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Supporting opportunities for adult readiness (SOAR): an occupational therapy program for transition age youth with disabilities

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BOSTON UNIVERSITY
SARGENT COLLEGE OF HEALTH AND REHABILITATION SCIENCES

Doctoral Project

**SUPPORTING OPPORTUNITIES FOR ADULT READINESS (SOAR):
AN OCCUPATIONAL THERAPY PROGRAM FOR TRANSITION
AGE YOUTH WITH DISABILITIES**

by

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Dedication

This project is dedicated to my village.

To my parents, Michael (of blessed memory) and Glennie Dinin, whose lifelong commitment to education inspires me to continue striving, and whose reminders to live a balanced life remain the voice of reason echoing in my head.

To my husband, Mark, who has been an amazing partner on this crazy adventure, challenging and supporting me and helping me build this life that I love so much.

To my children, Gabriel, Eliza, and Raya, whose patience with their mother's homework assignments was exactly what one would expect from small children. May your frustration with my missed family dinners blossom into inspiration to never stop learning.

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ABSTRACT

Federal law mandates that transition plans and services be in effect for students with disabilities by the time they turn 16, in order to optimize students' successful movement from high school into postsecondary areas including postsecondary education, competitive employment, independent living, and community participation. Despite currently available services, however, students with disabilities continue to exhibit worse outcomes than their peers in the aforementioned areas. Occupational therapists (OTs) have professional expertise and knowledge that may contribute to improved postsecondary outcomes for these students, yet the majority of school-based OTs do not work with transition age-youth or address goals related to transition planning. This may be due to OTs' perceptions that other professionals handle transition services, lack of understanding of the role of OT by other team members, lack of funding within schools, and inadequate time on OTs' caseloads to address services not mandated in a student's Individualized Education Program (IEP).

Los Angeles Unified School District (LAUSD) is currently the second largest

school district in the country and operates several Career and Transition Centers (CTCs) for students with disabilities aged 18–22. Following a literature review of OTs’ previous and potential role in transition, this paper proposes a model for an OT-led transition program for use within LAUSD. Supporting Opportunities for Adult Readiness (SOAR) is a multi-faceted and multipronged approach to team capacity building. It targets CTC staff and families, as well as district OTs, to maximize their skills and capabilities in supporting youth with disabilities as they transition into adulthood. The program is based on the Knowledge to Action framework (KTA), which posits that a deliberate and thoughtfully planned effort to disseminate knowledge with stakeholders will result in the more effective utilization of that knowledge. Using KTA as a road map, SOAR outlines a range of strategies, including trainings, consultations, publication of written materials, and models of ongoing support to best serve the target populations. SOAR presents a dynamic and evolving set of program activities that collectively can impact the perceptions and role of OTs within LAUSD. Methods for program evaluation and dissemination, as well as potential funding sources are discussed.

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Chapter 1: Introduction

The Individuals with Disabilities Education Act [IDEA] mandates that a transition plan be in effect by the time a child turns 16 (U.S. Department of Education, 2004). According to IDEA, the purpose of transition services is “to facilitate the child's movement from school to post-school activities, including postsecondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation,” (20 U.S.C. 1401(34)).

Despite the mandate for school districts to provide transition services to students aged 18–22 under the Individuals with Disabilities Education Act, studies have shown that students with disabilities continue to have significantly different post-school outcomes than their peers. These poor outcomes have specifically been defined as inconsistent utilization of post-secondary education opportunities, low competitive employment rates, lack of community inclusion, and low rates of independent living (Gaumer, Morningstar, & Clark, 2004).

Occupational therapists (OTs) are experts in facilitating an individual's meaningful engagement in his or her various roles and routines. OTs are able to assess the person, the environment, and the required task to enable successful participation for people experiencing a range of illnesses or disabilities (American Occupational Therapy Association [AOTA], 2014). As such, occupational therapy is uniquely situated to offer guidance and direction to young adults experiencing significant life transitions. As part of a multi-disciplinary transition team, occupational therapists can examine personal,

environmental, cultural, and physical factors that may limit or support the participation of the child with special needs (California Department of Education [CDE], 2012). OTs may address issues related to self-advocacy, explore possibilities for environmental modifications, transportation, assistive technology, and adaptive equipment in order to empower children to be more engaged in their chosen occupations (CDE, 2012). Increased engagement, autonomy, and self-regulation of students contributes to higher levels of self-determination, which has been linked to improved post-school outcomes (Palmer, Wehmeyer, Shogren, Williams-Diehm, & Soukup, 2012). OT involvement in transition planning may lead to better outcomes in these areas for the youth involved in the process.

Notwithstanding the aforementioned skill sets, OTs are not consistently providing transition services in school-based settings. While efforts have been made in the past decade to increase the involvement of OTs in this practice area, it is still considered an emerging niche and an area for further research and development (AOTA, n.d.). Previous studies have found that the majority of school-based OTs are not working with transition age-youth, and the small percentage that do work with this age group rarely address goals related to transition planning or functional outcomes (Kardos & White, 2005; Michaels & Orentlicher, 2004). This reality may stem in part from identified barriers, including OTs' perceptions that other professionals are handling transition services, lack of understanding of the role of OT by other team members, lack of funding within schools, and inadequate time on OTs' caseloads to address non-IEP driven services (Kardos & White, 2005). As a result, there is currently limited development of manualized programs

or OT specific protocols for transition involvement. Much of what does exist either focuses on community programming or is not specific to occupational therapy.

This project explores the identified problem by examining the nature of transition services provided by OTs within Los Angeles Unified School District (LAUSD) and proposing a model for effective intervention in this area. LAUSD is currently the second largest school district in the country (U.S. Department of Education, 2014). At this time, it operates six Career and Transition Centers (CTCs) for students with disabilities aged 18–22 (LAUSD, n.d.-b). Students at these centers participate in vocational strands and independent living skills courses aimed at preparing them for employment and other meaningful post-secondary outcomes. Historically, OTs have provided services for small numbers of students at these centers based on their Individualized Education Programs (IEPs), often focusing on performance skills to support educational participation. In the past several years, the LAUSD OT department has been exploring the possibility of providing integrated support within the CTCs, focusing on components such as parent trainings, teacher in-services, and informal consultation. These programs have had some success, though at this time lack a cohesive overall direction and focus. One barrier to the forward movement of these programs has been a general lack of understanding of OTs' role in transition. OTs will need to define their unique role in transition and clarify how it differs from services already provided by other professionals. Avoiding duplication of services is an important consideration in defining OT involvement and roles (CDE, 2012). This limited understanding of the role of OT also limits opportunities for team collaboration, which is more effective when team members clearly understand one

another's contributions and areas of expertise (Christner, 2015). Additionally, OTs will need to be thoughtful and deliberate when offering their expertise to team members. CTC teachers and staff may be more reticent to accept suggestions or implement OT's ideas when they feel an OT is coming in and assuming an "expert" role (Rens & Joosten, 2014). Coming from a place of mutual respect and understanding will ensure more successful collaborative outcome.

The following chapters further explore the relevant literature regarding the identified problem and previous attempts to address the problem. The Knowledge to Action Framework is introduced as a useful guideline in developing a program that will be appropriate and effective within the local context. The resultant program is a multi-faceted team capacity building approach that provides training and ongoing support to families and staff at the transition centers, as well as to OTs providing transition services throughout the school district. A plan for program evaluation, a funding plan, and a dissemination plan are outlined. By providing clear guidelines and considerations in developing a well-defined role for OT in transition within a specific school district, the proposed project will ideally result in concrete and applicable suggestions that are generalizable to other similar settings.

Chapter 2: Theoretical and Evidence Base for Proposed Program

While transition planning and services are mandated for all youth with disabilities starting by the age 16, studies have shown that these students continue to have significantly less involvement than their peers in areas related to post-secondary education, competitive employment, community inclusion, and independent living (Gaumer, Morningstar, & Clark, 2004; Haber, et al., 2016; Lindstrom, Doren, & Miesch, 2011; U.S. Department of Education, 2004). It has been proposed that occupational therapists possess skills and training to optimally support individuals during periods of life transition (Kardos & White, 2005; Michaels & Orentlicher, 2004; Orentlicher et al., 2014). Occupational therapists' training emphasizes holistic approaches that address personal, environmental, and contextual factors (Michaels & Orentlicher, 2004). OTs work to remediate specific deficits, analyze and adapt task demands and environments, and identify and access contextual supports, all while supporting a client's occupational goals and needs. These practices align the profession closely with the person-centered practices and values that have defined recent transition trends, and underscore the importance of involving OTs in this critical life period (Michaels & Orentlicher, 2004). Despite this uniquely tailored skill set, however, occupational therapists are not consistently providing transition services in school-based settings. Previous studies have found that the majority of school-based OTs are not working with transition age-youth, and the small percentage that do work with this age group rarely address goals related to transition planning or functional outcomes (Kardos & White, 2005; Michaels & Orentlicher, 2004). While efforts have been made in the past two decades to increase the

involvement of OTs in transition, it is still considered an emergent practice area (AOTA, n.d.; Mankey, 2014).

Initial studies have attributed OTs' limited involvement in transition service provision to several factors, including the perceptions, knowledge, and attitude of occupational therapists, the perceptions, knowledge, and attitude of other service providers, and legislative and administrative factors related to funding and caseload/workload distribution (Kardos & White, 2005; Mankey, 2011; Spencer, Emery, & Shneck, 2003). The interplay of these various factors has created an environment that has stalled or otherwise restricted OT involvement in providing critical transition services. The proposed problem is visually represented in Figure 1.

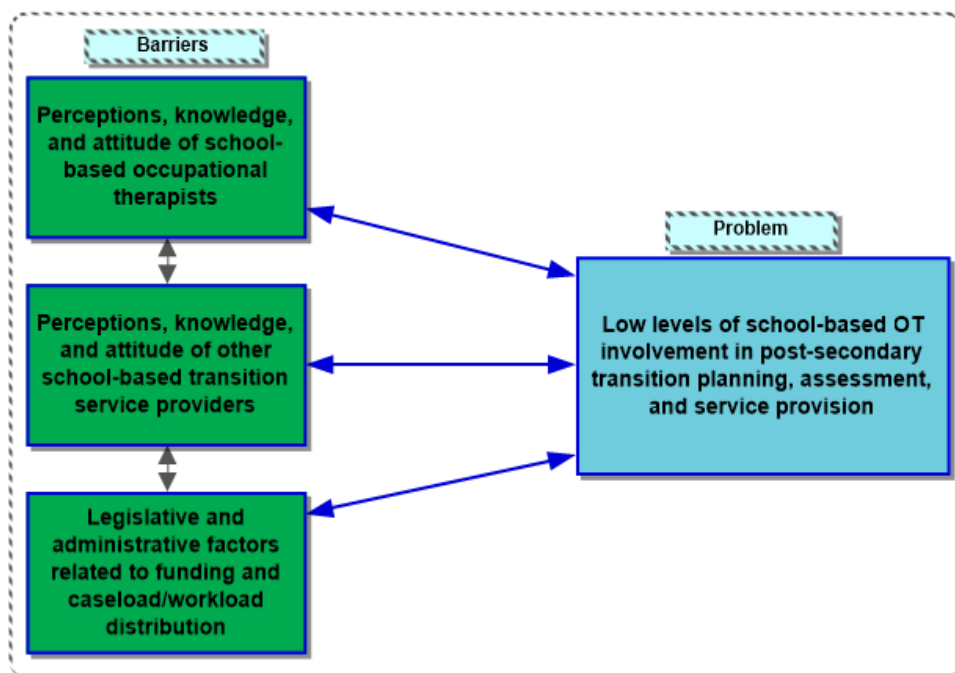


Figure 1: Proposed visual model of the problem

Perception, Attitudes, and Knowledge of Occupational Therapists

School systems employ a range of service providers, including classroom teachers, transition teachers, support staff, and a range of related service providers. Special education law dictates that transition services include related services, such as occupational therapy, as appropriate (U.S. Department of Education, 2004). Yet despite this legislative directive, occupational therapists often maintain the perception that other school-based professionals, such as teachers and support staff, are providing all necessary transition services (Juan & Swinth, 2010; Kardos & White, 2005; Spencer, Emery, & Shneck, 2003; Gangl, Neufeld, & Berg, 2011). In several survey studies, OTs indicated that they did not feel adequately prepared by their educational programs for the demands of school-based practice in general (Brandenburger-Shasby, 2005; Burnter, McMMain, & Crowe, 2002), and reported that they felt poorly educated about the specifics of transition legislation and their roles in relation to this area (Kardos & White, 2005; Mankey, 2011). These studies demonstrate that OTs may require additional trainings related to specific transition-relevant content (Orentlicher & Michaels, 2000b). Orentlicher and Michaels, however, have written extensively about the components of an OT education and skill set that directly relate to transition services (2000a, 2000b, 2003a, 2003b). It is therefore not merely a lack of knowledge that prevents OT involvement in transition; one might infer that it is also related to a lack of confidence in their knowledge and skill set, as well as a poor understanding of how to practically apply those skills in specific contexts. This lack of confidence and clarity may also prevent OTs from advocating for expanded roles in transition.

Perception, Attitudes, and Knowledge of Other Transition Providers

In addition to self-perceptions, OTs also face barriers related to other service providers' knowledge and understanding of the role of OT in transition planning. In several studies, non-OT transition team members, such as transition specialists and special education teachers and directors, indicated that they were unfamiliar with the current and potential roles of OT in the transition process (Gangl, Neufeld, & Berg, 2011; Mankey, 2012; Spencer, Emery, & Shneck, 2003). OTs themselves indicated they felt that other team members have a poor understanding of what they do (Kardos & White, 2005; Mankey, 2011). A number of school districts surveyed indicated that special education teachers, transition specialists, parents, and other IEP team members were not requesting OT involvement in transition or there was no need for OT involvement in transition (Mankey, 2011; Mankey, 2012; Spencer, Emery, & Shneck, 2003). The lack of knowledge and understanding of OTs role could certainly contribute to the lack of requests for OT. This lack of clarity and advocacy appears to support a self-sustaining cycle of OT exclusion from the transition process, in which a lack of involvement perpetuates a lack of understanding and vice versa.

Legislative and Administrative Barriers

Special education legislation mandates that schools provide a fair and appropriate education to students with disabilities, which includes the provision of related services such as occupational therapy (U.S. Department of Education, 2004). As such, school districts are required to fund related services as dictated in students' Individualized Education Programs (IEPs). Yet administrators and OTs alike have reported that a major

barrier for OT involvement in transition is inadequate funding to utilize OTs to their maximum potential or to continue supporting students when progress is insufficient (Juan & Swinth, 2010; Kardos & White, 2005; Mankey, 2011; Spencer, Emery, & Shneck, 2003).

Many districts have sought out additional funding sources to help defray the costs of related services. One such program provides reimbursement from Medicaid (Medi-Cal in the state of California) for direct services in health-related fields provided in the schools, including OT (Mankey, 2014; Los Angeles Unified School District, n.d.-b). While Medi-Cal programs support the provision of school-based related services, they also create what Mankey refers to as a “conflict of purpose,” (2014). Schools are meant to provide educationally relevant service, while Medi-Cal supports attainment of medical goals. The consequences of this conflict in relation to OT in transition are twofold. First, this reimbursement program typically funds direct IEP-driven services, thereby limiting opportunities for consultation, collaboration, and co-treatment (Mankey, 2014). Such collaborative and creative models may better serve students in transition than direct one to one services. Second, Medi-Cal programs both directly and indirectly contribute to a reductionist paradigm being used for school-based intervention, in which performance components are addressed while overall functional performance is neglected (Burnter, McMain, & Crowe, 2002; Mankey, 2012; Orentlicher & Michaels, 2000b). Oftentimes, this results in students being discharged from OT services before the age of 14, as soon as they demonstrate functional performance component skills, such as visual motor integration, visual perception, and fine motor skills (Kardos and White, 2005). Kardos

and White also found that OTs were primarily using assessment protocols that evaluated component skills, and failing to use functional evaluations that would yield results more useful to developing functional transition outcomes (2005). Studies have demonstrated that the majority of OTs providing school-based services work with students that are preschool and elementary school age (Juan & Swinth, 2010; Long, 2003; Orentlicher & Michaels, 2000b; Spencer, Turkett, Vaughan, & Koenig, 2006). OTs are therefore working within a system in which students are usually discharged from IEP driven services long before transition age, and non-IEP driven services are given limited priorities and funding. These factors are not conducive to optimal OT involvement in transition.

One final administrative factor that impacts OT work is the lack of temporal resources. As of 2012, about 13% of OTs were working in school systems (NBCOT, 2012). Federal data demonstrate that there is an overall shortage of related service providers in schools, and those employed within schools carry heavy caseloads (Effgen, Myers, & Myers, 2007; Rapport & Williamson, 2004). The high demand placed on school-based OTs leaves precious little time for developing new programs or expanding practice areas beyond what is already expected of them.

Application of the Knowledge to Action Framework

In addressing the lack of OT involvement in post-secondary transition, the Knowledge to Action process framework (KTA), as shown in Figure 2, provides a useful model through which to understand both the problem and possible solutions. KTA developed as a way to represent the missing link between increased evidence and

research in the healthcare field and the improved health status of patients and considers the way stakeholders interact with available knowledge (Graham, et al. 2006). Two of the primary barriers identified limiting OT involvement in transition relate to OT perceptions and other educators' lack of knowledge and familiarity with OT. These barriers do not necessarily reflect a lack of available knowledge or resources in the field of OT. In contrast, there are multiple published papers, brochures, programs, and textbooks discussing the potential roles and impact of OTs in the area of transition. Rather, the problem rests in a failure to complete several steps in what is known as the KTA Action Cycle. According to KTA, if the process through which knowledge is shared with stakeholders is deliberately and thoughtfully planned, then that knowledge will be utilized more effectively (Graham, 2006; Metzler and Metz, 2010). The action cycle represents the process through which existing knowledge is put into practice. It involves identifying a specific problem in practice and identifying what knowledge would address that problem. The next steps involve adapting that knowledge to the specific context in which you plan to use it, then assessing what contextual barriers may limit or constrain the use of that knowledge. Based on those processes, specific strategies to disseminate that knowledge are selected, implemented, and then monitored and evaluated in an ongoing cycle. Through that iterative process of adaptation, implementation, and evaluation, knowledge use can ideally be sustained (Graham, et al. 2006). In this initial literature review, there were not any studies related to systematic ways in which knowledge about OTs in transition is disseminated and applied. It is therefore plausible that this knowledge has not been shared in a deliberate and thoughtful manner in order to

maximize effective application.

