

Developing a European practitioner qualification: the TRAVORS2 project

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The final version of this article has been published in *Research in Post-Compulsory Education* 18 (3), 295-306 (2013). Copyright reserved.

Abstract

The TRAVORS projects, supported by the European Union's Lifelong Learning Programme, ran between 2008 and 2012. Their object was to develop training programmes for disability employment practitioners across nine countries, based on proven approaches both to vocational rehabilitation and to skills training. The second of the two projects aimed to trial and establish a European practitioner qualification, pitched at level 5 of the European Qualifications Framework and emphasising skills-based training and workplace assessment. While the trials proved successful, they highlighted a generally poor level of understanding of assessment and certification based on workplace proficiency. The project resulted in a common 'curriculum,' a detailed qualification specification, and a strengthened set of processes to guide implementation in different countries. However, the qualification can be considered a work-in-progress and wider uptake – sufficient to support sustainable central governance – needs to be achieved if a genuinely international certificate is to emerge.

Key words

Vocational rehabilitation; European collaboration; qualifications; international validation; work-based assessment.

Introduction

The European Commission's Lifelong Learning Programme (operational between 2007 and 2013) provided part-funding for projects that involve collaboration between different European Union member (and candidate) countries. One strand of the programme, Leonardo da Vinci Transfer of Innovation, supported the transfer between countries of innovative developments in vocational education and training¹. In 2008 a project was approved to transfer, from the United Kingdom (UK) to four further countries, a tested approach to training front-line practitioners in the field of vocational rehabilitation. Following its successful completion, a further project was funded to expand the approach to additional countries and develop a practitioner certificate to accredit participants to a common standard. This second project used as its inspiration the highly successful European Computer Driving Licence (which started life as the product of a previous Leonardo project), but with an emphasis on workplace skills and competence.

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¹ Details of the Lifelong Learning Programme are available at <http://eacea.ec.europa.eu/llp/>

Vocational rehabilitation

Vocational rehabilitation (VR) is concerned with the sustainable return to work of people who are disabled or have suffered health problems. It is gaining an increasingly prominent profile across Europe as efforts are made to improve access to mainstream work and careers for people with disabilities, rather than relying on supported employment or indefinite continuation on state benefits (e.g. Sayce 2011). The low employment rate of disabled people across the EU – and high discrepancy with that of non-disabled people (Berthoud 2006, Shima, Zólyomi & Zaidi 2008) – underlines the importance of effective VR from both a social and an economic viewpoint. The pace and direction in which VR policy and practice have evolved differ between countries and contexts, but broadly speaking the most developed models are client-centred and negotiated rather than clinical or prescriptive in approach, involve enhancing people's motivation, confidence and self-reliance as well as successfully engaging employers, and include the management of individual cases from inception to satisfactory conclusion (Shaw *et al* 2001, Imber 2011). At the other end of the spectrum models persist that are based on categorisation of disability and referral to prescriptive programmes, with little reference to personalisation or encouraging individual initiative.

The pool of people involved in VR can include social workers, occupational therapists, general medical practitioners, nurses, psychologists, careers advisers, counsellors, insurance claims assessors, specialist tutors, and employers represented by managers, personnel professionals and business owners. In addition there are VR-specific roles such as case-managers and disability specialists who work in employment agencies, return-to-work providers and independent practices; these may work with individuals to oversee the process of seeking, finding, settling into and modifying work, as well as working with employers and co-ordinating the services of other professionals. The range of specialisation and levels of proficiency among practitioners is extremely broad, so that for instance while there are highly professional VR specialists, there are also professionals involved in VR who are highly knowledgeable in relation to disability from the perspective of their own fields but whose skills in terms of supporting return to work are less developed; and in addition staff in organisations such as employment services, insurance companies and educational institutions who lack disability or VR training may become involved in aspects of VR work.

Education and qualifications in vocational rehabilitation have been slow to evolve. In the UK for instance there are a small number of postgraduate courses, as well as an association – the Vocational Rehabilitation Association (VRA) – which while providing a forum for practitioners does not act as an educational or qualifying body. Two international certificates, for return-to-work co-ordinators and disability management professionals, have been developed by the National Institute of Disability Management and Research (NIDMAR) in Canada, but these are knowledge-based examinations designed principally as add-ons for health professionals. Several countries have legislation that stipulates minimum VR service provision, but there are few requirements relating to the qualifications or training of practitioners. An exception of a sort is where certain VR functions are required to be undertaken by members of specific professions, for instance social workers or occupational psychologists.

