MASSACHUSETTS
PRE-ETS
IMPLEMENTATION
STUDY: YEAR ONE

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Year One
Survey Results
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Rehabilitation Commission who made this survey possible. We also thank the many area directors and
vendor representatives who afforded their valuable time and experience to complete this survey.
Foreword
This document summarizes the results of a survey of the perceptions of Massachusetts Rehabilitation Commission Area Directors and leaders (N=17) and of vendors of Pre-Employment Transition Services (Pre-ETS) (N=29 from 23 agencies) on Pre-ETS implementation. There is a special focus on Pre-ETS for students with mental health conditions, who are “potentially eligible” for VR services. Highlights from the survey’s closed and open-ended questions are first presented, followed by opportunities for improved Pre-ETS delivery based on results. Next presented are summaries and graphs of results of closed-ended survey questions and then summaries of major themes found in open-ended survey questions.

Highlights of Survey Results

- The top benefit of the new Pre-ETS model was more direct student exposure to and preparation for the workforce.
- The highest ranked need to improve Pre-ETS is better engagement of students at the vendor level, especially through Pre-ETS services that are tiered to match the skill level and support needs of students, and through paid internships.
- To better serve students with serious mental health conditions, more training is needed on the unique needs and supports of different psychiatric conditions, self-advocacy, stigma, and the intersectionality of disability, mental illness, and race. Training curricula can also be used to improve Pre-ETS provision consistency across the state.
- Secondary educational institutions and special educators remain the main referral sources for potentially eligible students in Pre-ETS.
- Vendor relationship with schools can be problematic especially when schools did not see the value of Pre-ETS or perceived these as a duplication of service.
- Retention in Pre-ETS programming is chiefly fostered by relationships with students and families.
- Vendors have innovated and adapted to the COVID-19 pandemic by using individual and groups virtual meetings, virtual “open houses” and electronic commercial packages for Pre-ETS programming. These innovations had positive outcomes and may remain viable post-pandemic.
- Based on the differing responses by ADs and vendors to survey questions around what is needed to improve Pre-ETS, training topics needed and how providers obtain referrals of potentially eligible students, this may imply that ADs may have a more optimistic view of what is happening in the field than vendors do, and they may not necessarily share a common view of what is happening on the ground.
Opportunities for Pre-ETS Improvement

**Engagement:** Expanding recruitment strategies of potentially eligible students from sources other than secondary and special education may help increase their referrals to Pre-ETS.

- MRC could consider strengthening interagency collaboration to maximize recruitment opportunities. Many state and community agencies including mental health providers are barely used as a referral source. Networking and partnering with other agencies such as juvenile justice, child welfare, family youth and children services, housing and homelessness service providers, welfare offices as well as with mental health providers could strengthen referral sources to Pre-ETS. Shared data and referrals, perhaps through single entry points for services for youth with disabilities could be a state solution.
- Continued outreach within schools (e.g., guidance, psychology, discipline) can widen referrals of potentially eligible students. MRC could consider working this idea into their LEA agreements. Additionally, vendors could consider connecting with community colleges, more particularly those with culinary arts, animation, computer programming degrees etc.
- Family representatives noted inconsistent outreach and awareness of Pre-ETS across the state. They suggested including Pre-ETS information on a student’s Individual Education Program or having this opportunity consistently presented during transition meetings. Utilize other informal engagement strategies such as community events or participation in school career or transition planning events.

**Relationship with Schools:** Relationships between schools and providers can be bolstered by clarifying the mission and showcasing the value of Pre-ETS to schools for deeper support and engagement of services.

- One vendor noted that Pre-ETS could be highlighted to schools as a “cost free opportunity” for enhanced provision of services, rather than another time-consuming requirement for busy schools.
- MRC could collaborate with the Commonwealth Dep’t. of Education on communication with schools and Pre-ETS participation requirements.