Another portion of KTA that is relevant in this area is the knowledge creation “funnel,” which represents the refinement and focusing of available knowledge so that it is readily applicable in practical situations (Graham, et al., 2006). Knowledge and information move from the wealth of “first-generation” primary studies and general information, through second generation reviews and syntheses, to third generation knowledge, in which information has been funneled into usable tools and products such as guidelines, manuals, or assessments. From the initial literature review of this problem, it appears that much of the knowledge related to OT in transition still lies in the first- and second-generation phases, making it less accessible and applicable for practical use.

In addressing the identified problem of this doctoral project, KTA offers a road map for the development of an effective knowledge translation program. The assessment of specific environmental barriers will allow for the consideration of time and funding deficits, which have also been identified as contributing to the problem. It highlights the ways in which to synthesize available knowledge and resources and tailor them to be well-received by the defined program participants. It also places emphasis on the critical components of program monitoring, evaluation, and adjustment to increase the likelihood of effecting lasting change. The desire to deliberately engineer change in this targeted group is consistent with both the intentions of this doctoral project and the basic tenets of KTA.

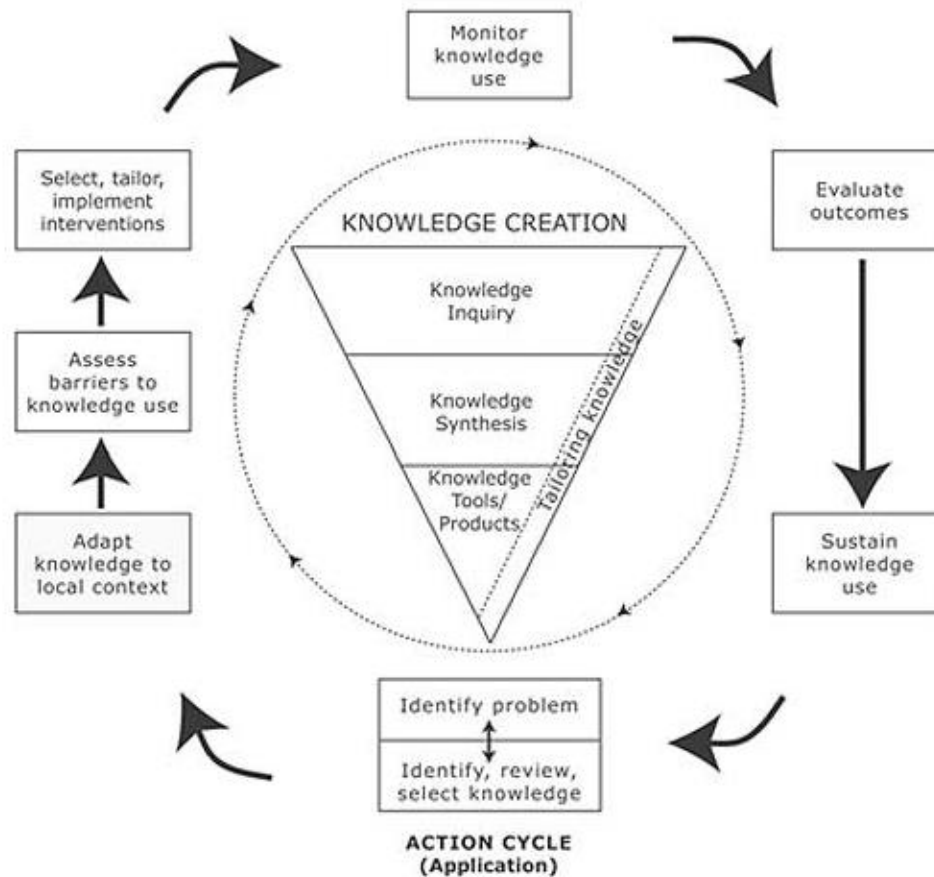


Figure 2: The Knowledge to Action Process Framework

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Limitations of the Research and Potential Areas for Future Study

It is important to note several limitations of the studies reviewed in this chapter. The studies completed were almost exclusively non-experimental designs, consisting mostly of surveys, case studies, focus groups, or interviews. Most sample sizes were relatively small, with the largest survey study consisting of 450 respondents (Brandenburger-Shasby, 2005), and many of the surveys were conducted only in specific geographic regions. These factors, combined with the lack of available psychometric data

for testing instruments, calls into question the validity and reliability of results. Non-experimental designs prevent the replication of results, leading to poor reliability. Small sample sizes inhibit generalizability of data. External factors, such as regional values, school-district cultures, or timing of surveys may impact respondents' answers, further compromising reliability. It was not established whether survey questions did in fact measure the intended constructs, which could further impact validity of results (McDowell, 2006). Given these limitations, it is difficult to evaluate to what degree the findings were accurate, applicable to the larger population of transition providers and students, and will remain steady over time.

In this review, an attempt was made to find common themes that emerged across multiple studies. In doing so, the hope is to find recurring ideas that could accurately describe the experience of most OTs in transition. The author was also able to draw upon her own clinical reasoning skills based on her work in school-based transition. The recurrent themes were ones the author had observed and experienced in her workplace and among her colleagues, suggesting good face validity for the findings. However, this author could also have introduced bias based on her assumptions and experiences, and the identification of themes may not be systematic or reproducible.

One additional concern regarding the reviewed literature is the age of the articles, many of which are well over a decade old. It is quite possible that the state of transition in schools has changed significantly in that time. Yet there are several authors that have consistently written about these issues over the past years, and might be considered experts in the field (see: Mankey, Orentlicher & Michaels). The fact that these

individuals continue to emphasize the need for OT involvement in transition would imply that none of the outlined challenges have been fully surmounted. Therefore, it seems reasonable to conclude that there is a continued need for research, programming, and education to increase OT engagement in the transition process.

The Knowledge to Action process suggests additional possible research questions. As mentioned previously, most of the literature reviewed could be qualified as first- or second-generation knowledge, and has not yet reached the level of “third generation” and easily applicable knowledge. Further research may be needed to determine how knowledge about OTs in transition is being disseminated and received by target audiences. A deeper understanding of these processes will allow for a more critical evaluation of how to best increase the use of this knowledge in practical situations. The remainder of this chapter explores current evidence based practices in transition to establish a foundation for the proposed knowledge translation program.

Literature Review of OTs in Transition: Initiating the KTA Process

In seeking to develop a program that increases the role of OTs in school-based transition, it is imperative to examine previous efforts that have been made to remediate this problem. Having identified the key barriers limiting OT’s role in transition, as well as a potentially useful framework through which to understand the problem and possible solutions, it is critical to then review current literature on the role of OT in transition to gain insight in how to approach each of the steps of the KTA process. Available literature regarding previous approaches to OT in transition illuminates several steps in the KTA model, including:

- 1) Determining the relevant knowledge that needs to be conveyed,
- 2) Identifying local barriers and supports to knowledge use,
- 3) Selecting and tailoring an intervention to convey that knowledge, and then
- 4) Implementing use of that knowledge.

The following sections summarize relevant key points in the literature as they relate to the aforementioned steps in the KTA process.

Determining Relevant Knowledge: Self Determination, Person-Centered Approaches, and Universal Design for Learning

A review of available literature highlights several themes and values that underlie best practice for OTs in transition. Any knowledge translation approach should ensure that these concepts are introduced to and understood by OTs as a way to frame their future work in providing transition services and support. These concepts include self-determination, use of person-centered approaches, and Universal Design for Learning (UDL).

Most programs for transition age youth with disabilities share the same long-term goals of increasing postsecondary levels of independent living, employment, participation in postsecondary education, or community participation for these youth (Gaumer, Morningstar, & Clark, 2004; Haber, et al., 2016; Lindstrom, Doren, & Miesch, 2011). Selection of program components and development of short-term program goals should support these eventual outcomes. One key predictor of improved post-secondary goals is self-determination, which “refers to the volitional acts that enable one to act as the primary causal agent in one’s life and to maintain or improve one’s quality of life,”

(Palmer, Wehmeyer, Shogren, Williams-Diehm, & Soukup, 2012, p. 76). Several large-scale, well-designed studies have shown increased levels of self-determination to be strong predictor of improved postsecondary outcomes for youth with disabilities in areas related to education, employment, and participation over time (Field, Sarver, & Shaw, 2003; Palmer et al., 2012; Wehmeyer & Palmer, 2003). The vast majority of available literature on the subject of OTs role in transition emphasizes the importance of increasing and supporting the development of self-determination (AOTA, n.d., 2015; California Department of Education, 2012; Jackson, 1990; Journey & Loukas, 2009; Juan & Swinth, 2010; Nel & van der Westhuyzen, 2015; Stewart, 2009, 2011; Swinth, 2000). Other related and overlapping constructs were also frequently mentioned in the literature, including self-confidence, self-advocacy, self-efficacy, internal locus of control, and empowerment (AOTA n.d., 2015; Eisman et al., 2017; Jackson, 1990; McInerney & McInerney, 1994; Shea & Giles, 2012; Stewart, 2009). In other words, it is critical that transition services provide students the opportunity to have control over their experience and outcomes to the maximum extent possible.

While the student's disability will determine in part the needed level of support, it should not prevent them from playing an active role in their life experience. Occupational therapists may formally or informally teach self-determination skills, by providing choice during sessions or by implementing a formal established curriculum (Palmer et al., 2012; Swinth, 2000). OTs may also help establish goals that relate to functional performance rather than performance components, including prevocational goals, goals related to independent living or competitive employment, and goals related to self-advocacy and

self-determination (Juan & Swinth, 2010; Kardos & White, 2006; Swinth, 2000). OT assessment should include the evaluation of necessary post-graduation skills, and goals should support the development of those skills. OTs may also select the therapy environment (i.e., classroom, workshop, or community) to maximize self-determination. OTs should also begin promoting self-determination earlier in a student's educational career by providing opportunities for choice and self-directed goals and interventions (Juan & Swinth, 2010; McInerney & McInerney, 1994; Swinth, 2000).

Person or client-centered practice has been utilized as one model supports that development of self-determination (Abbott & Provident, 2016; Association of University Centers on Disabilities, 2003; Michaels & Orentlicher, 2004; Orentlicher & Michaels, 2003a, 2003b; Journey & Loukas, 2009). Person-centered planning can be defined as a “collection of strategies that are used to organize and guide the transition efforts of students with disabilities and their families, friends, and service providers as they work together to assist students in exploring and pursuing their interests, desires, and goals,” (Michaels & Orentlicher, 2004, p. 214). These approaches require striking a balance between student-directed goals and interests, and achieving meaningful transition outcomes. OTs may assist in assessing student's strengths and interests, framing realistic goals, identifying available barriers and supports, and developing intervention plans based on the goals that have been established collaboratively. OT treatment sessions should focus on increasing opportunities for choice and honoring and valuing the student's wishes, individualizing services towards the student's desires and needs, and creating linkages within the school setting and with the greater community to provide

more supports (Orentlicher & Michaels, 2003a, 2003b).

Another concept that closely aligns with the work of OTs in transition settings is that of Universal Design for Learning (UDL). UDL advocates for the use of multiple means of engagement, representation, and expression in order to engage a broad range of learners in the classroom (Gipson, 2017). In a UDL approach, various materials and teaching methods are employed so that students with varying abilities and strengths will have opportunity to both learn and express what they have learned (Gipson, 2017; Missiuna et al., 2012). UDL concepts have been further applied to transition to include “multiple life domains, multiple means of assessment, student self-determination, and multiple resources/perspectives,” (Orentlicher et al., 2014, p. 3). OTs may draw on their training and expertise to assist teachers in providing multiple means of engagement, representation, or expression. This may include adapting or modifying assigned tasks or environments. For example, the use of assistive technology, such as switches or other devices, can allow students with physical limitations or intellectual disabilities to engage with the curriculum in new ways. Breaking down tasks into component steps may provide new points of access for students that previously relied on high levels of adult assistance. While many of these activities are aligned with work commonly done by OTs, it is important to recognize connections and integrate our work into current educational trends. Concepts of UDL will be highly relevant for OTs as they support students and educators in finding ways to maximize student participation and independence.

When developing OT supported transition programs, it is important to select strategies that will optimize the development of students’ self-determination skills, draw

on the values of person-centered practice, and build on concepts of Universal Design for Learning. Any programs training OTs as to their role in transition should include a review of these concepts and principles.

Identifying Local Barriers and Supports: *Funding Sources and Multi-Tiered Systems of Support*

An important concept in the knowledge translation process is the necessity of adapting knowledge to the local context as well as identifying barriers or supports to applying knowledge in that context (Graham, et al. 2006). Many training programs similarly emphasized the importance of identifying local programs, resources, or policies that support the role of OT in transition when designing their program (Abbott & Provident, 2016; Campbell et al. 2012; Lehmann & Hyatt, 2000; Lehmann & Sample, 1997). One identified barrier to OT practice in transition is a lack of funding. Funding for direct services is provided by state and federal funds as mandated in IDEA (U.S. Department of Education, 2004). Collaborative service efforts may be able to secure increased administrative and financial support by embedding themselves within the context of current educational models and programs.

Los Angeles Unified School District utilizes several models that may directly or indirectly support an expanded role for OT in transition. These include the Multi-Tiered System of Supports (MTSS) and Response to Instruction and Intervention (RTI²). These constructs have been introduced and implemented on a national level, and have developed an increasingly central presence in the policies and procedures of LAUSD over the past several years (Elliot, 2009; Gipson, 2016; Kauffman, 2017). Both MTSS

and RTI² introduce a structured continuum of academic and behavioral supports for all student that is evidence-based, system-wide, and data driven (Kauffman, 2017). These multi-tiered models provide opportunities for widespread support for all students, with increasingly higher levels of support and intervention for smaller populations of students as needed.

Creating an expanded role for OTs in providing collaborative transition supports aimed at increasing students' access, independence, and successful outcomes is directly aligned with the values underscored by these models. Universal Design for Learning also underscores the use of these models in providing support to help all learners succeed, and further aligns with the core values of the OT profession (Elliot, 2009; Gipson, 2016; Kauffman, 2017). OT programs that embed themselves within the models may also be able to access funds set aside to support RTI² and MTSS programs and trainings, thus securing more resources and creating more program stability.

Interventions to Convey Knowledge: Written Publications, Training Programs, Continuing Education, & Team Capacity Building

After identifying the key content of a knowledge translation program, the next step is determining the form of the program — selecting the type and structure of the knowledge dissemination efforts. Depending on the goals of the programs, knowledge dissemination efforts may be geared towards OTs, teachers, parents, or other team members. From this literature review, three primary types of training emerged: publication and distribution of written materials, integration into graduate and professional curriculums, and opportunities to engage in continuing professional

education.

Publication and Distribution of Written Materials

This method of training or knowledge dissemination includes all publication of written materials on the topic of OTs role in transition, such as many of the articles reviewed herein. In a knowledge translation framework, this includes first-generation primary studies and general information, second generation reviews and syntheses, and third generation knowledge, in which information has been funneled into usable tools and products such as guidelines, manuals, or assessments (Graham, et al., 2006). Several authors have provided second generation literature reviews on available evidence for best practice of OTs in transition (Chandler et al., 1996; Journey & Loukas, 2009; Stewart, 2009; While, Forbes, Ullman, Lewis, Mathes, & Griffiths, 2004). Industry publications have provided readily accessible and practical tips on working with students in transition (Orentlicher & Michaels, 2000a; Orentlicher & Michaels, 2000b; Orentlicher & Michaels, 2003a; Orentlicher & Michaels, 2003b; Orentlicher, et al., 2014). Additionally, several textbooks have recently been made available regarding the role of OT in transition, including *Transitions Across the Lifespan: An Occupational Therapy Approach* (Orentlicher, Schefkind, & Gibson, 2015) and *Transitions to Adulthood for Youth with Disabilities Through an Occupational Therapy Lens* (Stewart, 2012). There is not currently research available on the rate with which these materials are accessed or the impact they have had on practice.

Graduate/Professional Training Programs

Building on and utilizing some of the available information, a few models exist

for training OTs at the graduate level to work in transition. This includes training programs proposed and implemented by Lehmann and Hyatt (2000), and Lehmann and Sample (1997), as well as an OT Master's level program elective proposed by Ellis in 2013. These courses may utilize current textbooks and partnerships or internships to prepare OTs for future roles in transition. This type of coursework, however, is still not widely available, and available studies show that a majority of surveyed OTs feel ill-prepared for their roles in transition following completion of their educational programs (Kardos & White, 2005; Mankey, 2011). No available studies compare the perceived knowledge of OTs who have participated in graduate level transition training with those who have not.

Continuing Education

For those OTs that had minimal introductions in their educational coursework to their role in transition, continuing education opportunities prove a critical way to convey current and relevant information. Some organizations have developed and provide widely available online learning modules on various topics related to transition and/or OTs roles in this process (AOTA, 2015; Transition Coalition of Kansas, 2017). Educational workshops at professional conferences introduce OTs to topics relating to their role in transition (AOTA, 2017). Several studies have looked at the role of asynchronous web-based learning in increasing OTs' knowledge of their role in transition or teachers' understanding of the role of OT (Abbott & Provident, 2016; Christner, 2015). These studies, while small-scale, used quantitative analysis to demonstrate an increase in self-reported knowledge levels following these trainings. Abbott and Provident found

statistically significant changes in participants' self-reported knowledge of their role in post-secondary transition and their knowledge regarding services they could provide (2016). This initial information is promising and suggests this method of training may be effective to reach working professionals with busy schedules and diverse educational backgrounds. Wynn also looked at the effectiveness of holding a community-capacity building forum for diverse stakeholders to improve the transition process (2006). They then performed qualitative analysis of the data they collected through interviews, field notes, and observations. Their thematic analysis revealed that participants felt the forum increased their connections in the community, capacity to support youths with disabilities, and awareness of the challenges faced by these youths. Further research is needed to support and replicate these initial findings with larger and more geographically diverse populations.