As a result Europe currently lacks any form of recognised professional standard for VR practitioners, or consensus about the training or certification that is appropriate to them. The absence of agreed professional structures in most countries suggests that working towards a formal process for mutual

recognition of professional qualifications or status is unlikely to succeed other than in the very long term. Given the mix of practitioners involved in VR this may not be a particularly feasible aim in any case, at least until there is some agreement about different VR-related roles. At present therefore the main opportunity to develop transnational qualifications in this field is through collaboration between rehabilitation organisations and education and training providers.

The TRAVORS projects

In the UK, the Department for Work and Pensions (DWP) has developed a training programme for employment service advisers that is skills-based, follows an evidence-informed methodology, and is regarded as highly successful in enabling practitioners to be effective in front-line roles (see Booth & James 2008). In addition a private sector VR provider, Rehabilitation Network Ltd (RNL), set up an on-line and mentored programme for practitioners, based on researched, client-centred approaches to VR, and backed by university certification at undergraduate and postgraduate levels. Building on these programmes a project entitled TRAVORS (Training for Vocational Rehabilitation Services) was funded in 2008 through the Lifelong Learning Programme to transfer aspects of the DWP and RNL approaches to partners in Austria, Estonia, Greece and Spain. This project focussed on enhancing the skills of practitioners from a range of VR contexts (Booth 2009). Following successful completion of TRAVORS, a follow-up was initiated with a further group of partners, with the addition that the new project would result in the development of a skills-based basic practitioner qualification validated in the participating countries and suitable for roll-out more widely across Europe.

Table 1. TRAVORS2 project timeline

Oct 2010	Project inception and desk research Development of outline models		
Jan 2011	Prague , Czech Republic: inception meeting and explanation of principles		
	Learning needs analysis	In-country research and exploration of validation options	Development of qualification structure and operating principles, assessment principles
July 2011	Siauliai , Lithuania: project meeting		
	Learning needs analysis	Partner discussions with validating organisations in each country	Development of qualification detail, training modules and candidate guidance
Nov 2011	Exeter , UK: session for trainers/assessors		
	Development of training programme and sessions with support from transferring partners Training trials in each country		
Apr 2012	Bled , Slovenia: project meeting and reporting on trials		
	Evaluation of trials	Validation and certification	Revision of specification
Sept 2012	Ankara , Turkey: final project meeting and dissemination conference		
Sept 2012	Final report and project closure		

TRAVORS2 commenced in October 2010 with participation from the Czech Republic (a private training provider and projects organisation), Lithuania (a social-sector educational projects organisation), Slovenia (a university rehabilitation institute), Turkey (a university special education department) and the UK. The UK partners comprised RNL (leading the project) and DWP, plus the author's firm, an education consultancy providing expertise in qualification development, assessment and validation. The three UK providers principally provided expertise and resources while the four non-UK partners implemented the training and qualification; RNL was also involved in trialling so that the trials took place in all five participating countries. The basic structure of the project is shown in table 1.

Developing the European Practitioner Certificate

A rough outline for the TRAVORS2 qualification started to emerge following discussions between the author other project partners in the early stages of the project. It would need to focus on practitioner skills rather than theoretical knowledge (reflecting the 'skills first' approach used by DWP); be accessible to front-line practitioners from a range of backgrounds and with different levels of educational achievement (for instance including social workers, occupational therapists, vocational teachers, claims assessors and employment advisers); and contain enough options to enable a variety of VR activities to be covered. The provisional content for the qualification would come from the first TRAVORS project, subject to needs analyses in each partner country. The model that took shape for initial presentation to partners was based on key areas of practice, centred on an assessment specification rather than a prescribed syllabus or training programme, and was designed so that assessment focused on candidates' workplace proficiency. This general approach is familiar in the UK through the growth of National Vocational Qualifications (NVQs) from the mid-1980s onwards (Raggatt & Williams 1999), and while it has suffered at times from poor design, clumsy execution and inappropriate application, it has also been applied more thoughtfully and successfully including to professional-level qualifications (e.g. Fowler, Chappell & Chase 1997, Lester 2001, and see Young 2011 for a contemporary discussion). Although some of the principles are supported by the European Qualifications Framework (EQF) and have been promoted by the European vocational training agency CEDEFOP, as a model it has seen much slower uptake outside the UK and it was not familiar to most of the project partners.

