>

Contact: <mailto:lvalleix@gmte77.net>



10. COS CRPF (France)

The professional training program is for all employees. The latest training courses attended: dys-type disability, support for people with autism or with severe learning difficulties (ABA method, emotions, etc.), dealing with conflict or aggressive situations.

Individualization must be part of the general framework of training periods but adjustments are possible, in particular with regard to skills certificates (it is possible to set aside some to focus on others, for example). Individualization must meet needs in terms of compensation for disability. Remote learning also helps promote individualization when the person experiences difficulties being present on site (30 to 60% of training can be done remotely).



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The needs are assessed on entry by the doctor, psychologist or occupational therapist. Some beneficiaries have carried out a diagnostic assessment which allows them to better target their needs. People with HRC are trainees like the any other and can run to become section delegates. or member of the Council for Social Life (trainee's representative body).

The COS has many partners in the field of support and calls on them for disability "expertise", taking over (social field for example), support towards employment (Pôle Emploi, Cap Emploi, Supported Employment System) or other. Partners are most often approached on a case-by-case basis, but relationships are maintained on a permanent basis.

The pedagogical team is at the center of the process; the medico-psycho-social team comes in support.

We distinguish ourselves by:

- A team of trainers experienced in working with people with disabilities, especially those with psychological disabilities (35% of our trainees),
- A systematic multidisciplinary work,
- A strong internal synergy favoring exchanges (of practices),
- A large network of partners to cover a wide range of problems for which external expertise is necessary (deafness, blindness, autism, etc.),
- a very wide range of services, from support for young people in specialized institutions, to support for work on a retraining project, to refresher courses, to remobilization, to training, etc., to support towards and in employment.

The work is always done in a multidisciplinary team (doctor, psychologist, occupational therapist, psychiatrist, integration counselor, trainers). The team involved meets during summaries where the situation of the person being supported is presented. The objective is to set up personalized support if necessary and to offer a personalized project taking into account their needs and expectations. The personalized project is revisited at least once during the course.

Recovery of self-confidence, resolution of peripheral problems that may have disrupted the training, relatively low absenteeism rate (5% maximum).

Exam success rate is around 95%, insertion rate is around 75%.

Link: <https://www.cosformation.fr/>

Contact: mailto:echoquart@fondationcos.org





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11. Greta MTI 94 (France)

The GRETA MTI 94 disability advisor meets the person to identify possible support: adjustment of the training schedule, additional break time.

The trainers have clearly identified the disability advisor. They are regularly informed about training related to disabilities or health problems. To date, we have not offered training on the issue of learners with HRC but rather discussed possible arrangements. In particular, about a trainee with severe sickle cell disease.

In each training course, a trainer is appointed to follow the trainees individually. In each training course, there are 2 trainees elected by all the trainees and they are responsible for representing them.

We individualize the training courses as much as possible with regard to the needs and constraints of the trainees with the objective of obtaining a certification and a professional integration. We propose tests before the training, but also an individual interview to identify possible obstacles. Individual interviews are planned to best meet the needs of the trainee. Adjustments to the course can be offered.

Link: <https://www.forpro-creteil.org/formation/greta/gmti94/>

Contact: <mailto:carole.florestano@gretamti94.fr>



12. EPIDE (France)

90 to 100% professional integration over the 3 months following the end of training.

Diagnostic assessments at the start of the course then setting appropriate objectives, reviewed periodically. Team assessment after 1 month of training to share diagnoses.

All the people admitted have the right to participate in the life of the organization, through representatives who meet periodically as an Advisory Commission.

Adaptation as much as possible of session time, furniture etc.

The establishment offers academic refresher courses in order to access a training course or employment. For a maximum of 120 young people, we have 4 general education trainers, 1 sports trainer, 1 mobility trainer, 1 computing trainer.



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Comprehensive care for health, social and professional projects over a long period of time (8 to 10 months on average), with boarding facilities.

Individualization is thought out with the young person as soon as he/she arrives, regular individual meetings with the person in charge of the program.

Link: <https://www.epide.fr/>



13. Greta metehor (France)

Integration of adults living with disabilities that have official recognition, support from CAP EMPLOI and Agefiph, Pôle Emploi.

With accessibility of training, adaptation of rhythms and durations, some measures are offered: schedules over 2 years instead of 1 year; personalized integration and identification of adaptation needs, accessibility of supports.

Grid for identifying needs and adapting the training plan during the recruitment phase; monitoring grid with individualized interview; meditation through internship tutors.

By joint response to calls for tender, and collaboration during the course.

A trained teaching team, a personalized follow-up, adapted teaching methods and follow-ups during internships.