Team Capacity-Building Efforts

In addition to intra-professional knowledge translation efforts, OTs may opt to gear their knowledge translation programs towards other members of the transition team in the form of capacity building approaches (Campbell, Missiuna, Rivard, & Pollock, 2012; Missiuna, et al. 2012, Nel & van der Westhuyzen, 2015; Michaels and Orentlicher, 2004; Stewart 2009, 2011; Wynn, Stewart, Law, Burke-Gaffney, & Moning, 2006). In this model, the “core activities of the occupational therapist are relationship building and knowledge translation, with the school as the client,” (Missiuna et al., 2012, p. 43). With this approach the focus shifts away from providing services geared towards individual students and instead aims to increase the knowledge of teachers, parents, and educational

teams regarding ways to best support the student (Missiuna et al., 2012; Stewart, 2009; Wynn et al., 2006). These efforts may take the form of trainings, community forums, continuing education, and ongoing collaborations. Wynn and colleagues ran a community-based capacity-building forum and interviewed participants one month and again one year after the forum. They found that participants reported increased levels of community connection, perceived responsibility to support their community, and raised awareness regarding the experience and needs of youth with disabilities. This impact lasted throughout the year after their participation in this forum (2006). Another capacity building program was designed as a classroom-based collaboration between teachers and OTs (Campbell et al., 2012, Missiuna et al., 2012). Thematic analysis of the interviews conducted with the participating therapists found that they all felt they were able to make a greater impact in supporting all students using this model as compared to their previous experiences in school-based OT (Campbell et al., 2012, Missiuna et al., 2012).

The need to achieve parent satisfaction has been identified as another important component of OT transition programs (Nel & van der Westhuyzen, 2015; While et al., 2004). In programs that have included components of parent education, parents have perceived that OT involvement led to improved outcomes for their child (Journey & Loukas, 2009; Nel & van der Westhuyzen, 2015). Knowledge translation programs may therefore opt include components aimed at increasing the capacity of parents and caregivers to support their children as they transition to adulthood (Nel & van der Westhuyzen, 2015; While et al., 2004; Wynn et al., 2006).

While available research suggests that capacity building approaches are effective,

it is important to note that many of these studies were completed with small and self-selected samples within specific geographic regions (Campbell et al., 2012, Missiuna et al., 2012; Wynn et al., 2006). It is therefore possible that the results were skewed by contextual factors in a specific locale or by the previous experiences and knowledge of willing and enthusiastic participants.

Knowledge Implementation: *Direct and Collaborative Models of Service*

The paramount step in any knowledge translation effort is the implementation and application of the knowledge gained. The ultimate goal of the knowledge translation efforts discussed above is to increase the involvement of OTs in postsecondary transition planning. Depending on contextual supports, needs of the local population, and available resources, an OT may select from one of two primary service models in the area of transition. These models OTs include direct service provision, and collaborative, or integrated service models. Table 1 outlines some of the key differences between these two types of models for OTs in transition. Collaboration and integration into an educational program may be important components of both service models. For the purpose of this discussion, however, the primary distinction between the two models is that the former focuses on an individual student, and the latter focuses on an entire group or program.

Table 1: Direct and Collaborative Service Models for OTs Providing Transition Supports

	Direct Service Models	Collaborative Service Models
<i>Defining Attribute</i>	Focused on an individual student, driven by students' Individualized Education Program (IEP)	Delivered to a class, group, or program
<i>Relevant Policy or Legislation</i>	<ul style="list-style-type: none"> Individual with Disabilities Education and Improvement Act of 2004 (U.S. Department of Education, 2004) 	<ul style="list-style-type: none"> Response to Instruction and Intervention Multi-Tiered Systems of Support (California Department of Education, 2016)
<i>Models of Service Provision</i>	<p>Includes:</p> <ul style="list-style-type: none"> Assessment Goal writing, Intervention/treatment <p>May involve:</p> <ul style="list-style-type: none"> Consultation and collaboration with other service providers and families Shared goal writing and monitoring of student progress <p>(Barnes & Turner, 2001; California Department of Education, 2012; Juan & Swinth, 2010; Michaels & Orentlicher, 2004).</p>	<p>May include:</p> <ul style="list-style-type: none"> Partnerships between OTs and educator Community capacity building Parent/teacher workshops and trainings Shared management Interagency collaboration Whole class instruction Dynamic performance analysis, Implementation of specific curricula and monitoring <p>(Association of University Centers on Disabilities, 2003; Jackson, Rankin, Siefkin, & Clark, 1989; Jackson, 1990; Missiuna et al., 2012; Stewart, 2011).</p>
<i>Types of Assessment</i>	<p>Formal and informal evaluation of student which may include:</p> <ul style="list-style-type: none"> Rating scales Inventories Checklists <p>Other standardized or nonstandardized assessments/ observations related to:</p> <ul style="list-style-type: none"> School functioning Life skills Vocational skills 	<p>Program evaluation, which may include:</p> <ul style="list-style-type: none"> Surveys Questionnaires Focus groups Semi-structured interviews with educators, parents, and families. <p>Long-term outcomes measurements of participants in areas related to:</p> <ul style="list-style-type: none"> Participation Quality of life

	<ul style="list-style-type: none"> ● Interests ● Self-determination ● Components such as sensory processing and motor skills <p>(Abbott & Provident, 2016; American Occupational Therapy Association, 2015; Kardos & White, 2006; McInerney & McInerney, 1994; Orentlicher et al., 2014; Rudd & Kertcher, 2015).</p>	<ul style="list-style-type: none"> ● Opportunities ● Self-determination ● Self-advocacy ● Self-efficacy ● Cost-benefit analysis of program <p>(Campbell et al., 2012; Stewart, 2009; Wynn et al., 2006).</p>
Funding sources	Federal and state funding as mandated by IDEA (U.S. Department of Education, 2004).	Federal and state funds, program budgets, school-board, research grants, educational/health promotion agencies (Campbell et al., 2012; Missiuna et al., 2012; National Center on Response to Intervention, 2010; Wynn, et al., 2006).
Type of Available Research	<ul style="list-style-type: none"> ● Case studies ● Literature reviews ● Descriptive articles <p>(AOTA, 2015; Chandler, O'Brien, & Weinstein, 1996; Journey & Loukas, 2009; Juan & Swinth, 2010; Michaels & Orentlicher, 2004; McInerney & McInerney, 1994).</p>	<ul style="list-style-type: none"> ● Program evaluations ● Descriptive literature/discussions ● Analysis of qualitative data including interviews, questionnaires, and focus groups ● Literature reviews <p>(Campbell et al., 2012; Missiuna et al., 2012; Stewart, 2009; While et al., 2004; Wynn et al., 2006).</p>

Evidence Supporting Direct and Collaborative Service Models

As can be seen above, these two models share certain values and goals, such as the need to collaborate with key stakeholders including students, teachers, and families, as well as the desire to empower and build the capacity of students, parents/caregivers, and teachers. However, the overall state of the evidence supporting best practices in

transition requires further attention. Much of the literature regarding programs and practices is purely descriptive in nature and does not include measures of impact or efficacy (Jackson, 1990; Journey & Loukas, 2009; Missiuna et al., 2012; Stewart, 2011). Several case studies describe and explore direct service models, but fail to provide comparable controls to demonstrate the impact of the service (Juan & Swinth, 2010; Kardos & White, 2006; McInerney & McInerney, 2004; Michaels & Orentlicher, 2004). Case studies also demonstrate how standardized evaluations can be used to guide and develop intervention plans, yet did not use these evaluations to demonstrate progress made in the program (Juan & Swinth, 2010; Kardos & White, 2006; McInerney & McInerney, 2004; Michaels & Orentlicher, 2004). The aforementioned studies do, however, demonstrate how OTs were able to provide assessment and intervention that identified and addressed the student's long-term goals and dreams. Honoring and implementing the student's goals as part of his or her intervention is an essential step in increasing self-determination, which has been established as a key predictor of post-secondary success. While these studies were unable to establish causality, they highlighted linkages between OT intervention and meaningful postsecondary outcomes in areas of employment, education, and community participation (Juan & Swinth, 2000; Kardos & White, 2006; Michaels & Orentlicher, 2004). For example, OT helped a student order a power-wheelchair that improved her community mobility, and taught a student how to dress appropriately which he then applied when employed in a professional setting. Given the highly individualized nature of these interventions, the studies did not provide specific prescriptions of how to intervene, but rather advocated

for a reliance on the previously discussed guiding principles such as person-centeredness and increasing self-determination. These studies also reported on parent and/or student satisfaction with direct services received, though it is difficult to generalize these results beyond the case studies themselves. The individualization of the interventions also makes them difficult to replicate with any level of fidelity.

Several qualitative studies of collaborative OT transition practices are available. These studies have been used to identify recurrent themes and attitudes in transition practices, such as OTs and teachers' perceived growth during program participation (Abbott & Provident, 2016; Campbell et al., 2012). Qualitative data has also demonstrated reported satisfaction and positive perceptions of program participants. Educators, OTs and community members involved in collaborative programs indicated feeling increased knowledge regarding transition services and supports, more empowered to help students in transition, and/or feelings of validation regarding the work they were currently doing (Abbott & Provident, 2016; Campbell et al., 2012; Wynn et al., 2006). Qualitative methods of data collection have included open-ended questions, semi-structured interviews, and focus groups. These types of studies suggest that collaborative approaches can build team capacity and result in overall satisfaction of team members. These studies were small scale and did not use standardized methods of data collection, yet the data is promising and offers direction and possible topics upon which to design larger scale quantitative studies.

Quantitative analyses of collaborative and integrated transition practices offer further support for the involvement of OT in the area of transition. In these models,

services are targeted towards groups of students, staff, or parents, rather than towards individual students based on IEP goals. McInerney and McInerney used pre- and post-tests with control and experimental groups to demonstrate how implementing an OT-led social skills curriculum to groups of students in their educational settings increased both students' scores on a standardized behavior rating scale, and their levels of post-secondary employment (1994). Increased school-based collaboration and web-based learning modules have both been shown to be effective ways to improve teacher's perceptions and understandings of the role of OT (Barnes & Turner, 2001; Christner, 2015). By collaborating with educational teams and providing services to larger groups, OTs may be able to impact larger numbers of students while building the capacity of both youth and team members. Again, these studies were conducted on a small scale and with self-selecting participants limited to one school-district or geographic region. Larger studies will be necessary to increase the generalizability of the data.

The past two decades have seen an expanded role of OTs in transition, with a similar increase in the availability of relevant qualitative and quantitative research studies. There continues to be a need for larger scale studies with more diverse populations to replicate and support current findings. Sample populations in the reviewed studies did include some diversity in professional experience and educational backgrounds, but were all limited to one geographic region, and took place nearly exclusively with self-selecting participants. Additionally, the current state of the evidence focuses primarily on theory and practice components, without a clear picture of most effective models of service or combination of factors and practical guidelines for

application of these models (Abbott & Provident, 2016; Stewart, 2011; While et al., 2004). There continues to be a strong need for ongoing program and service evaluation that is shared and disseminated in order to further bolster this area of practice (Stewart, 2011).

Conclusion

A dearth of OT involvement in providing transition services has been linked to OTs' perceptions that other professionals are addressing transition needs, other school professionals' poor understanding of what OT has to offer, and a lack of time and funding for OTs to provide such transition supports. A review of the available literature combined with the use of a knowledge translation framework provides possible ways to address each of these identified barriers. To effectively address the problem, OTs must select, tailor, contextualize, disseminate, and implement into practice the relevant available knowledge. To increase their understanding of their role, OTs should be trained to recognize and focus on key practices in transition, including use of Universal Design for Learning strategies, person-centered approaches, and the importance of developing self-determination skills in youth as they prepare to transition out of their school-based settings.

While supporting youth is a central tenet of transition planning, there is a need to engage in capacity-building for all team members, including educators, families and caregivers, and the larger community. Capacity building efforts may take the form of asynchronous web-based training modules, in-person trainings, and/or community forums. The presented information may utilize available texts and tools, and must be

adapted to fit the local context and take into consideration local barriers and supports.

Identifying existing programs in which to embed OT supports may serve as a way to secure additional time and funding to provide these services. Current local policies and programs within LAUSD make this an opportune time to introduce broader integrated OT supports that can impact a larger population than if supports were limited to students with IEP driven services.

When putting their knowledge of transition service into practice, OTs may choose to use a direct or collaborative model of service. This decision needs to be based on local resources and needs. The model of service delivery used (direct or collaborative/integrated) will impact the nature of assessment, evaluation, and intervention. Lastly, any future efforts to provide OT support in transition must include efforts to collect and share data on outcomes and efficacy to help bolster the evidence regarding best practice in this area.

Chapter 3: Description of Proposed Program

Description of the Program

ACES SOAR is a multi-pronged and multifaceted capacity building program aimed at maximizing the skills and capabilities of school-district staff and families in supporting youth with disabilities as they transition into adulthood. The program is designed to support students with disabilities aged 18–22 within the Los Angeles Unified School District Career and Transition Centers (LAUSD CTCs). The program utilizes a range of approaches driven by the Knowledge to Action framework and based on available evidence regarding best practice in transition.

The previous chapter identified a problem in practice relating to lack of OT involvement in post-secondary transition. That chapter then utilized the Knowledge to Action framework to identify relevant knowledge relating to OT practice in transition, proposed possible strategies for conveying and implementing use of that knowledge, and began to identify local barriers and supports to knowledge use within the Los Angeles School District. This chapter will draw on the reviewed knowledge and interventions, and continue to follow the KTA Action Cycle with a focus on further adapting available knowledge to the local context and proposing a program that allows for practical application of that knowledge. Later chapters will focus on monitoring knowledge use and evaluating program outcomes.

Adapting Knowledge to Local Context: Programmatic, Institutional, and Cultural Factors

A critical facet of KTA is adapting knowledge to the context in which it is to be shared.

Within LAUSD and within the occupational therapy department, there are programmatic, institutional, and social/cultural factors that will influence knowledge use.

Programmatic Considerations: History and Context

Several years ago, the occupational therapy and physical therapy department of LAUSD started a program that provides support to teachers and classrooms at the elementary level. The program is described as follows:

Advancing Children's Educational Success (ACES) is a specially designed program in which services are targeted to support universal access and participation in meaningful school and life activities for students with moderate to severe disabilities at selected school sites.

The ACES program will assist students with disabilities to develop functional/academic skills, and to participate in daily meaningful school activities through the provision of collaborative and coordinated services to school staff, families, and students. (LAUSD, n.d.-a)

This program provides services and supports outside the realm of what has been prescribed by a student's Individualized Educational Program (IEP). The program is run by occupational therapists in collaboration with physical therapists and assistive technology staff to provide additional support to school sites, staff, and families. The ACES program has a manualized handbook with outlined program expectations, as well as specific OTs designated to provide support and guidance in the program.

In recent years, the ACES program has begun expanding supports to service the district's six CTCs for 18–22 year olds. The CTC program has introduced various

programming, including teacher and parent trainings, classroom supports, and student clubs. Based on available staff and family feedback and program evaluation, these programs have been well-received and perceived as helpful for participants. At this stage, however, the program lacks consistency between sites, with some sites providing weekly or monthly support and some providing only biannual programming. There is no existing program handbook to provide resources or guidance to providers. There is also no established ongoing method of communication between ACES CTC providers which would allow for increased collaboration and program growth. The program proposed herein builds on current programming and utilizes existing resources and supports, while trying to address some of these identified challenges. The result is a theory-driven and evidence-based program model that attempts to improve transition supports and outcomes within the LAUSD CTCs.

Naming the Program

The ACES program was initially named to describe preschool and elementary level programming. As supports have expanded to the CTC level, it has become clear that a new and distinct name would serve to benefit the program. The purpose of having a separate name is to differentiate the program and assist in developing a cohesive program identity, while also alluding to the goals and objectives of the CTC level programming. While ACES has focused primarily on participation and success in an educational setting, ACES CTC has also focused on improving postsecondary outcomes for adult life, considering successes outside of and beyond the educational framework. Using the ACES name will help to emphasize continuity of services and capitalize on the branding and

recognizability of the program within the OT/PT Department and the school district. Use of a distinct sub-name, however, can highlight the differences between the different levels of programming.

The author of this paper proposed several names to the team, and allowed for

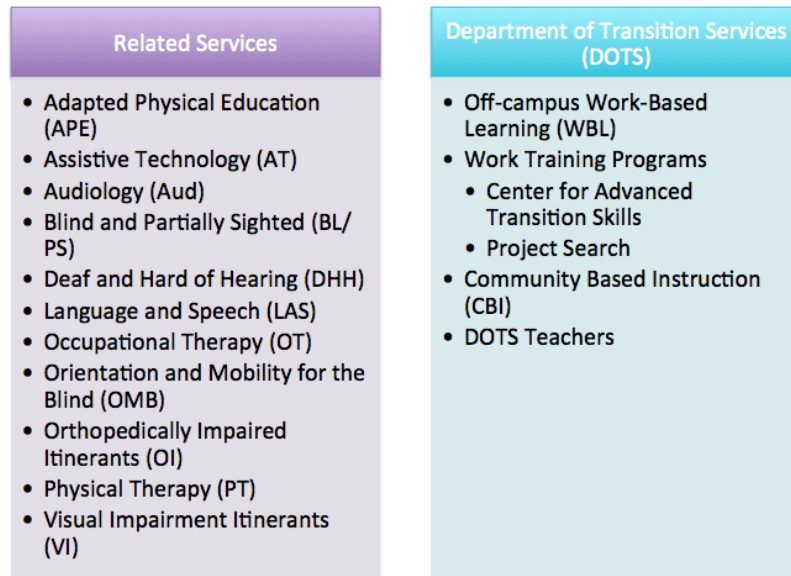


Figure 3: Overview of transition providers and programs within LAUSD.

collective input in selecting a name that best reflected the program’s values and goals.

The name selected was “ACES SOAR: Supporting Opportunities for Adult Readiness,” based on the input of several OT providers as well as department administration. The ACES CTC program will subsequently be referred to as ACES SOAR.

Institutional Considerations

As a large and diverse district, LAUSD also employs a range of service providers and other supports for transition. Some of the available support services are listed in Figure 3.

An important factor in program development is ensuring that there is no overlap or duplication of services. This will be addressed by ensuring that all program providers are familiarized with the range of available services within the district. The program handbook will also place an emphasis on interprofessional collaboration to take

advantage of the range of expertise of various providers.