The first project meeting, in Prague, introduced partners to the vocational rehabilitation and training design approaches that had been developed through TRAVORS (TRAVORS 2010, Birkin *et al* 2011a), as well as presenting and discussing ideas for the qualification design. Partners endorsed the practice-based approach and flexible design, but also identified a need to be able to certificate basic VR skills and understanding for new practitioners who were not yet in a position to demonstrate their proficiency in the workplace. Secondly, while the need for a common assessable specification was accepted, there was a strong preference – for reasons of both credibility and practicality – that the qualification should be validated separately in each country. A core-and-spoke model was therefore agreed in which a definitive specification would be developed at the cross-partner ('European') level and managed by the project steering group (basically the partner representatives who attended the regular meetings, with the executive work carried out by two of the UK partners), while each partner would translate the specification and (within set limits) adapt it for validation and provision in its own country. In this respect it has some similarities to the European Computer Driving Licence (ECDL), where the qualification is specified centrally but validated in each country. The

initial working title which reflected this connection, 'European Employment Placement Driving Licence,' was however thought to be potentially confusing and was replaced by 'European Disability Employment Practitioner Certificate,' abbreviated in the project to EPC.

Following the meeting, partners were tasked with a number of pieces of work to inform the development process. Two of these were investigative activities, to research and present the legislative framework for the employment of disabled people in their countries (including any requirements relating to the licensing of practitioners or restrictions on their training), and to identify potential validating bodies and their requirements. As mentioned in the introduction licensing is largely absent; the exceptions that were identified were a Czech requirement that some VR activities are undertaken by a qualified social worker, and in Lithuania regulations requiring specific approvals for courses and certification to form part of the training or accredited professional development of social workers. Investigations also confirmed a basic lack of training and certification for people involved in front-line rehabilitation work, particularly if they were not already health or social work professionals.

At a broad level three validation models were identified. In Turkey and Slovenia the partners would be self-validating, requiring approval from the university's academic board and the director of the institute respectively. In Lithuania and the Czech Republic the normal model was for providers to be authorised by the relevant government department to award certificates; the Lithuanian partner (a voluntary-sector 'public institution') already held authorisation at a general level for certificates of 'informal learning,' while the Czech partner needed to put a specific programme forward for validation. The third model, used in the UK, was for a third party (a university, professional body or vocational awarding body) to provide certification. While UK validation was explored with two potential university partners and appeared workable (if subject to high initial costs), the practical nature of the qualification favoured the awarding body route; RNL opted to work with Edexcel via TADCO, a private training provider and Edexcel assessment centre.

The third partner activity, supported by guidance from DWP (Birkin *et al* 2011b), was to carry out a learning needs analysis (LNA) once the target group had been identified for the trials, with the primary aim of informing the training content and design (and the EPC units to be covered). It was also intended that the LNAs would contribute to the detailed content of the qualification by analysing the roles of practitioners in different contexts. In the event the analyses provided only limited information towards the latter end, partly because some of them were not complete by the time that the units had to be ready for the trials.

A more concrete qualification specification was drawn up for presentation to partners at the second meeting. A central need emerging from partners' LNAs was to cover essential VR skills, ethics and contextual understanding, with actual areas of practice differing slightly between partners. After discussion of requirements it was agreed to create a compulsory core of professional skills, principles and ethics, plus sets of learning outcomes for five key areas of practice (table 2). Some debate ensued about how to capture and integrate these different aspects into an assessable specification, with preferences being expressed variously for specifying skills and ethics in an unit of their own, integrating them into the practice-based areas (for a discussion of these approaches see Steadman *et al* 1994), or treating them as an overarching requirement to be assessed in conjunction with the practice-based areas (cf Lester 2001). While the latter solution was preferred from the perspective of

making the qualification holistic and robust, the idea of a unit-based qualification – with the different areas of practice representing units that could be chosen by participants – pointed towards the core requirements being specified as a separate but integratable unit. The proposed rule for award of the EPC became achievement of the core unit plus at least one of the areas of practice, with the certificate stating which practice-based units had been achieved. Initially it was proposed that the core could be assessed through classroom-based methods if needed (e.g. to allow it to be offered as a stand-alone unit for those new to VR work), while recommending that in normal circumstances it is assessed in work alongside one or more of the practice-based units.