**Serving students with mental health conditions.** To better serve these students special emphases in Pre-ETS are needed on:

- self-advocacy around disclosure;
- showcasing successes of former students; and
- real world experience for career pathways.

**Post-pandemic planning:** *Defining a balanced hybrid model (part in person, part remote)* and figuring out the most effective way to provide a light touch to the masses while making sure students are learning and advancing will be the focus of post pandemic Pre-ETS. There are specific needs for:

- developing a plan to respond to career planning challenges and disruptions students have experienced due to school closures and remote learning; and
- considering how to continue the use of technology/remote software to expand access to Pre-ETS.
I. Introduction to the Survey

The Workforce Innovation and Opportunity Act (WIOA) of 2014 mandates that state agencies of vocational rehabilitation (VR) provide Pre-Employment Transition Services (Pre-ETS) to students (ages 16-24) with disabilities. Pre-ETS are five services that aim to prepare students with disabilities for successful post-secondary transition to employment or higher education/training. Youth and young adults (Y&YAs) with serious mental health conditions (SMHC) have especial low rates of high school completion, enrollment in post-secondary education and training, and competitive employment and are the focus of our work.¹-³ This project seeks to acquire new knowledge on barriers and facilitators to providing Pre-ETS to students with SMHC and whether and how they are accessing and utilizing Pre-ETS. To accomplish this, relevant information will be collected from Massachusetts students in Pre-ETS, their family members, Pre-ETS providers (vendors), and Massachusetts Rehabilitation Commission (VR) area directors and leadership. An internet survey was completed with VR area directors and vendor representatives in 2021 and results are reported here. This survey will be re-administered in 2023.

II. Survey Content

On July 1, 2019, Massachusetts (MA) implemented a new model of Pre-ETS delivery which was designed to provide a “light touch” while exposing students to work experiences and skills. The current model involves the following four changes from the previous model:

- Increased provision of Pre-ETS services in group settings;
- Lowered the age of Pre-ETS eligibility to 14-years-old;
- Expanded services to “potentially eligible” students; and
- Enabled providers to directly recruit students instead of needing referrals from the Massachusetts Rehabilitation Commission (MRC)

To determine if and how the changes to the model of MA Pre-ETS delivery impacted the access to and delivery of Pre-ETS to Y&YAs with SMHC, the research team surveyed Massachusetts Rehabilitation Commission (MRC) area directors and Pre-ETS vendors contracted by MRC. Respondents were asked about these topics:

1) Current model of Pre-ETS delivery prior to the pandemic
2) Referrals of potentially eligible students for Pre-ETS prior to the pandemic
3) Schools’ relationship to Pre-ETS provision prior to the pandemic
4) Student engagement prior to the pandemic
5) Pre-ETS post COVID-19 pandemic

Notably, under WIOA, VR agencies must provide Pre-ETS to students who are both eligible and potentially eligible for VR, the latter referring to students who are not receiving VR services but have a disability and thus are potentially eligible. The potentially eligible requirement is especially relevant to youth and young adults (Y&YAs) with serious mental health conditions (SMHC), of which only about 10% are identified for special education.⁴ Thus, there are specific questions about the access and success of potentially eligible students in this survey. For this report, SMHC refers to having been identified for special education services due to an emotional disturbance or otherwise diagnosed as having a diagnosis of a serious mental illness (e.g.,
schizophrenia, bipolar disorder, and severe depression, anxiety, and posttraumatic stress disorders).

III. Methods

Data for the Year 1 survey was collected from 29 vendor staff and 17 MRC staff. The 29 vendors were from 23 vendor agencies that are contracted by MRC to provide Pre-ETS. The 17 MRC staff were comprised of 1 MRC district director, 2 MRC business improvement partners, and 14 MRC area directors (out of 16 MRC area directors). Two versions of the survey were created, one for vendors and one for area directors (ADs). Survey questions were largely similar across the two surveys, although the vendor survey contained 2 additional vendor-specific questions. The 1 MRC district director and 2 MRC business improvement partners completed the area director survey and for the purposes of analysis were considered area directors.