In addition to the range of providers, the development of this program will also be supported by Multi-Tiered Systems of Support and Response to Intervention Models as discussed in Chapter 2. By embedding itself into the structure of the original ACES program, ACES SOAR will be aligning itself with these district-wide models of service.

Social and Cultural Considerations

LAUSD is the second largest school district in the country, serving a diverse population of over 600,000 students at 1302 school sites, including over 26,000 students enrolled in special education programs (LAUSD, 2016). Ninety-four languages other than English are spoken by students. The student population is 74% Latino, 8.4% African American, 9.8% White, 6% Asian, 0.4% Pacific Islander, and 0.2% American Indian/Alaskan Native (LAUSD, 2016). The district covers a geographic area of 710 square miles which spans all of Los Angeles as well as portions of 26 other cities. Seventy five percent of LAUSD students qualify for a free lunch program based on low socioeconomic status. Subsequently, the district's CTCs vary in size, culture, demographic, and geographic location. Utilizing the logic of KTA, it would follow that a specific set of strategies may not be the optimal choice in all of these locations. The proposed program, therefore, provides OTs with lists of consideration for implementing the program at their site. These considerations will take into account needs relating to culture, language, and socioeconomic status.

Select, Tailor, and Implement Interventions: The Proposed Program

In line with the KTA model and the available evidence reviewed in chapter 3, the proposed program represents a multi-pronged and multifaceted approach to team capacity building. The primary groups targeted in this approach are teachers and staff at transition centers, the parents/families of transition age youth, and the OTs providing ACES SOAR services, as well as other OTs providing direct IEP driven services at district high schools and middle schools. The program components are represented in the Figure 4 and elaborated on below.

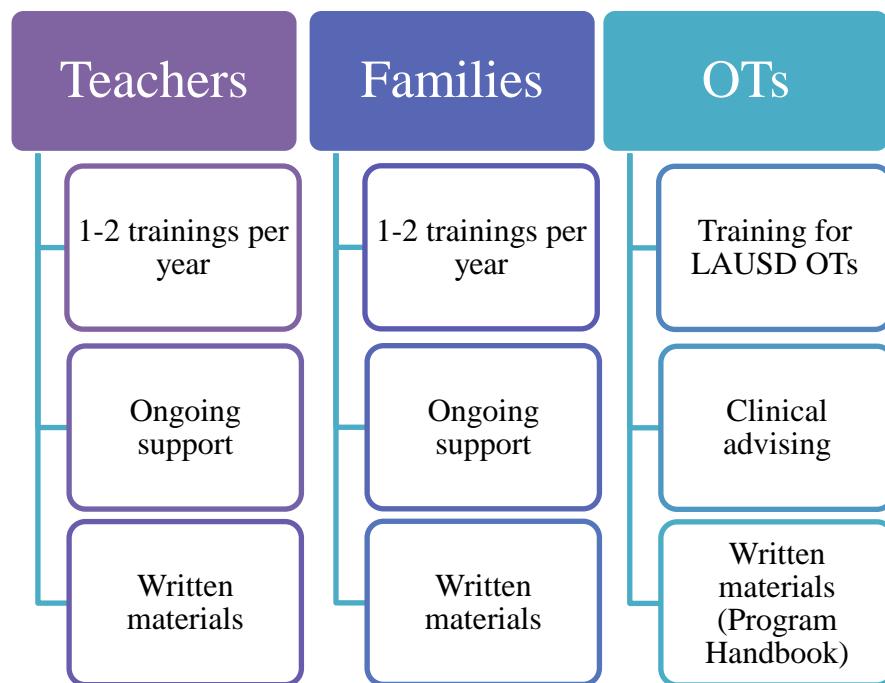


Figure 4: ACES SOAR program activities by target audience.

Teachers

Support and training for teachers will come in the form of formal training sessions, models of ongoing support, and written materials.

Formal Training

ACES SOAR providers will be expected to schedule and provide 1–2 training sessions for teachers and staff at their worksite each school year. The topics for these sessions will be determined through an annual informal needs assessment at the site. This may include expert interviews of administrators, teacher surveys, and review of curricular components. These trainings may be adapted from readily available training modules and/or developed in collaboration with other transition providers as appropriate. Considerations for developing trainings, as well as possible appropriate topics for trainings, will be outlined in the ACES SOAR handbook.

Ongoing Support

ACES SOAR providers will be available to teachers on a regular basis to provide ongoing support, visit classrooms, suggest strategies to support students, or problem solve with teachers on relevant issues. The format for ongoing support will depend on the specific school site, and depend on factors including the size of the school, the number of classrooms/teachers on site, and the school’s culture surrounding staff meetings and trainings. Considerations for selecting an appropriate model of ongoing support will be included in the ACES SOAR handbook. Models of ongoing support may include, but are not limited to, the following:

- Monthly/quarterly visits to each classroom
- Drop-in clinics/Office Hours Model
- Question/Suggestion Box in school office

- Regular check-ins at school staff meetings, with or without time for questions/answer session

Written Materials

Written materials will be developed for both the program in general, as well as to support ongoing trainings. Handouts may be developed related to each training topic to outline key points and provide strategies for practical application of ideas. Teachers may also be given lists of relevant outside resources available in print and online. An ACES SOAR brochure will be available to orient teachers to the range of supports the program provides. Written materials may be developed in collaboration with other service providers, including physical therapists, speech therapists, and others as appropriate. While there has not been much research on the efficacy of written materials, this continues to be a widely used strategy in knowledge translation, as reviewed in chapter two. Therefore, written materials will provide supplemental support for the program, rather than being the primary means of training.

Families

Support and training for families will also include formal trainings, ongoing support, and written materials.

Formal Training

ACES SOAR providers will be expected to schedule and provide 1–2 training sessions for families at their worksite each school year. The topics for these sessions will be determined through an annual informal needs assessment at the site. This may include expert interviews of the school’s parent liaison or president of the parent’s association,

informal interviews in the parent center, formal surveys, or formal/informal focus groups. These trainings may be adapted from readily available training modules and/or developed in collaboration with other transition providers as appropriate. Considerations for developing parent trainings, as well as possible appropriate topics, will be outlined in the ACES SOAR handbook.

Ongoing Support

ACES SOAR providers will be available to families on an ongoing basis to provide support, answer questions, provide linkages to resources to support students in the home, and problem solve with parents on relevant issues. The format for ongoing support will depend on the specific school site, and depend on factors including the level of parent involvement, the types of programming already providing through the parent center, the presence or absence of a paid parent liaison, and the general culture of parents at the school in general. Considerations for selecting an appropriate model of ongoing support will be included in the ACES SOAR handbook. Models of ongoing support may include, but are not limited to, the following:

- Drop-in clinics/Office Hours Model
- Question/Suggestion Box in parent center
- OT attendance at existing parent programming, which may include parent breakfasts, support groups, etc.

Written Materials

Written materials will be developed for both the program in general, as well as to support ongoing trainings. Handouts may be developed related to each training topic to outline

key points and provide strategies for practical application of ideas. Parents may also be given lists of relevant outside resources available in print and online. A newsletter may also be developed to support ongoing communication with families and to provide further information on important topics. An ACES SOAR brochure will be available to orient parents and families to the range of supports the program provides. These written materials may be developed in collaboration with other service providers, including physical therapists, speech therapists, and others as appropriate.

Occupational Therapists

Training and Clinical Advising: Non-ACES District OTs

While ACES SOAR mainly utilizes collaborative approaches as discussed in Chapter 2, it will also provide support for direct service models through training and clinical advising. As studies have shown, few OTs are working with transition age youth, and the small percentage that do work rarely address goals related to transition planning or functional outcomes (Kardos & White, 2005; Michaels & Orentlicher, 2004). This has been true within LAUSD, with many students of transition age having OT goals that address performance components, such as handwriting, rather than transition goals or needs. The need to provide more training for OTs in how to best service this population is readily apparent.

Training

A training module will be developed that orients all OT providers to the role of OT in transition. This module will initially be presented to the over 200 department OTs during a staff meeting. The information will later be adapted into web-based module

optimized for individuals OTs to review on their own time. Table 2 outlines the primary areas of focus for this module, learning objectives for each section, and key resources or required content for each area.

Clinical Advising

To supplement the training module and help sustain new knowledge use, ACES SOAR OTs will also take on the role of clinical advisors. Each ACES SOAR OT will provide support for other OTs working at non-ACES sites in their local regions. This relationship is essentially a type of peer mentorship. The term “peer mentor” however, may only be used within the district under very specific parameters. Therefore, the phrase “clinical advisor” will be used in its place. This role already exists within the department and is well recognized by LAUSD OTs. Currently there are regional Clinical Advising Therapists (CATs) in the areas of assistive technology, sensory integration, assessment and intervention, and equipment mounting. Using the same model and language of the existing program will increase the recognizability and effectiveness of the transition CATs.

For the first 2–4 years of the program, ACES SOAR providers will be given a list of OTs working at the upper schools (middle and high schools) in their region. They will be expected to reach out at the beginning, middle, and end of the school year to offer their support and advice to OTs in developing appropriate transition related goals and selected relevant assessments. Other providers will be encouraged to review proposed IEP goals with transition CATs for all matriculating students. Additionally, the names and areas served by the transition CATs will be printed in the existing staff directory,

increasing accessibility to other providers. After the first few years, the names of Transition CATs will be printed in the staff directory and other providers will be able to reach out to them as needed.

Table 2: Overview of ACES SOAR OT Training Module

CONTENT AREA	LEARNING OBJECTIVES	KEY RESOURCES
Key concepts in providing transition services	<p><i>After reviewing content in this section, OTs will be prepared to:</i></p> <p>Develop treatment sessions that are person-centered.</p> <p>Plan treatments that foster increased self-determination skills.</p>	<p>Michaels & Orentlicher, 2004; National Technical Assistance Center on Transition, 2015*; National Secondary Transition Technical Assistance Center, 2015*</p>
	Utilize principles of Universal Design for Learning in treatment sessions.	*These webinars cover most of the desired content for this training. The authors of this webinar may be contacted for permission to adapt and use parts of the webinars in their entirety.
Overview of LAUSD transition services	<p>Make appropriate referrals for additional needed transition services for students.</p> <p>Initiate interprofessional collaboration to support student goal attainment.</p>	LAUSD, n.d.-c; LAUSD, n.d.-e; NTACT, 2015; NSTTACT, 2015
Transition goal writing	<p>Access and review student's Individualized Transition Plans when developing goals.</p> <p>Develop student goals related to functional performance skills in transition.</p>	<p>NTACT, 2015; NSTTACT, 2015; United States Dept. of Education, 2017</p> <p>Sample LAUSD ITPs</p> <p>Connecticut State Dept. of Education, 2007; LAUSD IEPs</p>

Overview of Transition Related OT Assessments	Use clinical reasoning skills to select and complete appropriate formal and informal assessments when evaluating service needs for transition age youth.	Kardos & White, 2006; NTACT, 2015
	Access standardized assessments available through LAUSD.	List of department assessment libraries
Case Studies	Integrate previous knowledge with presented concepts to develop a treatment plan and goals for a presented student case.	Samples of student IEPs including Individualized Transition Plans, sample goals
	Apply knowledge from previous sections of training to a student on their caseload.	Goal writing/planning worksheets Welligent documentation system, IEP documents

Handbook: ACES SOAR Providers

While OTs have been providing supports in the district’s transition centers for the past few years, no formal handbook or guidelines have existed. As a result, the available supports lack a coherent structure and consistency between sites. ACES SOAR will provide a handbook to all participating providers that outlines expected program outputs, desired outcomes, and process considerations for selecting and implementing appropriate strategies at each site. In line with the program model, the handbook will outline considerations that are consistent with KTA practices. A more detailed outline of the handbook and selected content can be seen in Appendix A.

The basic outline for handbook content is as follows:

1. Introduction

- a. Mission Statement
 - b. Expected Outcomes/Program Goals
 - c. Overview of Program Structure
2. Core Concepts
- a. Overview of OT's role in transition
 - b. Introduction to capacity building
 - c. Introduction to Self-Determination
 - d. Introduction to Universal Design/Universal Design for Learning
 - e. Overview of LAUSD transition service providers
 - f. Tips for inter-professional collaboration
3. Teacher/staff support services
- i. Teacher Trainings
 - 1. Considerations for planning teacher trainings
 - 2. Before the training: Required Steps
 - 3. During the Training
 - a. Sign in form
 - b. Feedback forms
 - c. Photo Release Form
 - 4. After the training: Follow up procedures and forms
 - ii. Ongoing teacher support
 - 1. Overview of models of teacher support
 - 2. Considerations for selecting a model of ongoing support

3. Considerations for evaluating efficacy of ongoing support
- iii. Written materials for teachers and staff
 1. List of available modules/handouts
 2. Tips for creating PowerPoint presentations
 3. Guidelines for handouts/brochures
 4. Procedure for approval of written materials prior to distribution
4. Parent/Family Support Services
 - a. Parent Trainings
 - i. Considerations for planning parent trainings
 - ii. Before the training: Required Steps
 - iii. During the Training
 1. Sign in form
 2. Feedback forms
 3. Photo Release Form
 - iv. After the training: Follow Up Procedures
 - v. Instructions for accessing LAUSD translation services for training events
 - b. Ongoing parent support
 - i. Overview of models of parent support
 - ii. Considerations for selecting a model of ongoing support
 - iii. Considerations for evaluating efficacy of ongoing support

- c. Written materials for parents and families
 - i. List of available modules/handouts
 - ii. Tips for creating PowerPoint presentations
 - iii. Guidelines for handouts/brochures
 - iv. Procedure for approval of written materials prior to distribution
 - v. Instructions for accessing LAUSD translation services for written materials

- 5. Guidelines for being a Clinical Advisor in transition for OTs
 - a. Guidelines for clinical advising
 - i. Methods of advising
 - ii. Expectations for advising
 - iii. Desired outcomes of advising relationship
 - b. List of clinical advising areas by therapist (updated annually)
 - c. Further resources on clinical advising

- 6. Service Tracking Procedures
 - a. Monthly Service Provision Logs
 - b. Consultation Forms
 - c. Other service documentation forms

- 7. Evaluation Procedures
 - a. Evaluation Instructions
 - b. Feedback form for teacher trainings
 - c. Feedback form for parent trainings

- d. Needs assessment survey forms
 - e. Additional survey forms
8. Other transition resources and supports/further reading for providers
- a. List of websites with transition resources
 - b. List of literature/textbooks related to transition
 - c. List of additional trainings and continuing education opportunities related to transition

Conclusion

This chapter outlines the content and structure for ACES SOAR: Supporting Opportunities for Adult Readiness. It represents a multi-faceted and multipronged approach to team capacity building to support transition age youth with disabilities. The ACES SOAR program model draws on the content reviewed in the previous chapter to address identified problems and utilize evidence-based practices. Driven by KTA, the program adapts available knowledge to fit within the cultural and institutional realities of LAUSD. The program primarily uses collaborative approaches, while incorporating a support model to improve the quality of direct transition services offered by OTs in the district. Training materials for OTs will emphasize the importance of using person-centered approaches and developing self-determination in youth. Perceptions of OTs and other service providers are addressed through targeted training efforts that demonstrate the range of supports OTs may provide. Families in the community are engaged through trainings and models of ongoing support. In-person trainings, web-based learning, and supplemental written materials have all been incorporated into various aspects of the

program. Finally, ACES SOAR is integrated into a preexisting program model to capitalize on existing resources and minimize administrative barriers and costs, which will be discussed in further detail in the next chapter.

Chapter 4: Evaluation Plan

Program Background

Over the past five years, LAUSD has devoted time and resources to developing and implementing the ACES program for Achieving Children's Educational Success at the elementary school level. The program uses multi-tiered systems of support to increase universal access and participation in the curriculum for students with moderate to severe disabilities. The model has been developed to align with special education curriculums in the elementary school settings, and consists of several clearly delineated components.

More recently, the department has decided to expand this model to older students, aged 18–22, in the district's Career and Transition Centers. ACES SOAR: Supporting Opportunities for Adult Readiness, as proposed in this paper represents an attempt to clarify the role of OTs in this program and provide theory and evidence driven guidance as the content and process for these programs. ACES SOAR is a multipronged and multifaceted program that provides training and supports for teachers and families at the transition centers, as well as for OTs providing services to transition age youth. The program is currently operating at six sites, with a team of six OTs and two additional OT administrators. Given the diverse nature of LAUSD students and families, the form and content for the trainings and supports is individualized to each site and may vary significantly between locations. Program sites are at currently at various stages both in terms of needs assessment and program implementation.

Evaluation Purpose and Guiding Theory

Proposed evaluation activities align with two steps of the Knowledge to Action

Cycle; namely monitoring and evaluating knowledge use. Graham and colleagues describe several types of knowledge use, including conceptual knowledge use, which refers to changes in levels of knowledge, understanding, and attitudes, and instrumental knowledge use that includes changes in behavior and practice (2006). Both conceptual and instrumental knowledge use will be considered in evaluating the outcomes of the ACES SOAR program.

In the KTA Framework, there is ongoing feedback between the steps of the action cycle, such that program outcomes are inextricably connected with program activities (Graham et al., 2006). Therefore, suboptimal knowledge use may relate to a mismatch between program strategies and intended users. Similarly, strong outcomes would indicate a well-selected knowledge translation strategy. Therefore, evaluation procedures will include information regarding the process of the program, participants' satisfaction with that process, and potential barriers in that process. Considering evaluation data regarding both process (i.e., format through which knowledge was delivered, participant satisfaction with format) and outcomes (i.e., conceptual and instrumental knowledge use) will provide valuable insights into the effectiveness of the program while further informing future program activities and improvements.

The next step in KTA is to determine whether the knowledge that has been shared impacts overall system or health outcomes (Graham et al., 2006). This process would involve evaluating long-term outcomes for youth with disabilities after they have transitioned out of the school system, in areas such as independent living, competitive employment, post-secondary education, and community participation. This long-term

goal is considered within the proposed logic model, as seen in Appendix B, but falls outside the scope of the initial evaluation activities.

Initially, the primary intended users for the evaluation data will be the occupational therapists and administrators involved in program development. These users will be able to use the information for formative purposes, to guide and improve program design and determine the most relevant and useful content for trainings and supports, as well as the most effective format to deliver that content. As the KTA cycle is an iterative and dynamic process, the ongoing evaluation and refinement of program activities is critical to its success. Information on program outcomes, outputs, and impact will also serve summative purposes (Newcomer, Hatrey, & Wholey, 2015). This information will be presented to key stakeholders with decision-making power in order to highlight the utility of the program and secure ongoing funding and other necessary resources.