The proposed level of the qualification was decided by reference to its potential client-base and the desire to focus on practical skills. The draft learning outcomes showed a good match to EQF level 5 – parallel with sub-degree higher education – which was also consistent with maintaining an emphasis on skills and providing access to non-graduates, while also allowing the qualification to be validated through the university system where needed. Credit-ratings in the ECVET (vocational) and ECTS (higher education) systems were also proposed based on the average learning time it would take for a relatively new practitioner to develop to a competent level; this was originally calculated separately for each unit, although following the revision of the EPC at the end of the project the units were recommended to be validated at 5 credits each (10 credits in the UK system).

The second project meeting, in Siauliai (Lithuania), enabled the draft qualification structure to be presented and agreed by partners. It also included individual clinics on validation and a session on the principles of work-based assessment, the latter drawing mainly on practice in UK work-based qualifications and professional practising assessments. A set of seventeen outline training modules were also presented that supported the qualification units via a matrix relationship: some modules were relevant to more than one unit, and partners could draw on and adapt module content depending on participants’ chosen units and current levels of experience and skills as identified through the LNAs. Each module was backed by an extensive library of resources and exercises developed for the RNL course and the first TRAVORS project; partners were free to translate these or develop local alternatives. Following the second meeting a detailed qualification specification was circulated for use in the trials.

Table 2. The European Practitioner Certificate in Disability Employment

Unit	Title
1 (core)	Professional skills and ethics
2	Engaging with client communities
3	Enabling clients to find work
4	Supporting clients in work
5	Supporting employers to employ disabled people
6	Case management

The trials and beyond

The trials started with a three-day briefing and guidance session in Exeter (UK) attended by partners’ trainers. Sessions on the design and construction of the training drew on DWP’s training design principles (Birkin *et al* 2011a), and also explained how to use the learning needs analysis to select the appropriate qualification units, identify the learning needed (as opposed to areas where learners could

be assessed directly), select, adapt or create relevant training modules, and create a training plan. The assessment session followed the principles explained at the Siauliai meeting and emphasised the need to ensure validity, robustness, consistency, authenticity (including assessing the candidate's work rather than the systems and procedures they work with), and fairness and accessibility (Lester 2011). Participants were taken through the process of assessing a practitioner for two EPC units, and were also given an opportunity to assess and comment on a VR practitioner conducting a return-to-work interview. Finally, a short session explained how the training would be tracked and evaluated using pre- and post-programme measures as well as the more usual qualitative feedback.

Trials were held in each of the partner countries, with eight trial groups comprising in total 79 participants from 17 organisations (see table 3). Most partners covered the core unit plus one or two practice-based units in their trials. Partners approached the trials in a way intended to balance local need with the requirements of the project, so that the trials were carried out in varied settings using different approaches. The Czech partner ran a single programme of two three-day sessions for participants from four different employers from the public and voluntary sectors; the Lithuanian partner ran programmes for two separate groups (social workers from a psychiatric hospital and tutors from a vocational college for people with disabilities); the UK programme provided six one-day sessions for claims assessors from an international insurer, plus one-to-one support and assessment for two individual participants from a health trust; the Slovenian partner provided in-house training and assessment for three small groups of staff; while in Turkey a short course was provided for participants from public bodies, universities and colleges (the Turkish partner's project staff were relocated to another university midway through the trials, limiting what they were able to achieve).