Both surveys utilized mixed methods, including demographic questions, a series of quantitative checkbox questions, and qualitative open responses. For each check box question, respondents were instructed to select either as many options as applicable, up to 5 options, or up to 3 options. Each check box question had the option of “Other,” which if selected, prompted a required open response field to elaborate this. Participants could skip any question resulting in some missing data and revised denominators for calculating percentages.

IV. Closed-ended survey results by question and respondent type

Presented on the following pages are:

1) Each question of the two surveys (for ADs and for vendors).

2) A summary of the responses for each question with concordances between the two surveys highlighted and numerical results color coded (orange for area directors and blue for vendors).

3) Bar charts displaying results for each question by each survey.
Question 1. What do you see as the main benefits, if any, to the revision of the Pre-ETS model which expands services to youth ages 14-15 and provides for group learning experiences?

Based on the survey responses, area directors (ADs) and vendors shared similar beliefs about the most important benefits to the new MA Pre-ETS model, although vendor rankings were lower. For this question, respondents could select up to 3 of the most important benefits. Vendors and ADs agreed that the top benefits to the new Pre-ETS model were more direct exposure to and preparation for the workforce. The top three responses for both vendors and ADs were: “More students have exposure to Job Exploration,” (ADs 11/17, 64.7%; Vendors 16/29, 55.2%) “More students have exposure to Work-based learning experiences,” (ADs 11/17, 64.7%; Vendors 11/29, 37.9%) and “Students are better prepared to participate in the VR services/and or enter the workforce” (ADs 10/17, 58.8%; Vendors 11/29, 37.9%). One response option that was offered for vendors but not ADs was “Younger students are receiving Pre-ETS which improves pathways to employment,” and this response was selected by vendors as the most important benefit (ADs N/A; Vendors 16/29, 55.2%) to the new Pre-ETS model.

![Figure 1: Perceived Main Benefits of the Revised Pre-ETS Model](AD n=17, Vendors n=29)

Note. * = Option only available to vendors
**Question 2. What is needed to improve Pre-ETS?**

ADs and vendors have relative rankings in common about the most important needs to improve Pre-ETS. Both groups feel that assistance with the marketing of Pre-ETS is needed. ADs and vendors had 3 needs in common out of their respective top 4 needs, which were: “Assistance at the provider level on how to market Pre-ETS and engage students,” (ADs 10/17, 58.8%; Vendors 11/28, 39.3%), “More resources or opportunities for paid internships,” (ADs 11/17, 64.7%; Vendors 8/28, 36.8%), and “Work-based Learning Experiences and intensity of support that are "tiered" to match the skill level and support needs of students” (ADs 9/17, 52.9%; Vendors 8/28, 26.8%). One of the top needs for vendors but not ADS was “More family involvement and input” (ADs 3/17, 17.6%; Vendors 10/28, 35.7%). One of the top needs for ADS that was not offered as a response option for vendors was “More training for vendors” (ADs 5/17, 29.4%; Vendors N/A). Several vendors selected “Additional specialized training to work with 14-16-year-olds” (ADS N/A; Vendors 4/28, 14.3%).

![Figure 2: Perceived Needed Improvements to Pre-ETS Model](image)

**Figure 2: Perceived Needed Improvements to Pre-ETS Model**  
(AD n=17, Vendors n=28)

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**Note.** * = Option only available to vendors  
** = Option only available to area directors
Question 3. What training topics would best help providers to deliver Pre-ETS to high school students with mental-psychosocial impairments.