Evaluability Assessment Plan

Prior to finalizing the evaluation plan and content, an evaluability assessment will be completed with key stakeholders to ensure that a multitude of perspectives inform the process and potential barriers and supports are considered from various viewpoints. The initial evaluability assessment will include the ACES SOAR team, as well as key administrators from the transition centers. Representatives from each of the targeted groups (parents, teachers, OTs) will also be invited to participate in this process. Supportive documents that will frame the conversation may include the following: program goals from the elementary school level ACES program; literature related to the role of OT with transition age youth and identified barriers to OT involvement; OT

department budget and staffing lists; results from previous evaluations, needs assessments, teacher and parent surveys, and minutes from meetings with administrators; annual Gantt chart outlining objectives and timelines (What is a Gantt Chart, 2016); and relevant legislation such as transition sections of the Individuals with Disabilities Education Act and Every Student Succeeds Act.

Prior to the initial EA meeting, relevant text will be consolidated so that only key points will be presented to the larger group. Program developers will present the overall program goals and objectives, and the basic evaluation questions they are seeking to address. They will also summarize the current status of the program as it relates to evaluation goals and purpose. This will allow for a focused larger group discussion that is still framed and grounded by the available information. The group will then have the opportunity to review information collaboratively and share any desired outcomes of the evaluation process that have not yet been presented. In this way, program developers and evaluators are able to identify and include the priorities of key stakeholders that may have been initially overlooked. These conversations will be iterative processes including group discussion, brainstorming verbally and in written form via notes or large poster boards, and smaller group discussions and “sharing out,” and will be guided by a facilitator to reflect and summarize the results. Throughout this process the plethora of available information will be narrowed down and expressed in goals and objectives that accurately reflect the priorities and concerns of program stakeholders.

Proposed Evaluation Questions and Procedures

The specific evaluation questions to be addressed will vary slightly based on the

stakeholder group being targeted, and will be finalized to include the feedback received during the evaluability assessment. Similarly, methods of gathering data need to take into account the culture and potential barriers of the local context, in line with KTA processes, and as determined by the evaluability assessment and discussed in previous chapters. Qualitative and quantitative evaluation options are proposed to yield maximum efficiency and information, while simultaneously being sensitive to the scarce financial and time-related resources currently devoted to the program. Table 3 is an overview of proposed evaluation questions to be addressed related to each group of stakeholders, as well as proposed methods of gathering data. This table also highlights the way specific questions relate to conceptual or instrumental knowledge use as defined in the KTA framework.

Table 3: Program Evaluation Questions and Methods by Stakeholder Group

Stakeholder Group	Questions Evaluating Selected KTA Strategies (Process Questions)	Questions Evaluating Knowledge Use (Outcome Questions)	Data Gathering Methods
<i>Teachers/ Parents</i>	<ul style="list-style-type: none"> • Are teachers/parents satisfied with the trainings being offered by the program? 	<ul style="list-style-type: none"> • Do parents/teachers experience increased feelings of self-efficacy following their participation in trainings? 	<ul style="list-style-type: none"> • Paper/pencil surveys • Focus groups • Classroom Observations
	<ul style="list-style-type: none"> • What additional trainings or support do teachers/parents/students want that OTs can provide? 	<ul style="list-style-type: none"> • Are teachers/parents implementing taught techniques and strategies following programs? (instrumental knowledge use) 	
<i>CTC Site Administrators</i>	<ul style="list-style-type: none"> • Are administrators satisfied with trainings being 	<ul style="list-style-type: none"> • Do administrators report any experienced change to the school 	<ul style="list-style-type: none"> • Surveys (online)

	offered?	community's response and parent attitude toward school staff?	<ul style="list-style-type: none"> ● Informal/ semi-structured interviews and/or focus groups ● Data review (caseload numbers, due process numbers)
	<ul style="list-style-type: none"> ● What additional trainings or support do administrators want that OTs can provide? 	<ul style="list-style-type: none"> ● Are there changes in the number of students receiving IEP-driven OT services and/or the number of due process cases involving litigation against OTs? 	
<i>District Administrators</i>	<ul style="list-style-type: none"> ● What does it cost the district to run this program? 	<ul style="list-style-type: none"> ● Are there fewer complaints or due process cases involving OT at ACES SOAR sites than prior to program implementation and/or as compared to similar sites? 	<ul style="list-style-type: none"> ● Surveys (online) ● Informal/ semi-structured interviews ● Data Review (numbers served, dollars spent, district records)
	<ul style="list-style-type: none"> ● Do program outcomes justify continued allocation of resources to this program? 		
	<ul style="list-style-type: none"> ● Are program resources being utilized effectively? 		
<i>Occupational Therapists</i>	<ul style="list-style-type: none"> ● Are OTs satisfied with the training offered? 	<ul style="list-style-type: none"> ● Following training programs, are OTs demonstrating a higher level of knowledge regarding their role in transition? (conceptual knowledge use) 	<ul style="list-style-type: none"> ● Surveys (paper/ pencil or online) ● Review of IEP goals being addressed by OTs ● Pre/post-tests (paper/ pencil or online)
	<ul style="list-style-type: none"> ● What recommendations do OTs have for improvement of training, related to time, location, and/or format? 	<ul style="list-style-type: none"> ● Following trainings, do OTs experience increased feelings of self-efficacy related to their ability to provide transition services? (conceptual knowledge use) 	

		<ul style="list-style-type: none"> • Following trainings, are OTs that provide IEP driven services addressing goals related to transition rather than performance component goals (i.e. fine motor, visual motor, sensory processing)? (instrumental knowledge use) 	
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Types of Measures

- **Process Measures:** As seen in Table 3, much of the initial information captured in the program evaluation process will be descriptive. This may include information on the number and type of participants, the number and types of programs or trainings being offered, levels of participant satisfaction, and participant recommendations for program improvement and expansion. Along with outcome measures, these process measures will inform evaluators' thinking when drawing conclusions about the efficacy and appropriateness of selected knowledge translation strategies used by the program.
- **Outcome Measures:** Evaluation activities will attempt to establish initial relationships between program activities and outcomes. Short-term outcomes will be the first to be explored, evaluating conceptual knowledge use such as changes in participants' knowledge and perceived self-efficacy relating to the subject matter. Evaluation will also begin to look at the relational nature of different program components, such as how the number of trainings attended relates to the number of classroom strategies a teacher implements in the

classroom, which is an example of instrumental knowledge use. Additional summative evaluations of long-term program outcomes will be explored, developed, and implemented once the program activities are further established. These measures will seek to evaluate both changes in conceptual and instrumental knowledge resulting from the program activities.

Methods of Gathering Data

As outlined in Table 3, evaluation processes will employ a combination of surveys, semi-structured interviews, focus groups, pre/post-tests, and data review.

- **Surveys** have proven to be a quick and cost-effective way of obtaining basic information from large numbers of program participants and stakeholders. Surveys will include both Likert scale items and open-ended questions, allowing evaluators to obtain both qualitative and quantitative information. They will be distributed in paper and pencil or via online methods, depending on the group and the training method. For parents and teacher, paper/pencil methods will primarily be used at the time of the training, to take advantage of the fact that the information is still fresh in the minds of participants and to capitalize on the presence of a captive audience to help increase response rate (Newcomer and Triplett, 2015).
- **Pre and post-training questions** related to the training content will either be added to surveys or distributed separately online or in paper/pencil format, based on the type of training and intended audience. This will provide quantitative data regarding changes to participants' knowledge on the topic.

Other studies have used the pre/post-test method paired with assessment questions to demonstrate the efficacy of programs geared towards increasing OTs' knowledge on specific topics or changing educators' knowledge and understanding (Barnes & Turner, 2000; Christner, 2015).

- **Informal or semi-structured interviews or focus groups** with administrators and program participants will be utilized as part of the needs assessment and evaluation process. The decision to use semi-structured interviews with information rich participants or focus groups with key stakeholders will be determined based on results of the evaluability assessment. These techniques will help yield important information about how and why the program works, to supplement the quantitative data obtained through surveys (Kruger and Casey, 2015).
- **Observations** may also be useful once the program goals and components are well established to determine when and how taught techniques are being implemented in classrooms at program sites. The precise nature of observations (i.e. informal vs. structured, completed by program staff or by objective outside trained observers) will be further determined by program activities, needs, and resources. Any classroom visits would likely be added to the evaluation process after the first year, in order to determine if training content is being implemented with fidelity. For this process, a representative sample of classrooms may be selected at each participating site, which may include 3–5 classrooms per site serving students with a range of diagnoses.

- **Data review** may include information regarding the numbers of students served, number of sites impacted, number of teachers attending programs, number of due process cases being litigated, number of dollars spent, amount of staff hours devoted to the program, student enrollment, student diagnoses, number of staff at a particular site, and other relevant information. This will yield valuable information about the efficiency and reach of program activities.

Scope of the Evaluation

The time period for the evaluation will vary depending on the evaluation component being considered. Evaluation and feedback of trainings will be ongoing and take place immediately following each training session. Similarly, evaluation of short-term outcomes will take place immediately following or within one month of trainings. Classroom observations will take place at specified times during the school year (i.e. beginning and end of each semester).

Currently, the evaluation will be taking place at the six Career and Transition Centers within LAUSD that are implementing the program. Additional sites may be added in coming school years, and they will be incorporated into evaluative processes.

Data Analysis Plan

Once data collection procedures have been initiated, several data analysis methods will be utilized to interpret the raw data. Different methods will be employed for the quantitative data (i.e. attendance numbers, Likert survey items), and the qualitative data (i.e. open ended survey questions, focus groups, interview responses). Evaluators

will look at basic information from the qualitative data, such as mean and mode scores and standard deviations, to determine if trainings are effective and satisfactory.

Comparing mean pretest and posttest scores will allow evaluators to determine if training programs are effectively conveying knowledge to participants. It will also allow providers to revisit how certain information is being delivered if scores on specific items are not showing expected improvement.

In analyzing the qualitative data, enumerative methods will initially be used to summarize data and develop important categories using a simplified framework (Goodrick & Rogers, 2015). Enumerative methods will include developing and refining a basic coding framework, then expressing the data with numeric information such as a word count. This allows the evaluators and program providers to identify recurring themes and make changes accordingly. For example, if 20/25 teacher surveys state that the format of a training was difficult to follow, or if parents state that the time of a training was inconvenient, it would alert program providers to the need to update or change the format for future trainings. The enumerative approach will allow evaluators to make sense of data in a practical and time-sensitive way.

Another approach, known as hermeneutics, may be used to identify meanings, patterns, and themes among open-ended survey questions, interview questions, or focus group responses (Goodrick & Rogers, 2015). The hermeneutic approach involves more complex coding of results to identify themes and patterns, which would allow for a more nuanced analysis of information received. However, the complexity of this approach may be limiting in regards to needed time and resources. Some hermeneutic strategies, such as

using direct quotes from program participants to highlight recurring themes, may be incorporated into evaluation summaries and analyses.

Data Management Plan

LAUSD has recently invested in a cloud-based file hosting service that allows for sharing of documents. A shared folder has been created for the ACES program, and a subfolder will be created for program evaluation materials. Further subfolders will be created to distinguish between the various types of evaluations being conducted and the groups targeted (i.e. needs assessment for parents/teachers, training feedback form from parents/teachers, etc.). At this point most on-site data are being collected in paper form. Participating staff will be taught to upload evaluation data to the shared files for easy access by evaluators participating in data analysis activities. Staff will be trained in proper coding of data, and document titles will include critical information such as site name, assessment date, and abbreviations for type of assessment. A brief document explaining upload and coding procedures will be contained in the main shared folder, for easy staff review as needed. Ultimately, the shared electronic folders may include: typed interview notes, typed observation notes, scanned copies of paper surveys, scanned copies of sign in sheets from trainings to include time, date, and location of trainings, collaboration forms, and other relevant Word, excel, or PDF files.

Conclusion

The proposed program evaluation measures a range of outcomes and processes of the ACES SOAR program in order to provide both formative and summative information to key stakeholders, including program developers and those implementing the program.

The evaluation process encompasses several critical steps of the KTA cycle and acknowledges the dynamic interplay between the various steps of this process. As the program is further developed, evaluation procedures may evolve in kind, in order to ensure the collected data support maintenance of both the efficacy and fidelity of the program as intended.

Chapter 5: Funding Plan

Program Overview

ACES SOAR: *Supporting Opportunities for Adult Readiness* is a multi-pronged and multifaceted capacity building program aimed at maximizing the skills and capabilities of school-district staff and families in supporting youth with disabilities as they transition into adulthood. The program is designed to support students aged 18–22 within the Los Angeles Unified School District Career and Transition Centers (LAUSD CTCs). ACES SOAR targets three primary groups: CTC staff, parents and families of CTC students, and district occupational therapists (OT) supporting students in transition. The program utilizes a range of approaches, including biannual training sessions, models of ongoing consultation, and supplemental written materials. The program has been designed to fit within existing LAUSD programming frameworks in order to capitalize on available resources and minimize additional costs. This chapter describes the program budget and anticipated expenses, and outlines resources and possible funding sources to sustain the program.

Available local resources

As a program embedded within a large school district and working to serve families in the local community, there are a number of available resources that can be accessed at low or no cost. Trainings may be supported by the expertise of both district staff and community members. This may include parent volunteers that are able to offer their expertise on specific topics or their experiences in general. Once the program is well-established, having OTs co-facilitate trainings with parents and families not only

minimizes expenses, but also empowers families and embodies the capacity building goals of the program. Local vendors, organizations, subject matter experts, and business owners may also be approached to lead teacher or parent trainings on various relevant topics. Engaging a range of other district staff and providers to contribute to developing and presenting training programs can likely be done without formal attached costs. Finally, the LAUSD OT department hosts between 60–80 OT fieldwork students annually. These students may be utilized to help run programs or encouraged to complete student projects that can support ACES SOAR program development.

In addition to support with developing trainings, volunteers may be able to assist with developing the format, if not the content, for web-based learning modules and written materials. Assistive technology and information technology staff possess the expertise to help with technical matters and there are other district staff with design skills that may be willing to assist with developing a program logo and creating a consistent look for written materials.

Finally, while there will likely be a small budget for physical materials as described next, trainings can be planned to utilize recycled goods for learning activities, such as cardboard boxes, old magazines, and empty water bottles. These types of materials have been used in the past to help parents create materials such as dressing boards or visual schedules. Families and school sites have typically been open to donating recycled materials as requested. School-based OTs and staff are often skilled at maximizing their impact with minimal financial resources and this program will certainly draw on that skill set.

Needed resources: Budget

The most significant associated expenses for this program will be that of staffing. ACES SOAR providers are first and foremost school-based OTs carrying their own caseload. They will require workload release time to provide services as required of this program. There are currently six active sites that the program will service. A reasonable amount of time for providers to work on this program is 0.5 days per week. This amounts to a total of three days per week, which is 0.6 full time equivalent positions. Other expenses associated with production of written materials and program supplies are outlined in Table 4.

Table 4: Proposed Program Budget for ACES SOAR

Cost	Year 1	Year 2
Personnel (salary and benefits)	6 staff*0.5 days/week workload release time= 3 days=0.6 FTE positions Starting salary = \$73,452 $73452*0.6 = \$44071$	Same
Consultants (salary)	Internal staff only, no consulting fees	Same
Instruction	Time for staff trainings and meetings factored into workload release time, included in personnel costs	Same
Equipment	Materials to support students at the site will come out of school budget, materials for specific students can be ordered through specialized low incidence funding – no additional cost to OT department Equipment such as projectors can be checked out from school sites for no cost.	Same
Supplies	\$50 per training session to fund learning activities and other needed materials. 6 sites * 4 trainings per year = $24*50 = \$1200$	Same

Communication (telephone/postage)	Employees will access school site phones, work computers, internet, etc. Communication with families can be sent home via flyers with students. No associated cost.	Same
Materials preparation	Brochures/printed materials \$0.17/brochure – approximately \$350/year	Program brochures ordered in bulk year 1, cost may go down slightly in year 2, approximately \$250/year
Travel	Included in employee’s workday, no additional cost	Same
Rental of facilities	District facilities will be utilized. No associated cost.	Same
Evaluation	Program staff will conduct evaluations. No additional cost.	Same
Dissemination costs not covered above	\$1564.50	\$1564.50
Total Expenses	\$47,185.50	\$47,085.50

Potential Funding sources

Currently, the LAUSD OT and physical therapy (PT) department has a dedicated annual budget for ACES programming that can cover the costs associated with ACES SOAR. This budget is part of the department’s strategic operating plan (SOP). This plan has to be approved annually by the upper levels of administration within the school district, and has received approval for the past six years. Table 5 contains additional sources of potential funding that can supplement departmental budgets or replace funding if current fiscal realities shift and internal financial support becomes unavailable.

Table 5: Potential Funding Sources for ACES SOAR

Type of funding	Source	Requirements and Examples
Grant	California State Parent Teacher Association http://capta.org/pta-leaders/programs/grants-awards/parent-education/	<ul style="list-style-type: none"> • Grants range from \$500–\$2000. • Available to Parent Teacher Associations for developing and implementing programs and projects aimed at enhancing parent education. • Emphases on parenting skills, transitions, and special needs. • No information on previous grantees listed. (California State Parent Teacher Association, 2016).
Grant	W.M.Keck Foundation http://www.wmkeck.org/grant-programs/southern-california-program	<ul style="list-style-type: none"> • Funds programs that promote education and healthy development of youth and enhance the lives of people in the greater Los Angeles Area. • Special emphasis on youth from low-income families and special needs populations. • Grants typically range from \$100k to \$500k. • University of Southern California, Los Angeles, received \$500,000 to partner with LAUSD and open high quality public schools serving low income families. (W.M. Keck Foundation, 2017).
Grant	John Ben Snow Memorial Trust http://johnbensnow.org/john-ben-snow-memorial-trust/	<ul style="list-style-type: none"> • “Offers grants to organizations...offering services targeted for disabled individuals, either physically, mentally, or emotionally.” • No min or max, but grants generally range from \$10k–25k. • Previous grantee established summer camp to strengthen bonds between children and their incarcerated fathers. (John Ben Snow Memorial Trust, 2016).
Grant	Doug Flutie Jr. Foundation for Autism http://www.flutiefoundation.org/apply-grant	<ul style="list-style-type: none"> • Awards range from \$10k–\$20k. • Geographic focus includes Southern California. • “Provides funding for...schools that are providing resources and assisting children with autism spectrum disorder and their families through education ..., advocacy programs, ..., direct family support, and equipment...family programs, social skills training, family events, ...opportunities for job training, vocational skills programs, employment.”