Table 3. Trial participants and employers

	Number of groups	Number of participants	Number of employers	Contexts
CZ	1	13	4	Civic and voluntary disability and employment services
LT	2	24	2	Specialist vocational college, psychiatric hospital
SI	3	10	2	Rehabilitation service, hospital
TR	1	19	7	Government and civic agencies, universities
UK	1*	13	2	Insurer, health service
Total	8	79	17	

* Plus two individual participants

Evaluation of the training was highly positive. Participant and employer feedback indicated that the programme was directly relevant to participants' work; the quality of training, content and materials were highly rated; participant skills were enhanced, according both to participant and employer feedback and to pre- and post-programme self-assessments; and where information was available, a positive impact was noted on participants' work. Increases in skills and confidence were particularly strong for people such as claims assessors and vocational tutors who lacked any VR-related training. Greater difficulty was experienced with assessment, and in particular negotiating access to participants' workplaces – or to materials produced in the workplace – to carry out assessment. In the event only two partners, in the UK and Slovenia, carried out practice-based assessment and both needed to vary from the originally-proposed assessment design, particularly in respect of observed interviews with disabled clients.

Post-trials, partners planned to take the training and qualification forward in various ways. The Czech partner was in the process of gaining validation through the Ministry of Education, Youth and Sport for a certificated continuing professional development programme which it would then make available commercially. In Lithuania the programme was welcomed as the first in-service, certificated course in VR; the partner was planning to apply via the Ministry of Social Security and Work to validate it as a formal qualification, using the EPC specification and assessment methods. In Slovenia the programme was viewed primarily as an addition to the institute's in-house training portfolio, as well as extending it to staff of the national employment service and other rehabilitation providers. Because of the changes previously referred to the situation in Turkey was less well-developed, but there was interest from the national Ministry of Education in developing a programme and qualification to increase (and provide professional recognition for) the currently limited number of disability employment advisers. In the UK plans were in development to offer the qualification both as a group programme for organisations as well as making it available to individuals through one-to-one support; RNL had also engaged with organisations in five additional countries that were interested in offering the programme.

The EPC post-trials

Following the trials, feedback from partners and experiences of using the qualification and training materials were collated to make revisions to the design and documentation. Some changes were made to learning outcomes within the six units, and the content of the 17 training modules was repackaged under the unit headings to make it easier to follow and use. Some partners had identified contexts where it would be useful to run the course without work-based assessment, potentially leading to certification for informal learning rather than certification of a standard of practice as represented by the EPC. This resulted in the biggest overall change, to enable the same specification to be used as a training programme alone or as a formal qualification. For EPC assessment, more emphasis was placed on alternatives to live observation, such as real interview notes backed by simulated sessions (as used in the UK trials) or audio rather than video recordings (Slovenia).

The revised EPC manual (Lester, Chapman & Imber 2012) therefore effectively offers two interrelated products for partners to take forward, i.e. the TRAVORS2 training programme which if desired can be validated to lead to 'soft' certification according to local rules (e.g. as an 'informal programme,' as is being done in the Czech Republic), and the European Practitioner Certificate which provides 'hard' certification through work-based assessment (as in the UK). The learning outcomes and structure are common to both, enabling participants to complete the training only, go on to formal assessment, or (if they are sufficiently experienced) be assessed without undertaking training. This solution meets a variety of provider, employer and participant needs while distinguishing between the training programme and the qualification, maintaining common content and standards, and preparing the ground for wider roll-out of the qualification post-project. As well as the qualification specification, the manual contains guidance on learning needs analysis and diagnostic assessment, training design, and work-based assessment, plus a series of forms and resources for use in training and assessment, and a comprehensive quality assurance and monitoring checklist for each part of the process.

Arrangements for management of the qualification and programme at an international level are currently vested in an embryonic managing agency that is the successor to the project steering group, with the UK partners acting as the executive. The role of this agency is to promote the EPC and the associated training programme, to provide basic advice to organisations wanting to offer it, to assess applications, to license organisations to offer the training and qualification, and to monitor standards on an ongoing basis. The agency doesn't act as a validating body for certification, and doesn't in itself provide training or consultancy to potential licensees, though this is offered by constituent partners. The agency will be funded through licensing fees from organisations wanting to offer the EPC (or the programme alone), so its sustainability – and the EPC's success as a standardised international qualification – will depend on the level of additional uptake post-project. An alternative scenario is that there is insufficient interest to fund a central monitoring role, and what is currently the EPC becomes taken forward separately by each partner according to its own interpretation.