ADs and vendors had common rankings about the most important training topics for vendors. The top 4 training topics selected were: “Understanding the unique needs and supports needs across different psychiatric populations (e.g., anxiety, depression, mood disorder, trauma, eating disorders, psychosis” (ADs 14/16, 87.5%; Vendors 20/29, 69.0%) “Addressing behavioral challenges,” (ADs 10/16, 62.5%; Vendors 13/29, 44.8%) “How psychosocial impairment impacts functioning,” (ADs 7/16, 43.8%; Vendors 11/29, 37.9%) and “Self-advocacy” (ADs 8/16, 50.0%; Vendors 10/29, 34.5%). Lastly, all training topics options were selected by several respondents, indicating a need for a variety of training topics for vendors providing Pre-ETS to high-school students with mental-psychosocial impairments.

Figure 3: Staff Training Needed to Support Students with Mental-Psychosocial Impairments
(AD n=16, Vendors n=29)
**Question 4. From which of these agencies do contracted providers obtain the most referrals of potentially eligible students?**

The top referral agency of potentially eligible students for both groups was “*Educational institutions (elementary/secondary)*” (ADs 15/17, 88.2%; Vendors 26/29, 89.7%). Additional top agencies for both groups were “*Family/Friends of student*” (ADs 13/17, 76.5%; Vendors 11/29, 37.9%) and “*Educational Institutions (Post-Secondary)*” (ADs 9/17, 52.9%; Vendors 8/29, 27.6%). As students with serious mental health conditions (SMHC) often are not identified for special education,¹ this could indicate a gap in the referral of students with SMHC to Pre-ETS. Over 10 agencies were not selected by any vendors or ADs as top referral sources, including Child Protective Services, Department of Labor Training Services, Employers, and Welfare Providers. Notably, “*Mental Health Providers*” (ADs 3/17, 17.6%; Vendors 0/29, 0%) was absent from the top 5 most common potentially eligible referral sources for either ADs or vendors.

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**Figure 4: Top Referral Agencies for Potentially Eligible Students**

<table>
<thead>
<tr>
<th>Agency</th>
<th>AD n=17</th>
<th>Vendors n=29</th>
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</thead>
<tbody>
<tr>
<td>Educational Institutions (Elementary/Secondary)</td>
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<tr>
<td>Massachusetts Rehabilitation Commission (MRC) *</td>
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<tr>
<td>Self-referral</td>
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<tr>
<td>Family/Friends of students</td>
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<tr>
<td>Educational Institutions (Postsecondary)</td>
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<tr>
<td>Massachusetts Commission for the Blind (MCB) *</td>
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<td>Intellectual and Developmental Disabilities Providers</td>
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<td>Centers for Independent Living</td>
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<td>Welfare Agencies</td>
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<td>Veteran’s Benefits Administration</td>
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<td>Temporary Assistance for Needy Families (TANF)</td>
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<td>State Department of Correction/Juvenile Justice</td>
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<td>Social Security Administration</td>
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<td>Public Housing Authority</td>
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<tr>
<td>Other One-stop Partners</td>
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<tr>
<td>Mental Health Providers</td>
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<td>Medical Health Providers</td>
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<td>Faith-Based Organizations</td>
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<td>Extended Employment Providers</td>
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<td>Employers</td>
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<tr>
<td>Department of Labor Employment and Training Service</td>
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<tr>
<td>Consumer Organizations or Advocacy Groups/Support.</td>
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<tr>
<td>Community Rehabilitation Programs</td>
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<tr>
<td>Child Protective Services</td>
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<td></td>
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<tr>
<td>College Disability Services **</td>
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</tr>
</tbody>
</table>

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*Note.*  * = Option only available to vendors  ** = Option only available to area directors
**Question 5. What strategies have you used to recruit potentially eligible students in your area? Check all that apply.**

Only vendors were asked what strategies were used to recruit potentially eligible students in their area. Four responses were selected by over half of respondents, with the top choice, “Collaboration with Vocational Rehabilitation staff (MRC School Liaisons)” selected by every vendor (Vendors 29/29, 100%). The other top vendor strategies were: “Periodic meetings between organizations/agencies,” (Vendors 18/29, 62.1%), “Local connections/communications between your organization and other agencies,” (Vendors 17/29, 58.6%) and “Direct marketing (flyers, social media posts, presentations)” (Vendors 17/29, 58.6%). The vendors' responses indicated that agency collaborations and direct marketing were common strategies to recruit potentially eligible students in their area. “Shared referrals or data” (Vendors 5/29, 17.2%) was used by less than 20% vendors as a strategy to recruit potentially eligible students.