		<ul style="list-style-type: none"> • Previous grant awardee provided family support grants; school vacation week & family events, received \$15000. (Doug Flutie Jr. Foundation for Autism, 2014).
Grant	<p>CalWORKs: California Work Opportunity and Responsibility to Kids 2017–18 http://www.cde.ca.gov/fg/fo/profile.asp?id=4075</p>	<ul style="list-style-type: none"> • For public school adult education programs. • Provides education and training to prepare eligible clients for entry level employment. • Diverts eligible clients into short-term education and training programs leading to employment • Funding based on number of eligible clients. (California Department of Education, 2017).
Grant	<p>American Occupational Therapy Federation Intervention Research Grant Program http://www.aotf.org/scholarshipsgrants/aotfinterventionresearchgrantprogram</p>	<ul style="list-style-type: none"> • Program mission is to “advance the science of occupational therapy to support people's full participation in meaningful life activities.” • Provides grants to programs to lay groundwork for larger scale research projects. • Previous relevant projects include “Supporting Employment Through Self-determination for Young Adults with ASD” by Evan Dean and “An Environment Problem-Solving Strategy for Parents of Youth with Disabilities” by Jessica Kramer (AOTF, 2017a; AOTF, 2017b).
Grant	<p>Bank of America Charitable Foundation https://about.bankofamerica.com/en-us/global-impact/charitable-foundation-funding.html#fbid=zpGzyg2c25H</p>	<ul style="list-style-type: none"> • Available to nonprofits to serve individuals, families, and communities with focus on economic mobility. • Priority focus for 2017 is on workforce development, education and basic needs. • Youth employment is another area of focus. • Sample programs listed include high school completion programs, skills-training (hard and soft skills), seasonal employment, internship opportunities, mentoring for teens and young adults, social enterprises. (Bank of America, 2017).
Grant	<p>Dudley Allen Sargent Research Fund: Doctoral Student Competition</p>	<ul style="list-style-type: none"> • For post-professional doctoral students at Boston University’s Sargent College. • Provides financial assistance for students to implement or complete doctoral projects. • Grants of up to \$5000. (Boston University, n.d.).

	https://www.bu.edu/sargent/research/research-administration/dudley-allen-sargent-research-fund/	<ul style="list-style-type: none"> • One previous study funded by this grant was titled “Qualities of Caregiver–Child Interaction During Daily Activities of Children Born Very Low Birth Weight With and Without White Matter Disorder.” (Kadlec, Coster, Tickle-Degnen, & Beeghly, 2005).
Crowdsourcing	DonorsChoose https://www.donorschoose.org/about	<ul style="list-style-type: none"> • Crowdsourcing website that is designed for public school teachers to request funding to support classroom programs and student needs. Can be used for specific projects and trainings. • Previous projects have included computers for classroom, textbooks, materials for sensory/break corner. (DonorsChoose, 2017).

Conclusion

ACES SOAR was designed to utilize available resources within the public school system to the greatest extent possible in order to minimize the program’s financial costs. In order for the program to succeed, however, it will require adequate workload release time for staff to develop and implement needed supports. While this staffing need is currently incorporated into the departmental budget, this chapter outlines other possible funding sources to supplement or replace this funding should that become necessary in the future. Additional program materials can to a large extent be donated, scavenged through recycled materials, or borrowed from the department and school sites. Specific materials may be purchased through available funding, grants, or crowdsourced donations. The expenses needed to run this program will remain largely stable from year to year.

Chapter 6: Dissemination Plan

Program Overview

ACES SOAR: *Supporting Opportunities for Adult Readiness* is a multi-pronged and multifaceted capacity building program aimed at maximizing the skills and capabilities of school-district staff and families in supporting youth with disabilities as they transition into adulthood. The population of transition age youth with disabilities continues to demonstrate poorer postsecondary outcomes than their peers without disabilities in relation to competitive employment, independent living, and community participation (Gaumer, Morningstar, & Clark, 2004; Haber, et al., 2016; Lindstrom, Doren, & Miesch, 2011). To date, there is a dearth of occupational therapy programs and services for this population are not yet mainstream (Kardos & White, 2005). Within Los Angeles Unified School District, there are several Career and Transition Centers (LAUSD CTCs) serving students with disabilities aged 18–22. By providing training and consultation to staff, families, and OTs, ACES SOAR empowers teams to work towards improved postsecondary outcomes for these youths. The program utilizes a range of approaches, including training sessions, models of ongoing consultation, and supplemental written materials. Dissemination efforts for this program will target groups both within and outside of the school district to increase the depth and breadth of the supports provided.

Dissemination Goals

In their efforts to disseminate selected key messages derived from ACES SOAR, program developers and providers will be guided by several short and long-term goals

that relate to the impact of the program on its target demographic both within and outside of LAUSD.

Long Term Goals:

- Program will become a standard component of district transition centers, which will increase the effectiveness and reach of OT involvement within the district.
- Program will serve as a model for evidence-based and effective transition programs in other school districts or settings.

Short Term Goals:

- Maintain or increase district resources allotted to the program.
- Increase inclusion of OT practitioners in relevant decision-making processes for the district (i.e. selection of curricular components, environmental design).
- Establish collaborative relationships between LAUSD OTs and other OTs serving transition populations.

Target audiences

In order to achieve the previous goals, dissemination efforts will be geared towards the following audiences.

- **Primary Audience:** The primary audience for dissemination of program results will be administrators and staff within LAUSD that work with transition age youth programs and related service programs. Administrators have the ability to make decisions about allocation of time and funding resources, as well as structural decisions about operations in the transition centers, and inclusion or exclusion of occupational therapy (OT) practitioners from key decision-making

processes. Other transition staff may not have the same level of authority as administrators, but will dictate the day to day realities of the transition centers. For example, a computer teacher familiar with the functions of ACES SOAR may choose to consult the OT before purchasing new computer tables.

- **Secondary Audience:** The secondary audience for dissemination will be school based occupational therapists from other districts, or community OTs working with transition age youth. These groups may be able to adapt the program in part or in whole to support the populations in their settings.

Key messages

For LAUSD Staff and Administrators:

- Students with disabilities continue to have significantly less involvement than their peers in areas related to post-secondary education, competitive employment, community inclusion, and independent living (Gaumer, Morningstar, & Clark, 2004; Haber, et al., 2016; Lindstrom, Doren, & Miesch, 2011). OTs can work to remediate specific deficits, analyze and adapt task demands and environments, and identify and access contextual supports, all while supporting a client's occupational goals and needs. These practices align the profession closely with the person-centered practices, Universal Design for Learning approaches, and interventions to increase self-determination skills that are proven predictors of improved post-secondary outcomes (Field, Sarver, & Shaw, 2003; Michaels & Orentlicher, 2004; Palmer et al., 2012; Wehmeyer & Palmer, 2003). Therefore, OTs should be included as key players in transition programs.

- Program results indicate parent and staff satisfaction with services provided and with experience in attending the program. Parents and staff also report increased self-efficacy among participants. This will allow for communities to provide better quality support for transition age youth. It also establishes increased levels of trust and collaboration between families and the school sites. *Note: This key message will include results of the program evaluation, and may be amended based on actual results.*
- Integrating OT supports into the school site and empowering teachers to provide more effective student supports in their classroom may decrease the number of students at the site that require more intensive direct services as outlined in their Individualized Education Program(IEP). This will in turn help address staffing shortages. Additionally, the increased level of trust and communication between sites and families may result in fewer due process cases being litigated against the school district.

For Occupational Therapy Practitioners:

- OTs have valuable contributions to make to the area of transition for youth with disabilities. OT professional training and experience fosters development of skill sets that align closely with the needs in this area of practice. OTs utilize holistic approaches that address personal, environmental, and contextual factors, and work to remediate specific deficits, analyze and adapt task demands and environments, and identify and access contextual supports, all while supporting a client's occupational goals and needs (Michaels & Orentlicher, 2004). These skills make

OTs experts in implementing the person-centered planning methods that are an important piece of transition programs (Michaels & Orentlicher, 2004). OTs further recognize the importance of occupational choice and balance, which closely aligns with evidence based practices in self-determination (Field, Sarver, & Shaw, 2003; Palmer et al., 2012; Wehmeyer & Palmer, 2003). Additionally, OTs' ability to analyze and adapt activities to meet the needs of various clients supports Universal Design for Learning approaches. OTs should be aware of how to apply their skills to transition practices and feel confident that they are valuable team players in this area.

- Team capacity building approaches are an effective and efficient way to impact large groups of people without requiring significant resources in regards to funding or staffing.
- Engaging in programs that have high levels of participant satisfaction while increasing the visibility and understanding of role of OT is good for the profession overall, and moves us toward our centennial vision that “occupational therapy is a powerful, widely recognized, science-driven, and evidence-based profession with a globally connected and diverse workforce meeting society’s occupational needs” (AOTA, 2006).

Sources/messengers

- **For LAUSD Staff and Administrators:** The coordinating therapist for the OT department, Dr. Lisa Test, has worked within the district for over 20 years and accordingly has a large sphere of influence and respect among key players. Along

with other OT department supervisors, she has fortunately been a strong supporter of this project from its inception. The department leadership has committed to helping further disseminate project activities and results among key players in the district. Additionally, principals of the school sites where ACES SOAR is being implemented may become strong advocates for the program, and will have power to influence their own colleagues at various levels of administration. These principals and/or vice principals may be called on to support and attest to the program's utility and impact.

- **For Occupational Therapy Practitioners:** The OT administrators mentioned previously are firmly rooted within their professional communities and will be invaluable in reaching out to broader audiences as well. Additionally the Occupational Therapy Association of California (OTAC) and the American Occupational Therapy Association (AOTA) are well regarded and respected professional associations... Presentations or publications disseminated under the auspices of these associations will have a stronger influence on OTs. AOTA additionally runs a special interest section on school-based practice and a workgroup focusing on transition (AOTA, 2017a). These subgroups would be ideal collaborators in disseminating the results of this program.

Dissemination Activities

For LAUSD Staff and Administrators:

Dissemination activities geared towards LAUSD staff and administrators will include a combination of person-to-person contact, written materials, and electronic

media. Initially, meetings will be held with key players and decision makers. To date, meetings have already been scheduled with the district's head of related services and the head of transition centers. These meetings will review program activities and results to increase buy in from those with authority to allocate critical resources. Meetings with school-site administration will then take place to increase awareness and understanding of the program. Program brochures and fact sheets will be distributed as supplemental materials at these meetings. Eventually, the development of a website or social media page may be used to inform key players of ongoing program activities through the sharing of flyers, pictures, and other program updates. These meetings will be attended by OT program administrators as well as the OT practitioners working at ACES SOAR sites. The website will be a collaborative effort of all ACES SOAR providers with ongoing contributions about activities at their sites.

For Occupational Therapy Practitioners:

Program dissemination efforts geared towards OT practitioners outside of the school district will include written information, person-to-person contact, and electronic media. An article summarizing initial results and program activities may be submitted to a non-peer reviewed journal, such as *OT Practice Magazine*. This would serve to establish initial visibility for the program and allow ACES SOAR providers to begin considering how their program can be framed when communicating with a broader professional audience. Subsequently, a presentation may be developed for OTAC or AOTA conferences. After completing initial presentations and receiving feedback from professional colleagues, the content of the presentation may be developed into a web-

based module that outlines the theoretical grounding, evidence base, and key program components. This information is intended to encourage other practitioners to replicate and adapt the program in their settings as appropriate. ACES SOAR providers and LAUSD OT administrators will collaborate on the content and form of these presentations and publications.

Budget

Dissemination efforts within the district will take place during practitioners' devoted ACES SOAR time. This workload release time is factored into providers' workloads as part of the program model. Program brochures have also been factored into the budget for ACES SOAR. Brochures that are distributed to families and school site staff can be used when meeting with administrators. Therefore, no additional dissemination budget will be required for these efforts.

Development of written materials and presentations to provide to outside practitioners can also be completed as part of LAUSD employees' workload expectations. As per district policy, employees are required to use their personal/sick days when attending conferences. Therefore, the district will not directly bear the cost of those work days that employees take off to present. It is most likely that employees choosing to attend and present at these conferences will be expected to pay for registration, travel, and accommodations. A basic overview of approximate expenses for the most recent AOTA/OTAC conferences is included in Table 6. Future efforts to secure funding for this program may attempt to cover costs for these dissemination activities, including conference registration, accommodations, and travel. It is unlikely that

presentations will take place at both conferences every year. It may be that this dissemination activity takes place twice in the first year and not in the second, or at one conference the first year and the second conference the following year. Therefore, the funding plan in Chapter 5 includes the total cost of both conferences averaged over the course of two years.

Table 6: Costs of Dissemination Activities Not Otherwise Included in Program Budget

<i>Conference</i>	OTAC 2017	AOTA 2017
<i>Registration Fees</i>	• \$309	• \$523
<i>Travel Cost</i>	• \$162 roundtrip airfare, LA to Sacramento	• \$398 roundtrip airfare, LA to Philadelphia
<i>Hotels</i>	• \$329x3 nights = \$987	• \$250x 3 nights = \$750
<i>Total Cost</i>	• \$1458	• \$1671
<i>Annual Cost for Year 1 and Year 2 (Average)</i>	• \$1564.50	• \$1564.50

Evaluation

In determining the effectiveness of dissemination activities, evaluative efforts will consider practical and observable changes resulting from dissemination.

For LAUSD administrators and staff, the following will be considered in evaluating the success of dissemination efforts:

- Annual program budget (increased, decreased, or maintained)
- Number of sites served by ACES SOAR (+/-/=)
- Number of additional ACES SOAR activities taken on by practitioners (i.e. advisory roles, serving on committees, increased training efforts)

For outside OT practitioners, the following will be considered in evaluating the success of dissemination efforts:

- Requests for training/consultation from other school districts
- Number of programs transition programs developed in other school districts inspired by ACES SOAR (based on reports/feedback from staff in those districts)

The key components of the dissemination plan are summarized in Table 7.

Table 7: Overview of Dissemination Activities for ACES SOAR

	LAUSD Staff/Administration	OT Practitioners
Key Messages	<ul style="list-style-type: none"> • OTs have necessary skills to be critical players in transition services • Parent and staff training increases the capacity of teams to provide quality services, thereby reducing needed IEP driven OT services • Staff and family satisfaction increases trust, collaboration, and communication, which improves the quality of services provided and may additionally lead to decreased litigation against the district 	<ul style="list-style-type: none"> • OTs have an important role to play in supporting youth in transition. • Team capacity building efforts can reach a large number of people with minimal required resources. • Increasing the involvement and visibility of OT among school staff and families is good for the profession.
Sources/ Messengers	<ul style="list-style-type: none"> • OT Department Administration and staff • School site principals 	<ul style="list-style-type: none"> • LAUSD OT department administration and staff • OTAC • AOTA (including school-based and transition subgroups)
Dissemination Activities	<ul style="list-style-type: none"> • Person-to-person meetings • Presentations • Brochures/fact sheets • Social media/website 	<ul style="list-style-type: none"> • Published articles • Web-based modules • Conference presentations

Budget	<ul style="list-style-type: none"> • Incorporated into program budget via workload release time • No additional dissemination costs 	<ul style="list-style-type: none"> • Preparation time incorporated into program budget via workload release time • Providers pay conference expenses
Evaluation	<ul style="list-style-type: none"> • Annual program budget (+/-/=) • Number of sites served by ACES SOAR (+/-/=) • Number of additional ACES SOAR activities taken on by practitioners 	<ul style="list-style-type: none"> • Requests for training/consultation from other school districts • Number of programs transition programs developed in other school districts inspired by ACES SOAR

Conclusion

Through ongoing and coordinated activities as listed in Table 7, dissemination efforts will work to ensure program sustainability, increase the scope and depth of the program within the district, offer a format for successful programs in other districts, and contribute to the forward movement of the field of occupational therapy as a whole.

Chapter 7: Conclusion

This project presents an evidence-based and theory-driven model through which occupational therapists (OTs) can provide transition supports for youth with disabilities as they prepare for postsecondary pursuits. Historically limited OT involvement in this practice area has been documented, and associated with barriers that include OTs' perceptions that other professionals are handling transition services, lack of understanding of the role of OT by other team members, lack of funding within schools, and inadequate time on OTs' caseloads to address services not mandated in a student's Individualized Education Program (IEP) (Kardos & White, 2005; Spencer, Emery, & Shneck, 2003). Given the identified barriers, a knowledge translation approach was selected to address the knowledge of OTs and other professionals as well as contextual barriers and possible supports in implementing this type of program. While the program has initially been designed for implementation within the Los Angeles Unified School District (LAUSD), the following discussion highlights how the concepts and structures of Supporting Opportunities for Adult Readiness (SOAR) may apply in other locations and contribute to the forward movement of the OT profession as a whole.

Integration of the Knowledge to Action Process Framework

In addressing the lack of OT involvement in postsecondary transition, the Knowledge to Action (KTA) process framework has been proposed as a useful model through which to understand both the problem and possible solutions. KTA utilizes an iterative process of knowledge selection, adaptation, implementation, and evaluation through which knowledge use can ideally be sustained in a specific context and under

specific circumstances (Graham et al. 2006). This Action Cycle provides a detailed guide of critical steps for successful program development, improvement, and maintenance, which can be applied both to transition programming as well as other areas of practice. This project highlights one example of KTA's application in expanding the role of OT, providing detailed descriptions of how each action cycle step has been integrated into the proposed program. Other districts can use this guide as a model for developing their own programs that will best serve the needs of their specific populations.

ACES SOAR: Applications within LAUSD and the Broader School-Based Community

The proposed program is a multi-faceted and multi-pronged approach to team capacity building to support transition age youth with disabilities. It targets staff and families as well as school-based OTs, to maximize their skills and capabilities in supporting these youths. Rather than offer a prescribed set of activities, ACES SOAR offers a framework to guide OTs in using KTA to select and implement appropriate interventions for their specific site and population. This allows for consideration of the cultural and institutional realities of the context in which the program is being implemented.