By individualized interviews at the start, middle and end of the course; implementation of compensatory measures; partnerships with disability stakeholders.

90 to 100% professional integration in the 3 months following the end of the training.

Link: <https://gretametehor.com/>



14. GMTE 93 (France)

Learners are referred to our disability advisor who is in charge of presenting all the support they are entitled to.



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All training that addresses the evolution of knowledge and practices as well as trainings to better understand the needs of learners.

All the training plans are individualized. Each learner advances at their own pace. We offer full-time courses that are less than 30 hours per week, and part-time courses adapted to the learner's state of health or to his learning pace.

Learners elect class delegates, with or without health problems. These delegates bring up the demands and needs of other learners in the same group. The learners have regular meetings with the training coordinator, the trainers or the professional integration adviser. We carry out 2 assessments during the training: the trainees can express themselves on this occasion.

The role of the teaching team is essential. Educational meetings are organized to allow trainers to communicate with each other on the problems encountered and the solutions to be implemented in order to help the learners.

Our organization is unique, firstly because of the individualization of our courses, secondly because of our learning method based on the use of a virtual company, and finally because of the support and follow-up that all our learners benefit from during the training and also after.

Link: <https://www.forpro-creteil.org/formation/greta/gmte93/>

Contact: <mailto:hmuller@gmte93.fr>



15. Greta des Yvelines (France)

We have developed a document to guide us in diagnosing the disability support needs necessary for any person with a disability entering training. The "span" of this document is wide and allows us to identify and address to the following points: adaptation of schedules, learning methods, taking exams, training materials, acquisition (with help from Agefiph) of specific equipment (computer screen, reading software, chair, etc.), support during internships, etc.

The trainings are open to all trainers: the basics (office learning, conflict management ...) and specific such as the digitalization of training, and, more specifically for our Educational Training Company, the training of trainers in EEP (Educational Training Company). In addition, there are information and awareness workshops: disability, quality approach, safety.



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All our courses are individualized according to procedures defined in our ISO quality procedures. Individualization covers many aspects: training subjects, duration, learning methods.

Learners have regular individual reviews with the teaching team to assess and adapt the courses. Everyone, without distinction, has the opportunity to participate in decision-making bodies.

We have partners all over our territory: training organizations, companies and work integration sites; and we collaborate with the social workers and counselors who accompany the trainees.

The rights are the same for everyone: regular scheduled appointments and, at any time, the possibility of meeting an educational coordinator to express more personal needs. In addition, we have a disability advisor, whose contact details are communicated to all people with health problems, who meet them as much as necessary and at their request.

Our practices regarding disability have developed (and are still developing!) thanks to the work we do within the Educational Training Company.

Support is provided through face-to-face or remote interviews.

We notice that people regain confidence in themselves because they participate more actively in the actions carried out collectively.

Link: <https://www.greta-yvelines.fr/4-accueil>





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16. ΚΕΔΙΒΙΜ-1_ΕΔΡΑ (Greece)

Employment enhancement and women with disabilities. It regards a set of actions aiming at promotion of women's creativity and their involvement in entrepreneur activities. It offers resources and tools to professionals who are willing to support women with mental retardation and who have experienced domestic or gender violence, allowing them to improve their quality of life developing certain skills and competences.

It supports these learners groups through Art and Civilization programmes but also recently through a programme promoting sports activities to long-term patient from deinstitutionalization centers.

Link:<https://www.edralearning.gr/index.php/el/>

Contact:<mailto:edralearning@gmail.com>



17. Escuela de Personas Adultas de la Verneda-Sant Martí (Spain)

A member of the team monitors 'specific cases': people who, due to health, social or personal situations, need support for learning. Both individual monitoring and coordination with reference entities, tutors or families is offered. We also have an 'affirmative action' commission made up of researchers, participants (students) and experts, to assess cases in which exceptional affirmative action measures need to be taken.

We offer training based on Dialogic Learning and Successful Educational actions, researched in the INCLUDE-ED project (2006-2011) and identified as actions that improve educational success and promote coexistence for everyone, in all contexts. One example are the interactive groups, which



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have demonstrated their impact on people with and without health problems.

At the beginning of the course, people who come to enroll are welcomed with the support of technical staff and participants (students) from previous courses, who can help and advise them. It is important to always promote maximum learning impact. If necessary, a coordination with the entity/professional referent can be made, but as we are dealing with adults, the beneficiary person must be present in this coordination, and the final decision will be theirs as an adult, because of the equal dialogue.

People with health problems can participate in all educational (volunteering, projects), decision-making (assembly, board, sleep-in day...) and organizational spaces (women's group, multicultural group and other committees), just like people who do not have health problems. In fact, on the board of the association that manages the school (with a total of 5 people) there is 1 mentally disabled person and 1 physically disabled person.