![Figure 5: Recruitment Strategies for Potentially Eligible Students (Vendors n=29)](chart.png)
Question 6. What challenges are there in the relationship between vendors and schools?

Vendors and ADs agreed about the top 3 challenges in the relationships between vendors and schools, which are: “Scheduling difficulties,” (ADs 13/17, 76.5%; Vendors 16/29, 55.2%) “Required parental documentation,” (ADs 12/17, 70.6%; Vendors 22/29, 75.9%) and “Transportation” (ADs 7/17, 41.2%; Vendors 11/29, 37.9%). ADs indicated that scheduling difficulties was their primary challenge, whereas vendors indicated that parental documentation was their primary challenge.

![Figure 6: Perceived Challenges in the Vendor-School Relationship (AD n=17, Vendors n=29)](chart.png)
Question 7. Within secondary educational institutions, please indicate which of the following provide referrals for potentially eligible students.

Only vendors were asked to indicate which types of staff within secondary institutions provide referrals for potentially eligible (PE) students. The top response was “Special Educators/Transition Coordinators” (Vendors 23/29, 82.1%), followed by “Guidance counselors, school psychologists, career counselors” (Vendors 19/29, 67.9%), and “School leadership (e.g., principals or special education directors)” (Vendors 19/29, 67.9%).

Figure 7: Top Referral Staff for Potentially Eligible Students in Post-Secondary Education
(Vendors n=29)
**Question 8. What strategies do you use to encourage students to participate in Pre-ETS programming without dropping out?**

ADs and vendors cited the same top strategies to encourage student retention in Pre-ETS. The most common strategy for both groups was “Develop relationships with students” (ADs 12/16, 70.6%; Vendors 19/29, 65.5%). The other 4 top strategies were: “Communicate with parents” (ADs 8/16, 50.0%; Vendors 14/29, 48.3%), “Meaningful and relevant curriculum” (ADs 6/16, 37.5%; Vendors 14/29, 48.3%), “Work with teachers” (ADs 7/16, 43.8%; Vendors 13/29, 44.8%), and “Flexible scheduling” (ADs 7/16, 43.8%; Vendors 10/29, 34.5%).

![Figure 8: Strategies for Pre-ETS Student Retention](image-url)
**Question 9. What strategies and practices are providers using to adapt Pre-ETS in response to the pandemic?**

ADs and vendors selected the same top strategies and practices to adapt Pre-ETS in response to the pandemic. The top strategy/practice selected by both vendors and ADs was that they “Held group meetings via internet meeting software” (ADs 16/16, 100%; Vendors 23/28, 82.1%). Two other top practices/strategies were “Provided students with tablets/computers” (ADs 15/16, 93.8%; Vendors 18/28, 64.1%) and “Held individual meetings via internet meeting software” (ADs 11/16, 68.8%; Vendors 23/28, 82.1%). Additionally, a key strategy for mainly vendors was the use of “Commercial packages for job exploration, job shadowing” (ADs 6/16, 37.5%; Vendors 15/28, 53.6%).

![Figure 9: Strategies to Adapt Pre-ETS During the COVID-19 Pandemic](image-url)
Question 10. What strategies and practices used to adapt Pre-ETS in response to the pandemic might be continued after COVID due to positive outcomes?