Each program component of ACES SOAR was selected based on available literature regarding current best-practice, and as such is intended to apply broadly in various school-based practice settings. In line with available evidence, ACES SOAR primarily uses collaborative support models to effectively increase the ability of communities and teams to support improved outcomes for transition age youth with

disabilities (Association of University Centers on Disabilities, 2003; Jackson, Rankin, Siefkin, & Clark, 1989; Jackson, 1990; Missiuna et al., 2012; Stewart, 2011). Team capacity building approaches have been used with varying degrees of success in a number of programs, and represent a shift away from providing services geared towards individual students, and instead aims to increase the knowledge of teachers, parents, and educational teams regarding ways to best support the student (Campbell, Missiuna, Rivard, & Pollock, 2012; Missiuna, et al. 2012, Nel & van der Westhuyzen, 2015; Michaels and Orentlicher, 2004; Stewart 2009, 2011; Wynn, Stewart, Law, Burke-Gaffney, & Moning, 2006). Educators, OTs and community members involved in collaborative programs indicated feeling increased knowledge regarding transition services and supports, more empowered to help students in transition, and/or feelings of validation regarding the work they were currently doing (Abbott & Provident, 2016; Campbell et al., 2012; Wynn et al., 2006). For school districts with limited funding and other resources, ACES SOAR emphasizes the utility of team capacity building approaches as an effective and efficient way to impact large groups of people with minimal resources in regards to funding or staffing.

Parent trainings have also been integrated into the ACES SOAR model, as parent involvement and parent satisfaction have been linked to improved outcomes for youths (Nel & van der Westhuyzen, 2015; While, Forbes, Ullman, Lewis, Mathes, & Griffiths, 2004; Wynn et al., 2006). In programs that have included components of parent education, parents have perceived that OT involvement led to improved outcomes for their child (Journey & Loukas, 2009; Nel & van der Westhuyzen, 2015). The additional

component of training OTs is critical to the program's success as well, as OTs involved in collaborative training models have reported that they were able to make a greater impact in supporting all students using this type of model (Campbell et al., 2012, Missiuna et al., 2012).

Funding Considerations and Efforts to Expand and Sustain Programming

As proposed, ACES SOAR integrates into a pre-existing LAUSD program in order to capitalize on existing resources and minimize costs. Other districts may choose to fund similar programs through program budgets in the form of employee workload release time or through available local and federal grants. In order to sustain ongoing support for and interest in the program, it is recommended that dissemination efforts target two primary groups; school-district administrators and stakeholders, and OTs outside of the district. School district staff should be made to understand the impact and efficacy of program activities, as well as participant satisfaction with the program, in order to secure ongoing resources. The goal of disseminating program activities to outside OTs is to contribute to the overall expansion of the profession's current role in transition.

Implications for Occupational Therapy Involvement in Postsecondary Transition

By catering to multiple groups and relying on multiple targeted training and support strategies, ACES SOAR represents an innovative approach to OT transition support services based on available research and evidence. Both the structure and content of the program are informed by evidence and guided by theory. In line with the problem identified, perceptions of OTs and other service providers are addressed through targeted

training efforts that demonstrate the range of supports OTs may provide. Working with teachers and families that may not otherwise receive direct OT services increases visibility and understanding of the role of OT while building a sense of trust and collaboration with the school community. This benefits not only the school and families, but the profession of occupational therapy as we move towards our vision that “occupational therapy maximizes health, well-being, and quality of life for all people, populations, (American Occupational Therapy Association, 2016).

In sum, ACES SOAR outlines a dynamic and evolving set of program activities that collectively will impact the perceptions and role of OTs within a school district. It provides a systematic approach through which other districts can evaluate transition needs and provide supports. Using KTA to guide a targeted knowledge translation effort, ACES SOAR takes into consideration the unique cultural and institutional needs of the context in which it is implemented, while also contributing the overall goal of transition services to provide a “coordinated set of activities...to facilitate the child's movement from school to post-school activities,” (IDEA, 2004).

Supporting Materials

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Appendix D: Executive Summary	103

Appendix A: Outline of Content and Select Components of ACES SOAR Handbook

ACES SOAR HANDBOOK: TABLE OF CONTENTS

<i>SECTION</i>	<i>PAGE</i>
I. Introduction	_____
II. Core Concepts	_____
III. Teacher/staff support services	_____
IV. Parent/Family Support Services	_____
V. Guidelines for Clinical Advising	_____
VI. Service Tracking Procedures	_____
VII. Evaluation Procedures	_____
VIII. Additional Resources	_____

Section I: Introduction

- I. Introduction
 - a. Mission Statement
 - b. Expected Outcomes/Program Goals
 - c. Overview of Program Structure

The purpose of this section is to articulate the mission, desired outcomes, and structure of ACES SOAR.

Learning Objectives

1. After reviewing the materials in this section, providers will be prepared to articulate program mission and goals to families and staff at the CTCs.

Section II: Core Concepts in Transition

II. Core Concepts

- a. Overview of OT's role in transition (AOTA: <https://www.aota.org/-/media/Corporate/Files/AboutOT/Professionals/WhatIsOT/CY/Fact-Sheets/Transitions.pdf>)
- b. Introduction to capacity building (VicHealth: https://www.vichealth.vic.gov.au/~/-/media/resourcecentre/publicationsandresources/general/capacity_building_factsheet.ashx)
- c. Introduction to Self-Determination (Council for Exceptional Children/National Council on Secondary Education and Transition: http://higherlogicdownload.s3.amazonaws.com/SPED/7deb9f2e-5efb-494a-86f6-51e993a1d062/UploadedImages/DCDT-Fast-Facts-Self-Determination_Delphi_Final.pdf)
- d. Introduction to Universal Design/Universal Design for Learning (CAST : <http://castprofessionallearning.org/wp-content/uploads/2014/05/UDL-Guidelines-2014.pdf>)
- e. Overview of LAUSD transition-related service providers
- f. Tips for inter-professional collaboration

The purpose of this section is to orient ACES SOAR providers with some of the identified best-practices and core concepts that inform evidence-based transition practice.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Advocate for the involvement of OTs in transition planning.
2. Develop training goals related to team capacity building.
3. Provide parents and teachers with strategies to support self-determination at home and school.
4. Assist teachers in implementing UDL strategies in the classroom.
5. Make appropriate referrals for district based transition services.
6. Meaningfully reflect on the efficacy of their collaboration with other staff.

Section III: Teacher/staff Support Services

- III. Teacher/staff support services
 - a. Teacher Trainings
 - i. Considerations for planning teacher trainings
 - ii. Before the training: Required Steps
 - iii. During the Training
 - 1. Sign in form
 - 2. Feedback forms
 - 3. Photo Release Form
 - iv. After the training: Follow up procedures and forms
 - b. Ongoing teacher support
 - i. Overview of models of teacher support
 - ii. Considerations for selecting a model of ongoing support
 - iii. Considerations for evaluating efficacy of ongoing support
 - c. Written materials for teachers and staff
 - i. List of available modules/handouts
 - ii. Tips for creating PowerPoint presentations
 - iii. Guidelines for handouts/brochures
 - iv. Procedure for approval of written materials prior to distribution

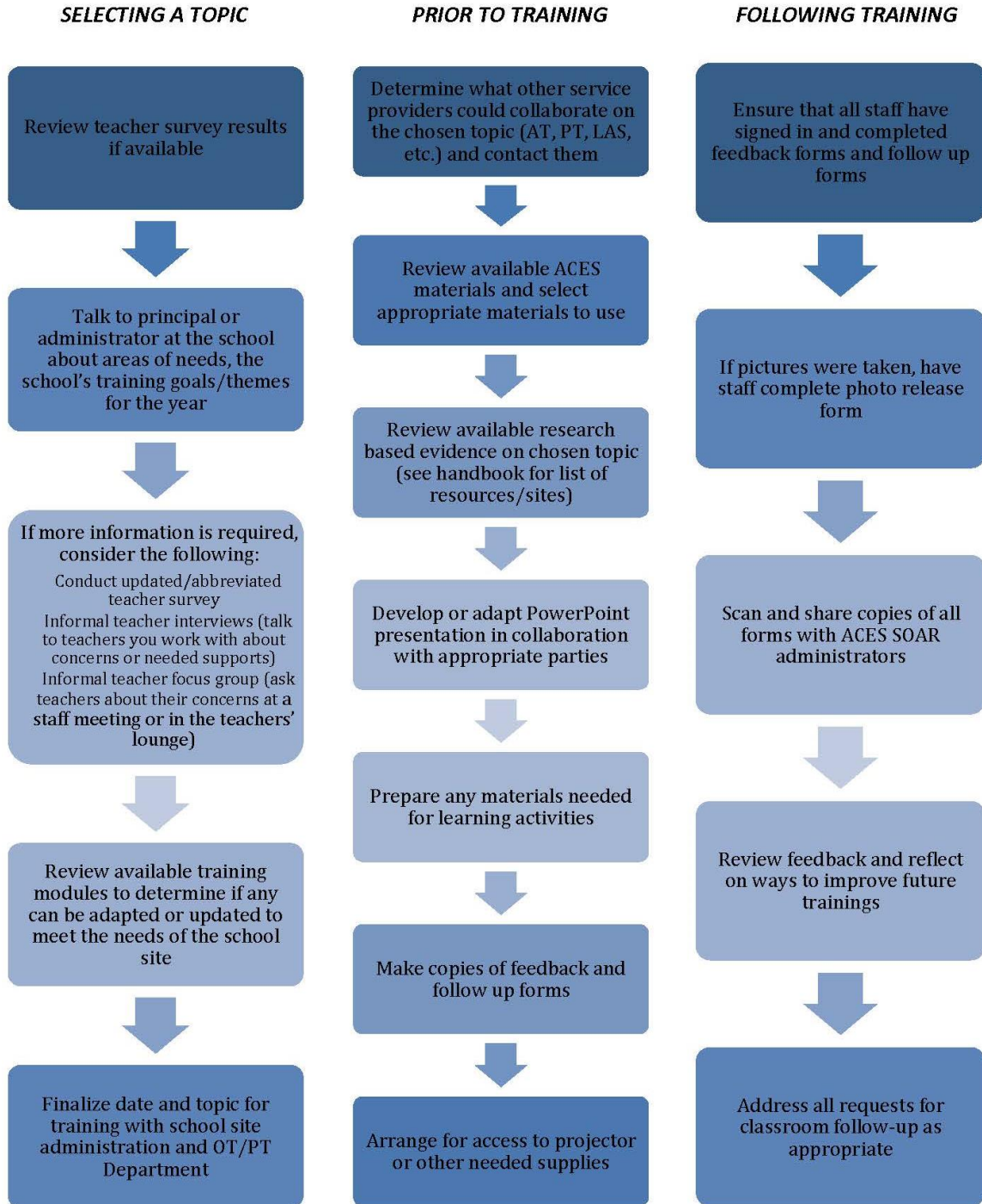
The purpose of this section is to familiarize providers with the range of supports ACES SOAR provides to CTC staff.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Plan, implement, and evaluate teacher trainings.
2. Select and implement a model of ongoing support for teachers.
3. Develop and distribute evidence-based written materials in line with OT/PT department policies and standards.

ACES SOAR: Considerations for Planning Teacher Trainings



Section IV: Parent/Family Support Services

- IV. Parent/Family Support Services
 - a. Parent Trainings
 - i. Considerations for planning parent trainings
 - ii. Before the training: Required Steps
 - iii. During the Training
 - 1. Sign in form
 - 2. Feedback forms
 - 3. Photo Release Form
 - iv. After the training: Follow Up Procedures
 - v. Instructions for accessing LAUSD translation services for training events
 - b. Ongoing parent support
 - i. Overview of models of parent support
 - ii. Considerations for selecting a model of ongoing support
 - iii. Considerations for evaluating efficacy of ongoing support
 - c. Written materials for parents and families
 - i. List of available modules/handouts
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 - iv. Procedure for approval of written materials prior to distribution
 - v. Instructions for accessing LAUSD translation services for written materials

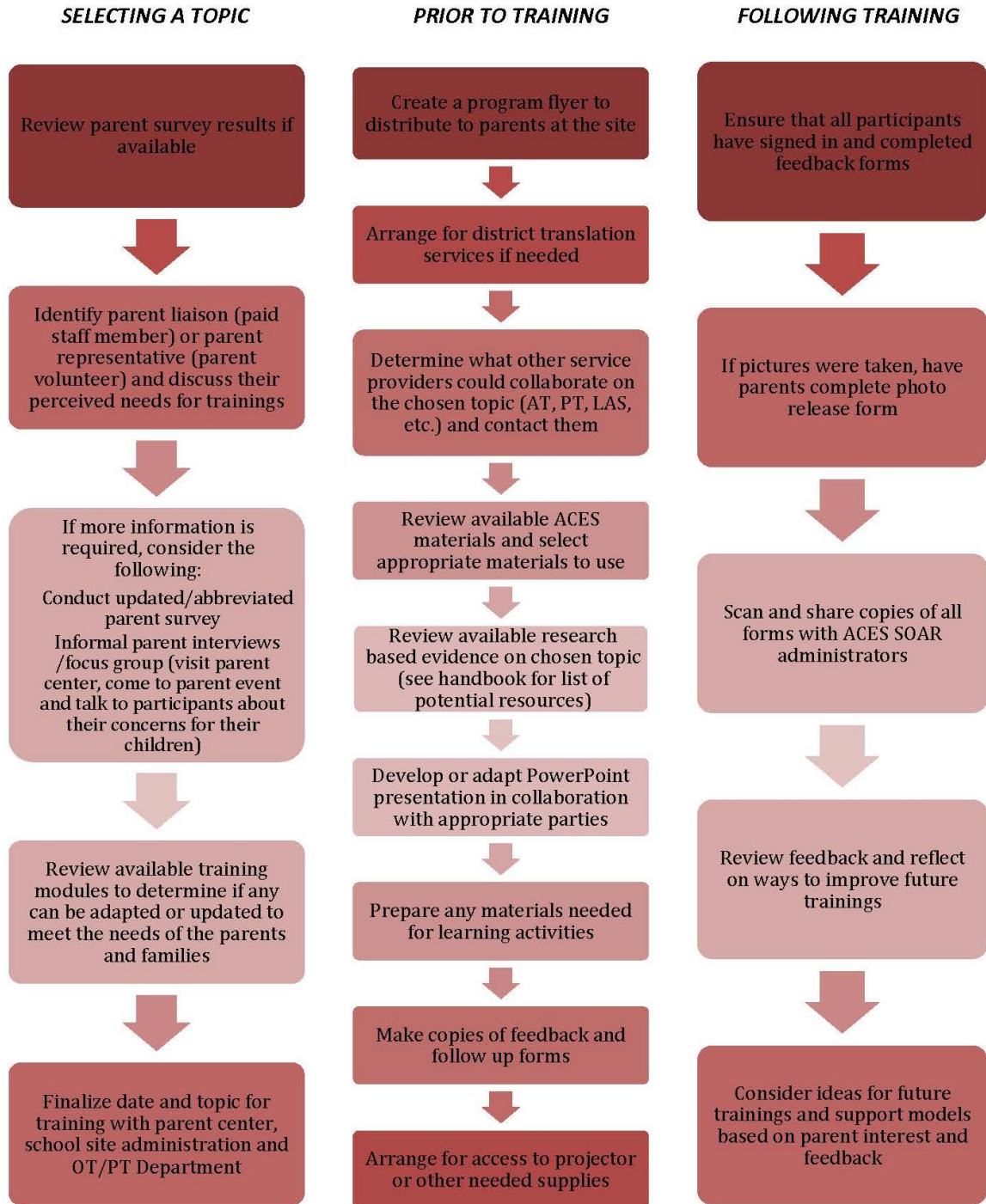
The purpose of this section is to orient providers to the range of support services ACES SOAR can provide for families at the CTCs.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Plan, implement, and evaluate parent trainings.
2. Select and implement a model of ongoing support for parents.
3. Develop and distribute evidence-based supporting written materials for parents and families in line with OT/PT department policies and standards.

ACES SOAR: Considerations for Planning Parent Trainings



Section V: Guidelines for Clinical Advising

- V. Guidelines for being a Clinical Advisor in transition for OTs
 - a. Guidelines for clinical advising
 - i. Methods of advising
 - ii. Expectations for advising
 - iii. Desired outcomes of advising relationship
 - b. List of clinical advising areas by therapist (updated annually)
 - c. Further resources on clinical advising

The purpose of this section is to prepare providers to take on clinical advising roles for non-ACES OTs supporting students during transitions.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Initiate advising relationships with other providers in their areas.
2. Provide thoughtful and accurate guidance for providers.
3. Access additional support for clinical advising role as needed.

Section VI: Service Tracking Procedures

- VI. Service Tracking Procedures
 - a. Monthly Service Provision Logs
 - b. Consultation Forms
 - c. Other service documentation forms

The purpose of this section is to outline tracking procedures for ACES SOAR.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Complete all required program paperwork on a monthly and ongoing basis.

Section VII: Evaluation Procedures

- VII. Evaluation Procedures
 - a. Evaluation Instructions
 - b. Feedback form for teacher trainings
 - c. Feedback form for parent trainings
 - d. Needs assessment survey forms
 - e. Additional survey forms

The purpose of this section is to outline evaluation procedures for ACES SOAR.

Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Evaluate effectiveness and participant satisfaction of training sessions.
2. Collect formative and summative data about ACES SOAR program.
3. Interpret results of evaluations to guide future planning.

Section VIII: Additional Resources

VIII. Additional Resources

- a. List of websites with transition resources
- b. List of literature/textbooks related to transition
- c. List of additional trainings and continuing education

The purpose of this section is to provide additional resources to help providers continue their own clinical education and to familiarize themselves with current evidence-based practices in the field of transition.