In the health sphere we collaborate with:

- PHCC (Primary Health Care Center). We hold a Dialogical Literary Gathering, to which doctors refer people with health problems.
- Mental Health Center 'Forum's center: We hold a Dialogical Literary Gathering at the Mental Health center.
- Neighborhood health services: We coordinate the 'Enredando' project, which consists of collaboration between neighborhood volunteers, organizations, health services and social services. The aim is that the health and social services can recommend educational and leisure resources, etc. offered by the organizations to people with social or health problems.
- Researchers and experts who form part of the school's advisory board and advise the coordination when necessary.

Follow-up of specific cases by a professional person (e.g. social educator, social worker...). Technological support if necessary (e.g. a laptop or tablet to be able to zoom in on the materials). A volunteer facilitates the interactive groups so that all the people can participate from an equal dialogue, including people with health problems. Coordination with the PHCC and the Mental Health Centre.

People with health problems can access the same courses as people without health problems, with successful results.

Teachers (both hired personnel and volunteers) have organizational spaces in which they can contribute to the improvement of the courses and can also be trained:

- COSE: Weekly coordination for the day-to-day management of the school. It is attended by all members of the team and is open to volunteers and participants (students) who wish to attend.



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- COME: Monthly coordination for volunteers.
- Pedagogical coordination: quarterly meeting of team members and volunteers from each area/ course.

La Verneda- Sant Martí Adult Education School is an international benchmark and was the first educational experience in Spain to be published in the Harvard Educational Review. Moreover, it was the first Learning Community which were later researched in the INCLUDE-ED project (2006-2011) and identified as transferable actions that improve instrumental learning while promoting solidarity and coexistence in all contexts. Therefore, it is a school that bases its actions on scientific evidence and this is how it has improved the educational level and the inclusion of people with and without health problems for more than 40 years.

The impact of the school on people with special educational needs has been researched and published in high impact scientific journals indexed in JCR and Scopus.

The school is also a reference in terms of democratic participation of students in the decisions, organization and evaluation of the school, activities and projects, etc. The school has been cited in scientific articles as an example of the Democratic Adult Education Movement in Spain. One example is that two people in the board are students with a disability.

Link: <http://www.edaverneda.org/>

Contact: <mailto:agora@edaverneda.org>



18. Universidad de Extremadura (Spain)

There is a student care unit that evaluates and advises each case individually, offering a response and attending to the health conditions of each student.

On the basis of the report made by the student care unit, the suggested recommendations are implemented.

There is a constant monitoring and communication with this student care unit.

It will depend on how you engage in the process, but there is a lot of empathy and awareness of these situations.



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The existence of a specialized unit dedicated to the assessment and evaluation of each individual case.

19. CFA Can Folguera (Spain)

In most of the courses a 75% attendance to the classes is required in order to be evaluated (our courses are taught in person). In the case of people with health problems and if they justify it, this percentage can be lowered to 50%. If, exceptionally, a student must be hospitalized or has to stay at home for a certain period of time, the teachers keep in contact with the student via e-mail in order to monitor his/ her work outside the center. In the case of students with intellectual disabilities, the level of demand in the evaluation tests is lowered.

Students with HRC can participate like any other student by being a delegate or sub delegate of their class group or by standing for election to the School Council.

We collaborate with other adult schools to organize extracurricular activities together and with other educational centers that provide us with space.

20. CFA La Llagosta (Spain)

The institution provides special help in a number of cases depending on the condition. If it is mobility, we change classrooms so that they do not have to climb stairs (we do not have an elevator). If it is visual or auditory, ONCE does not usually provide material (software and other elements). If it is a moderate intellectual disability, we provide attention to diversity in the classroom and school.

Yes, as long as their cognitive abilities are not impaired (e.g. Alzheimer's or others). We adapt our curriculum and methodologies to their learning needs.

We meet with these students and their teachers to coordinate and address their needs.

21. Ami3 (Spain)

Students are provided with an environment conducive to learning with supports specialists.

Classes are usually common. Students are divided into groups according to their cognitive level.

We do evaluations. The evaluations are conducted by an expert. Interviews are conducted with families and students themselves.

We are part of 'Plena inclusion Spain', which is an associative movement that fights in Spain for the rights of people with intellectual or developmental disabilities and their families.



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There is a great diversity of specialists: speech therapy support, physiotherapist, psychological support, motor assistance. They have specific weekly hours dedicated to these supports.

Our organization considers the needs of students and participants. It is focused on what they want; we listen to them. And that's something that other institutions that work with adults with intellectual disabilities not always do.