ADs and vendors indicated that they might continue the same top strategies/practices which were selected in the previous question. The top four strategies and practices were: “Held group meetings via internet meeting software” (ADs 14/16, 87.5%; Vendors 21/28, 75.0%), “Held individual meetings via internet meeting software” (ADs 11/16, 68.8%; Vendors 18/28, 64.3%), “Provided students with tablets/computers” (ADs 15/16, 93.8%; Vendors 14/28, 50%), and “Commercial packages for job exploration, job shadowing” (ADs 8/16, 50%; Vendors 17/28, 60.7%). Notably, both ADs and vendors indicated that the use of commercial job exploration and shadowing packages was a top strategy to be continued after COVID (ADs 8/16, 50%; Vendors 17/28, 60.7%). It is worth investigating further what the observed costs and benefits of these commercial job packages are and how they might be integrated into the post-pandemic future of Pre-ETS.

![Figure 10: Promising Pre-ETS Adaptations to Continue Post-Pandemic](image-url)
V. Summary of Open-Ended Responses

As described in the methods section, each check box question had the option of “Other,” which if selected, prompted a required open response field so that area directors and vendors would be able to provide additional in-depth responses. The UMass team coded these open responses and identified 5 major categories and within these, repeated and impactful themes often shared among both area directors and vendors regarding the provision of Pre-ETS.

i. Engagement of students in Pre-ETS

Both area directors and vendors agreed that student engagement around Pre-ETS was critical and often starts with engaging schools and families. Regarding student engagement, both groups of respondents shared that during COVID it was beneficial to meet students “where they are at” virtually to provide individual and tailored engagement and “Providers have shifted to provide services to encourage students both light touch and 1:1”. An area director noted that “Adaptive curriculum has been very beneficial to serve students of all levels and abilities to learn. Our curriculum can be adapted to any group for learning.”

Some vendors shared that dynamic providers and interactive activities can help students fully engage with services. One noted example shared was the provision of interactive activities, so students see direct correlation to jobs, such as resume writing or interviewing. Other vendors noted that there were challenges to engaging students in a remote setting and training on this topic would be helpful.

A sample of area directors responded that due to the closure of schools, providers were thinking creatively and held virtual open houses for family engagement, but additional training is needed. One area director shared, “During this difficult time, providers stepped up to the plate to think out of the box. Virtual open houses were successful for families to attend to learn about services. I personally believe that these strategies will continue to be used as it will affect a larger group being able to access services.”

ii. Relationship with Schools

As previously noted, schools play an integral part in the recruitment and engagement of students for services. Both area directors and vendors shared that holding workshops, open houses and regular meetings with school staff facilitated relationship building. Having assigned school liaisons with staff, such as transition coordinators, special education staff or guidance counselors was helpful, but staff turnover could hinder relationship building.

Vendors felt that some schools considered Pre-ETS an afterthought and both area directors and vendors repeatedly noted some schools were resistant because they did not see the value of services, or that there was a duplication of services. Clarifying what provider services look like might help schools understand their value. One vendor noted that Pre-ETS could be highlighted and showcased to schools as a “cost free opportunity” for enhanced provision of services, rather than another time-consuming requirement for busy schools.

Additionally, clarifying to schools that Pre-ETS participation is a requirement and better sharing its mission may also help schools engage more deeply. One vendor commented, “schools
should see this as a benefit and as requirement for students with IEPs that want to work to participate in if they want. All students with disabilities should be informed of it and have the option to participate.” This sentiment was repeated by UMass Chan Medical School Pre-ETS advisory council parents during a recent meeting. The parents shared that they had learned of Pre-ETS serendipitously rather than through their child’s schools and felt frustrated that some schools were sharing this valuable opportunity with their students, but their school had not. Their suggestion to include Pre-ETS information on a student’s IEP checklist would help so that all special education students had this opportunity presented during transition meetings.

iii. Strategies for Pre-ETS Provision

Both respondent groups shared that providers have successfully employed innovative strategies around Pre-ETS provision, largely in response to the pandemic. One vendor noted “being super creative has allowed us to have great ideas for in-person learning after doing it over zooms for the past year”. Several vendors shared that these innovations were around curriculum development. One vendor noted they had developed their own curriculum, and another shared “One of the most beneficial things we’ve done is outsource some of our curriculum, so we have more time to do other things”.