On reflection

In addition to transferring the VR and training design principles developed through the first TRAVORS project to further partners, TRAVORS2 set out to establish a European practitioner certificate along similar lines if on a smaller scale to the European Computer Driving Licence. In retrospect this second aim proved to be too ambitious, particularly given the different starting-points of partners and their understandings of what might be meant by practitioner certification – ranging, for instance, from a non-assessed course with a certificate provided at the end through to rigorous assessment of what the practitioner could actually do in a work role. The project transferred three major principles (relating to VR practice, training design and delivery, and work-based assessment), which resulted in what was probably an overload of detail for partners to absorb. Added to this, while the project drew on its predecessor for content and training methodology, the qualification itself was new and needed to be developed within the project.

In reviewing the project, it was apparent that while all partners were experienced in designing and delivering training (if not in every case the kind of skills-focussed training promoted in the project), experience of providing qualifications was more limited and none of the five implementing partners had more than basic experience of assessing and validating practitioner competence in the way envisaged for the EPC. On balance therefore the allocation of time at the beginning of the project for explaining and exploring assessment and validation could usefully have been increased. The reluctance of two of the partners to assess participants would probably have been overcome had the importance of assessment been emphasised from the outset, along with more time being given to assessor training in the preparatory workshops; this was to an extent crowded out by the volume of material needing to be transferred.

More positively, the project has produced and gained acceptance for a common but flexible curriculum for developing the skills of VR practitioners, a set of documented processes to guide high-quality implementation, and a qualification that can be validated in different countries' education systems. According to partners' researches it is the first VR programme in the participating countries to be validated through the vocational education and training system, and therefore accessible to non-graduates as well as to graduates and qualified professionals. RNL, the only partner to carry out trials in both TRAVORS projects, commented that the programme is now more refined, more appropriate for the target group, and more sharply focused.

Conclusions

The TRAVORS2 project started with an ambitious aim to establish a European practitioner qualification with wide applicability at what might be considered a paraprofessional level in the field of vocational rehabilitation. Its more realistic outcome is that it has developed the qualification to the point where it is ready to be implemented more widely, while introducing a new, distinct and well-received programme in the five partner countries. An examination of other Transfer of Innovation projects with qualification aims – such as EUSAFE, mature@EQF, Quadultrainers, Business International for SMEs, and PETAL² - indicates that this result is realistic for a project of this size and duration; where greater depth or breadth of impact has been achieved, this has usually been done via an existing network that is already geared up for implementing the programme or qualification.

A major issue with limited-duration funded projects is the sustainability of the outcome, particularly where there is no immediate embedding into national or sectoral systems via uptake by large or otherwise influential organisations. Dissemination of the EPC will, initially at least, depend on its attractiveness to the partners as a commercial offering, and to client organisations as a means of developing staff in the VR field. The current picture in this respect is positive, although it is perhaps less clear how much partners will want to invest in maintaining a common European standard. Nevertheless, the TRAVORS2 project and its predecessor can be seen as the launch-pads for the longer term development of the EPC, in directions which include commercial exploitation of the existing product, potential embedding into national employment services, and the development of future projects. In relation to the latter, one direction that is currently being explored is delivery via workplace coaching and mentoring, while another that has gathered support from organisations across eleven countries is the creation of a European competence framework for VR practitioners.

The innovative aspect of TRAVORS2 has principally been within its sector, where the EPC represents dissemination of effective VR and training methods as well as a new type of qualification with appeal to a wider market than traditional university-based VR training. Beyond this it has demonstrated how an effective intervention in the vocational education and training (VET) system can be created by a group of organisations none of which are traditional VET providers, including four that fall into the 'small enterprise' category. Given wider uptake particularly by major employment agencies and insurers – something that can only be aspirational at this stage – it also suggests an alternative route to international comparability where a formal process for mutual recognition of qualifications is impractical.

Acknowledgements

The author acknowledges the extensive contributions to the project described in this article by the project partners, which in addition to the author's firm were the UK Department for Work and Pensions, VŠJ Edukaciniai projektai, Merosystem SRO, Rehabilitation Network Ltd, Selçuk Üniversitesi, and Univerzitetni rehabilitacijski inštitut Republike Slovenije – Soča. The project was funded with support from the European Commission's Lifelong Learning Programme. The article reflects the views only of the author, and the Commission or the other partners cannot be held responsible for any use which may be made of the information contained therein.

² Details of these and other projects are available on the ADAM database, <http://www.adam-europe.eu/adam/>

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