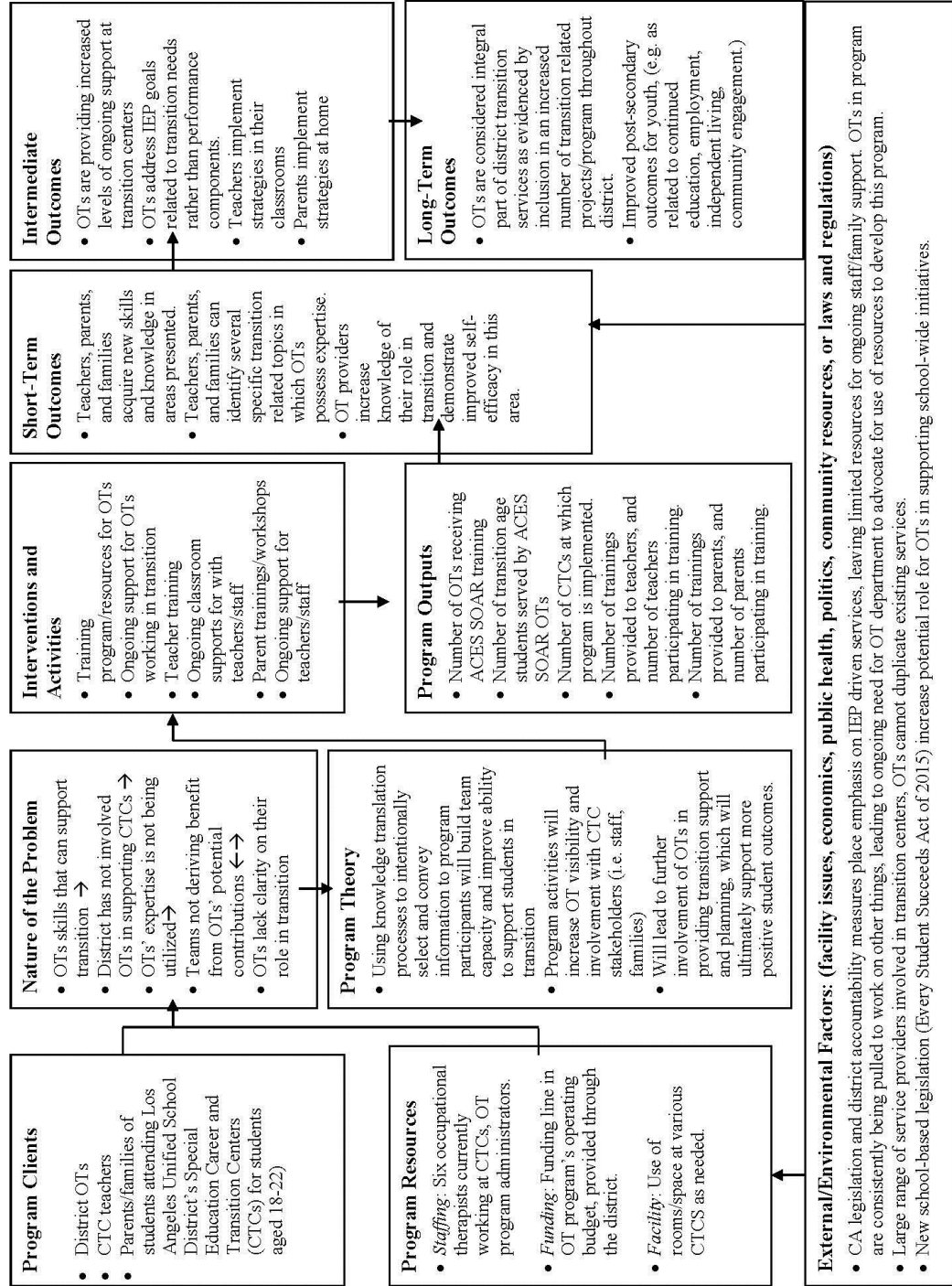
Learning Objectives

After reviewing the materials in this section, providers will be prepared to:

1. Access resources that inform transition services.
2. Develop program trainings and materials based on current research based evidence.

Appendix B: Evaluation Plan Logic Model

Program Title: ACES SOAR: Supporting Opportunities for Adult Readiness



Appendix C: Fact Sheet



Supporting Opportunities for Adult Readiness (SOAR):

An Occupational Therapy Program for Transition Age Youth With Disabilities

Rena Dinin Katrikh, MA OTR/L
OTD Candidate

What do we know about transition age youth with disabilities?

Poorer postsecondary outcomes than their peers in **competitive employment, independent living and community participation** (Haber, et al., 2016).

Evidence based practices linked to improved transition outcomes include increasing **self-determination, providing person-centered care,** and implementing **Universal Design for Learning** techniques (Michaels & Orentlicher, 2004; Orentlicher et al., 2014; Wehmeyer & Palmer, 2003).

What is the problem?

Majority of school-based **OTs do not work with transition age-youth,** and those that do, rarely address goals related to transition planning or functional outcomes (Kardos & White, 2005; Michaels & Orentlicher, 2004).

OTs are skilled practitioners who could be supporting evidence based transition practices by:

- Addressing personal, environmental, and contextual factors
- Remediating deficits
- Adapting task and environments
- Identifying and accessing contextual supports
- Emphasizing client-centered goals

What's contributing to the problem?

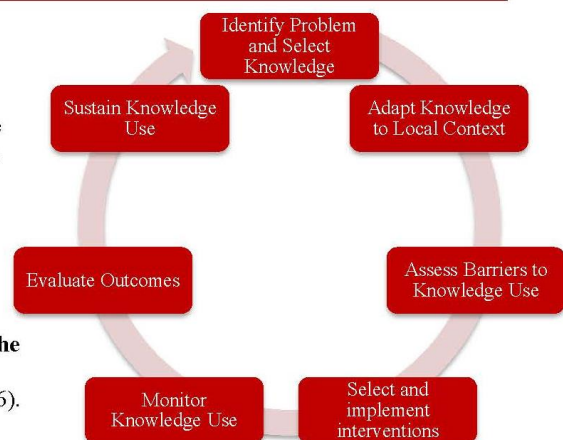
Limited OT involvement partially stems from a **lack of knowledge and understanding** of OTs role in transition:

- OTs do not understand their role and how to practically apply their knowledge and skills to transition practice
- Other transition staff are unfamiliar with OTs potential contributions (Mankey, 2011).

Theory Base

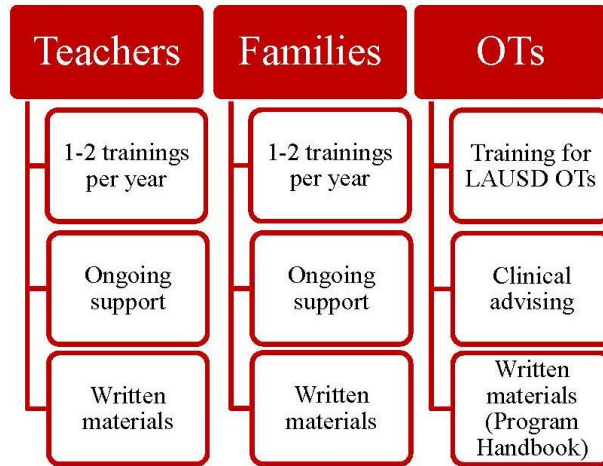
Knowledge to Action

- The Knowledge to Action process framework (KTA) posits that stakeholders can engineer changes in practice by **deliberately and thoughtfully planning** the process through which knowledge is shared.
- The KTA cycle provides a clear and effective method for **addressing the lack of knowledge** regarding OTs role in transition.
- Highlights the need for interventions to be **adapted to the local context** to maximize relevance and increase receptiveness of the target audience (Graham et al., 2006).



SOAR: Supporting Opportunities for Adult Readiness

- Fits within an **existing LAUSD program** to capitalize on resources and minimize expenses.
 - Expands ACES: Achieving Children’s Educational Success, an elementary to high school support program.
 - Program is funded through OT department operating budget.
- Multi-pronged and multifaceted **capacity building program**
- **Supports students aged 18-22** within the Los Angeles Unified School District (LAUSD) Career and Transition Centers.
- Strives to maximize skills and capabilities of **school-district staff, families, and LAUSD OTs** in supporting youth with disabilities as they transition into adulthood.
- Provides a **framework to guide OTs** in using KTA to select and implement appropriate interventions for their specific site and population.
- Outlines a range of approaches, including **training** sessions, models of ongoing **consultation**, and supplemental **written materials**, such as brochures and tip sheets.



Impact on Future Occupational Therapy Practice



<http://widneyhs-laUSD-ca.schoolloop.com/>

- **Team capacity building** approaches are an effective and efficient way to impact large groups of people with minimal resources in regards to funding or staffing.
- Working with teachers and families that may not otherwise receive direct OT services **increases visibility and understanding** of the role of OT while building a sense of trust and collaboration with the school community.
- ACES SOAR provides a **systematic approach** through which other districts could evaluate transition needs and provide supports.

“Occupational therapy maximizes health, well-being, and quality of life for all people, populations, and communities through effective solutions that facilitate participation in everyday living” (AOTA, 2017)

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Appendix D: Executive Summary

Supporting Opportunities for Adult Readiness (SOAR):

An Occupational Therapy Program for Transition Age Youth with Disabilities

Introduction

The Individuals with Disabilities Education Act (IDEA) mandates that a transition plan be in effect by the time a child turns 16 (Individuals with Disabilities Education Act, 2004). According to IDEA, the purpose of transition services is “to facilitate the child’s movement from school to post-school activities, including post-secondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation” (20 U.S.C. 1401(34)). Studies have shown, however, that students with disabilities continue to have significantly less involvement than their peers in areas related to post-secondary education, competitive employment, community inclusion, and independent living (Gaumer, Morningstar, & Clark, 2004; Haber, et al., 2016; Lindstrom, Doren, & Miesch, 2011; IDEA, 2004)

Occupational therapists (OTs) are experts in facilitating an individual’s meaningful engagement in his or her various roles and routines. OTs are able to assess the person, the environment, and the required task to enable successful participation for people experiencing a range of illnesses or disabilities (American Occupational Therapy Association [AOTA], 2014). As such, occupational therapy is uniquely situated to offer guidance and direction to young adults experiencing significant life transitions. As part of a multidisciplinary transition team, occupational therapists can examine personal,

environmental, cultural, and physical factors that may limit or support the participation of the child with special needs (California Department of Education [CDE], 2012). OTs may address issues related to self-advocacy, explore possibilities for environmental modifications, transportation, assistive technology, and adaptive equipment in order to empower children to be more engaged in their chosen occupations (CDE, 2012). Increased engagement, autonomy, and self-regulation of students contributes to higher levels of self-determination, which has been linked to improved post-school outcomes (Palmer, Wehmeyer, Shogren, Williams-Diehm, & Soukup, 2012). For these reasons, OT involvement in transition planning may lead to better post-secondary outcomes for youth with disabilities.

Despite these skill sets, studies have reported that the majority of school-based OTs are not working with transition age-youth; and the small percentage that do work with this age group rarely address goals related to transition planning or functional outcomes (Kardos & White, 2005; Michaels & Orentlicher, 2004). This reality may stem in part from identified barriers, including OTs' perceptions that other professionals are handling transition services, lack of understanding of the role of OT by other team members, lack of funding within schools, and inadequate time on OTs' caseloads to address services not mandated in a student's Individualized Education Program (IEP) (Kardos & White, 2005; Spencer, Emery, & Shneck, 2003). As a result, there is currently limited development of manualized programs or OT specific protocols for transition involvement. Much of what does exist either focuses on community programming or is not specific to occupational therapy.

Knowledge to Action: Theory Base for the Program

In addressing the lack of OT involvement in post-secondary transition, the Knowledge to Action (KTA) process framework provides a useful model through which to understand both the problem and possible solutions. According to KTA, if the process through which knowledge is shared with stakeholders is deliberately and thoughtfully planned, then that knowledge will be utilized more effectively (Graham et al., 2006; Metzler and Metz, 2010). Two of the primary barriers identified limiting OT involvement in transition relate to OT perceptions and other educators' lack of knowledge and familiarity with OT. These barriers do not necessarily reflect a lack of available knowledge or resources in the field of OT. In contrast, there are multiple published papers, brochures, programs, and textbooks discussing the potential roles and impact of OTs in the area of transition. Rather, the problem rests in a failure to complete several steps in what is known as the KTA Action Cycle, which represents the process through which existing knowledge is put into practice. The action cycle involves identifying a specific problem in practice, identifying knowledge to address the problem, adapting the knowledge to the specific context in which you plan to use it, assessing contextual barriers that may limit or constrain the use of that knowledge, selecting specific strategies to disseminate that knowledge, then implementing, monitoring, and evaluating knowledge use as well as the efficacy of selected strategies (Graham, et al. 2006). Through that iterative process of adaptation, implementation, and evaluation, knowledge use can ideally be sustained (Graham, et al. 2006).

SOAR: Supporting Opportunities for Adult Readiness

The proposed program uses KTA as a road map to expand the role of occupational therapy in providing transition services and support within Los Angeles Unified School District (LAUSD). LAUSD is currently the second largest school district in the country (U.S. Department of Education, 2014). LAUSD operates six Career and Transition Centers (CTCs) for students with disabilities aged 18–22 (LAUSD, n.d.). Students at these centers participate in vocational strands and independent living skills courses aimed at preparing them for employment and other meaningful post-secondary outcomes. Historically, OTs have provided services for small numbers of students at LAUSD CTCs based on their IEPs, often focusing on performance skills to support educational participation.

ACES SOAR expands upon ACES: Achieving Children’s Educational Success, an elementary to high school support program within LAUSD that provides non-IEP driven supports. ACES SOAR is a multi-faceted and multi-pronged approach to team capacity building to support transition age youth with disabilities. It targets CTC staff and families, as well as district

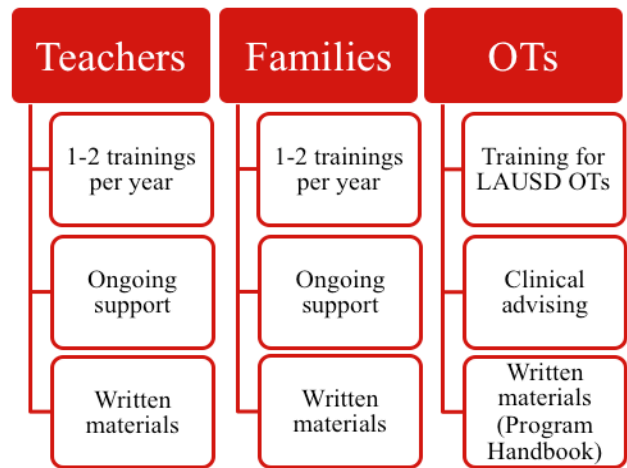


Figure 1: ACES SOAR program activities by target audience

OTs, to maximize their skills and capabilities in supporting youth with disabilities as they transition into adulthood. Families and staff will be offered regular trainings on a range of

topics. These topics will be selected through a collaborative process in conjunction with identified families and school site staff and administrators. Models of ongoing support for staff and families will be selected and implemented based on the needs and culture of the site. These may include drop in “office hours” meetings, question and answer sessions, suggestion boxes, classroom visits, or other models. Additionally the program introduces a model for training and support of all district OTs to improve the quality of direct transition services offered by OTs in the district. Content of the OT training will reflect current knowledge regarding best practice in the field. ACES SOAR providers from transition sites will serve in a clinical advising capacity for other district OTs serving middle or high school aged youth preparing for transition. The program recommends a range of strategies, including but not limited to in-person trainings, web-based learning, and supplemental written materials. The program handbook for ACES SOAR outlines considerations for selecting knowledge and intervention methods, as well as guidelines for how to evaluate the efficacy of interventions and longer-term impacts on knowledge use. Figure 1 represents the primary components of ACES SOAR for each target audience.

Key Findings

Rather than offer a prescribed set of activities, ACES SOAR offers a framework to guide OTs in using KTA to select and implement appropriate interventions for their specific site and population. This allows for consideration of the cultural and institutional realities of LAUSD. Based on the available literature, ACES SOAR primarily uses collaborative support models to effectively increase the ability of communities and teams

to support improved outcomes for transition age youth with disabilities (Association of University Centers on Disabilities, 2003; Jackson, Rankin, Siefkin, & Clark, 1989; Jackson, 1990; Missiuna et al., 2012; Stewart, 2011). Training materials for OTs will emphasize the importance of using person-centered approaches, concepts of Universal Design for Learning, and developing self-determination in youth, based on current evidence for best practice in transition (Michaels & Orentlicher, 2004; Orentlicher et al., 2014; Wehmeyer & Palmer, 2003). In line with the problem identified, perceptions of OTs and other service providers are addressed through targeted training efforts that demonstrate the range of supports OTs may provide.

Recommendations

The careful monitoring of program outputs and outcomes will be critical in demonstrating the efficacy and importance of the work of ACES SOAR, as well as in securing future program resources. Program providers will want to maintain detailed documentation on the content and format of their trainings and support strategies, as well as the number of staff, families, or students impacted by those activities, in order to evaluate the utility of the program and the need for future changes or modifications in program activities.

Program Funding and Dissemination Activities

By integrating into a preexisting program model, ACES SOAR capitalizes on existing resources and minimizes administrative barriers and costs. The LAUSD OT department's Strategic Operating Plan will incorporate workload release time for ACES SOAR providers, as well as funding through the department's operating budget for

brochures and other supplies. Additional materials may be donated, scavenged through recycled materials, or borrowed from school sites. The expenses for this program will remain largely stable from year to year. Other possible funding sources are proposed to supplement or replace this funding should that become necessary in the future. The current program expenses are estimated at approximately \$47,000, including the cost of full-time equivalent staff as well as program materials and supplies.

In order to sustain ongoing support for and interest in the program, dissemination efforts will target two primary groups; LAUSD administrators and stakeholders, and OTs outside of the district. The message for district staff will emphasize the impact and efficacy of program activities, as well as participant satisfaction with the program, in order to secure ongoing resources. Messages targeted to outside OTs will emphasize the critical role OTs have to play in providing transition supports, and advocate for the proposed capacity building model outlined in this program. The goal of disseminating program activities to outside OTs is to contribute to the overall expansion of the profession's current role in transition.

Conclusion

ACES SOAR outlines a dynamic and evolving set of program activities that collectively will impact the perceptions and role of OTs within the district. ACES SOAR targets staff and families at the LAUSD CTCs, as well as district OTs providing direct services to students in transition. In doing so, ACES SOAR takes into consideration the unique cultural and institutional needs of LAUSD, while also contributing the overall goal of transition services to provide a “coordinated set of activities...to facilitate the

child's movement from school to post-school activities," (IDEA, 2004).

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Curriculum Vitae