Notably, both groups of respondents repeatedly shared that based on their observation or experience in delivering Pre-ETS, having individualized paid internships and work-based learning experiences were beneficial to educational/training progression or skill gain among potentially eligible students. Among vendors, they shared that self-advocacy around disclosure, as well as alumni returning and sharing success stories with current students and showcasing real world experience for career pathways were successful strategies. Interestingly, one vendor noted “de-emphasizing the special education component and emphasizing post high school planning” was valuable approach.

In response to how area offices monitor consistency of Pre-ETS among vendors, several area directors added they have regular check ins with vendors and with schools as needed. Another area director noted “We have not necessarily monitored the consistency of Pre-ETs services amongst vendors. Each program has unique offerings and provides services with their own style. Standardization could be discussed amongst vendors, BIP, and MRC area offices.”

How vendors choose which Pre-ETS core services to deliver to which potentially eligible students varies widely. Vendors shared these various practices: a) students choose, b) families choose, c) schools inform vendor of services provided to minimize duplication, d) combinations of discussion with students, families and schools, e) discussion with teachers, transition specialists, based on IEP, f) one on one with student at assessment to determine individual needs, h) they offer all components throughout year.
iv. **Training**

A repeated theme among both groups of respondents centered around training needs to market and promote services to schools for greater buy-in and fuller participation. Additionally, both area directors and vendors shared training needs around engaging students remotely, self-advocacy and addressing stigma. One area director shared their needs in this way, “Self-advocacy, addressing, understanding and unpacking stigma including implicit bias, understanding the intersection of disability, mental illness and race through an equity lens.”

Vendors shared that consistent messaging was important. “Train all providers and relay a consistent message to all vendors so we are all trained the same.” Another vendor noted training on documentation would be helpful, “the documentation and data entry remain burdensome and confusing. Clear and frequent training on these requirements would be helpful”.

Notably, one vendor shared it will be important to define a balanced hybrid model moving past the pandemic so that recently developed innovative strategies can be best employed. “However we will need to balance quality and quantity. As defined by MRC our goal is to provide a light touch to the masses. The easiest way to do that is through a remote service model. However, for many, an in person, smaller group service model is more beneficial. Defining a balanced hybrid model (part in person, part remote) and figuring out the most effective way to provide a light touch to the masses while making sure students are learning and advancing will be the focus of post pandemic Pre-ETS.”

v. **Pandemic Impacts**

Not surprisingly, schools experienced many challenges during the pandemic that greatly affected the delivery of Pre-ETS. One area director shared, “the schools were experiencing many challenges and Pre-ETS were the last thing they were thinking about”. Both area directors and vendors responses varied greatly to the question “Considering the challenges posed by COVID 19, do you feel that providers have been able to stay true to using 'light touch' to deliver Pre-ETS?”. Some vendors reported serving more students during the pandemic, while others reported that enrollment was very low at some schools. Some area directors responded, “Program curriculum was adapted due to pandemic, shifting from in person to virtual, but core components of service didn’t change.” Other area directors responded, “Services were severely curtailed during the pandemic, so I am hoping the vendors will reinvigorate their approach to step up service delivery soon”.

Notably, both groups responded that providers became creative in their service delivery. Some of the benefits gained due to the pandemic and virtual services were: 1) greater scheduling flexibility due to Zoom meetings, 2) the creation of virtual work-based learning experiences (guest speakers, job tours and job shadows), 3) the development of curriculum for greater access to a larger number of students. Area directors shared, “technology adapted in response to COVID allowed students to have increased accessibility” and “virtual services removed transportation barriers”. One vendor shared, “the pandemic has forced us to create/ alter/ curriculum to provide remote training and because of it we are able to provide more training options and serve more students. Nowadays students from all over the state can take
advantage of the same training (different platform) with the click of a mouse. We support students over the Eastern part of the state from Salem to Brockton.”

References:


