

CONNECTICUT LEADERSHIP EDUCATION in NEURODEVELOPMENTAL and RELATED DISABILITIES

TRAINEE HANDBOOK 2023 - 2024



UConn
CENTER FOR EXCELLENCE
IN DEVELOPMENTAL
DISABILITIES

This handbook was developed for the

2023-2024 Connecticut Leadership Education in Neurodevelopmental and Related Disabilities (CTLEND) Trainees

This handbook will assist you in becoming familiar with the policies, procedures, requirements, and expectations of the Leadership Education in Neurodevelopmental and Related Disabilities program. LEND is a five year, federally funded interdisciplinary leadership training program at UConn Health (formerly known as the University of Connecticut Health Center).

The goal of LEND is to prepare trainees from a wide variety of professional disciplines to assume leadership roles in the delivery of services to children with Autism Spectrum Disorders (ASD) and other neurodevelopmental disabilities in clinical practice, research, and public policy.

PROJECT PERIOD	ACADEMIC YEAR	LEND DIRECTOR
July 1, 2021 - June 30, 2026	2023 - 2024	Mary Beth Bruder, PhD 860.679.1500 • bruder@uchc.edu

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CT University Center for Excellence in Developmental Disabilities (CT UCEDD)

The CTLEND Program is housed at the UConn UCEDD, which was established in 1985 and originally located on the University's campus in Storrs, Connecticut. In 2001, the UCEDD moved to its current location in Farmington, Connecticut at UConn Health.

The UConn UCEDD has become a leader in developing and supporting quality services and systems for individuals with, or at risk for, developmental disabilities and their families. Over the past twenty-five years, we have played key roles in major disability initiatives. Through service, research, and training, we have assisted in the advancement of early intervention, health care, community-based services, inclusive and meaningful education, child care, transition from school to work, employment, recreation and quality assurance, housing, assistive technology, transportation, and family support.



The Association of University Centers on Disabilities (AUCD)

LENDs and UCEDDs are part of the Association of the University Centers on Disabilities (AUCD). AUCD is a membership organization that supports and promotes a national network of university-based interdisciplinary programs. Network members consist of:

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University Centers for Excellence in Developmental Disabilities (UCEDD), funded by the Administration on Intellectual Developmental Disabilities (AIDD)

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Leadership Education in Neurodevelopmental Disabilities (LEND) Programs funded by the Autism CARES Act

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Developmental Disability Research Centers Intellectual (IDDRC), most of which are funded by the National Institute for Child Health and Development (NICHD)

These programs serve and are located in every U.S. state and territory and are all part of universities or medical centers. They serve as a bridge between the university and the community, bringing together the resources of both to achieve meaningful change. By being a trainee at a AUCD-member program (such as LEND), individuals are also members of AUCD. These AUCD trainees form a network and can learn from each other by discussing and sharing their common interests and unique experiences. We encourage trainees to check out the AUCD Trainee Corner and sign up for the AUCD trainee email list: www.aucd.org/template/page.cfm?id=313.

About LEND



Leadership Education in Neurodevelopmental and Related Disabilities (LEND) programs provide long-term, graduate-level interdisciplinary training as well as interdisciplinary services and care. They are funded under the Autism Collaboration, Accountability, Research, Education, and Support (Autism CARES) Act, and are administered by the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB). The purpose of the LEND training program is to improve the health of infants, children, and adolescents with disabilities. This is accomplished by preparing trainees from diverse professional disciplines to assume leadership roles in their respective fields.

There are 60 LEND programs located in every state, the District of Columbia, the United States Virgin Islands, Puerto Rico, and six Pacific Basin jurisdictions, either as an awardee or in partnership with a LEND program. Collectively they form a national network that shares information and resources to maximize their impact. They work together to address national issues of importance to children with special health care needs and their families, exchange best practices, and develop shared products. A map of LEND programs across the United States can be found at: <https://www.aucd.org/template/page.cfm?id=473>.

While each LEND program is unique, with its own focus and expertise, they all provide interdisciplinary training, have faculty and trainees in a wide range of disciplines, and include parents or family members as paid program participants. The following objectives are consistent across all LEND programs:

- Advance the knowledge and skills of all child health professionals to improve health care delivery systems for children with developmental disabilities.
- Provide high-quality interdisciplinary education that emphasizes the integration of services from state and local agencies and organizations, private providers, and communities.
- Provide health professionals with skills that foster community-based partnerships.
- Promote innovative practices to enhance cultural competency, family-centered care, and interdisciplinary partnerships.

A Brief History of LEND

1912	Children's Bureau is created as the first federal agency to focus explicitly on improving the lives of children and families.
1935	Enactment of Title V of the Social Security Act, which included services for maternal and child health, "crippled children," child welfare, and vocational rehabilitation.
1950s	LEND grew from the efforts of the Children's Bureau to identify children with disabilities as a Title V program priority.
1970	Developmental Disabilities Assistance and Bill of Rights Act is passed and LEND is created to provide interdisciplinary training to professionals in a variety of disciplines at all levels.
2006	LENDs are funded under the Combating Autism Act and are administered by the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB).
2014	Combating Autism Act is reauthorized in 2014 as the Autism Collaboration, Accountability, Research, Education, and Support (CARES) Act.

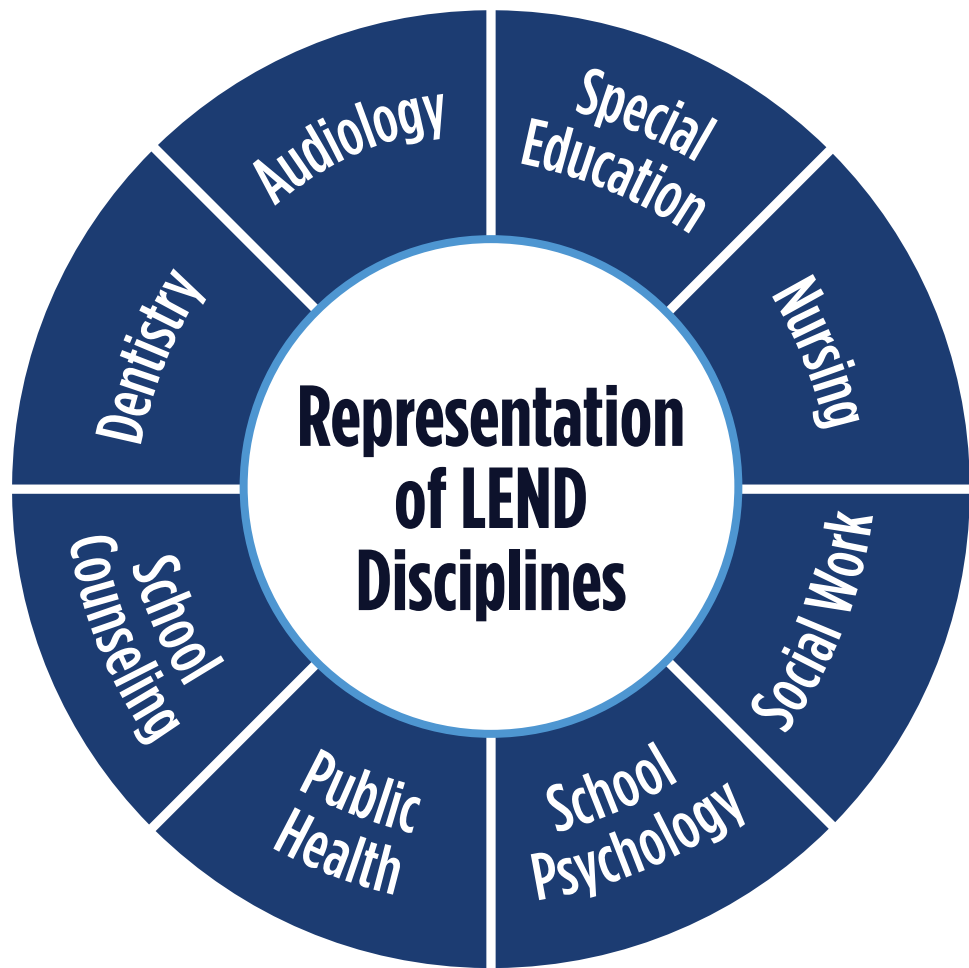


Who is a LEND Trainee?

A LEND Trainee is any individual who is enrolled in one of the nation’s LEND programs. A trainee might be a graduate or doctoral student in a discipline such as audiology or social work; a trainee might be a fellow in pediatrics or psychology; a trainee might be a community member or a family member learning about leadership. All trainees have a common desire to continue learning about helping and working with individuals with developmental disabilities and their families.

Trainees are individuals who receive preservice interdisciplinary training to become leaders in their field. There are approximately 4,000 trainees accepted into a LEND program nationwide in any given academic year. Through interactions with other trainees in the LEND cohort from a variety of different backgrounds, trainees will gain a broader understanding of each discipline’s unique contributions in their work to improve the quality of life for people with disabilities. Additionally, the LEND program provides training in the most current evidence-based practices regarding service delivery, systems change, and advocacy.

Graduate and postgraduate students from a range of disciplines can participate in the LEND program, including: Audiology, Dentistry, Developmental-Behavioral Pediatrics, Special Education, Nursing, Occupational Therapy, Pharmacy, Physical Therapy, Public Health, School Psychology, Social Work, School Counseling, and Speech, Language and Hearing Sciences. An important part of being a LEND Trainee is the service obligation after graduating. LEND Trainees are expected to use the training they have received to work with Maternal and Child Health (MCH) populations (such as individuals with disabilities and their families) and to assume a leadership role in their work.



Your Role



Your CTLEND experience will include a combination of required activities and self-directed activities. The LEND Program is based on competencies and requirements that are specific to the CTLEND program within the context of the competencies and requirements of the national LEND program and the Maternal and Child Health Bureau. These must be met in order to successfully complete LEND.

You will complete all of the CTLEND competencies and requirements through the LEND course of study, though you may propose a substitution, accommodation or adaptation of any competency or requirement to the LEND Director Mary Beth Bruder (bruder@uchc.edu). You will also have opportunities to extend your learning outside of the LEND requirements through research projects, practicum experiences, and other self-directed learning opportunities (e.g. taking online courses, participating in LEND related professional conferences and webinars, etc.).

Your first tasks as a LEND Trainee will be to review this handbook, to familiarize yourself with some of the aspects of being a LEND Trainee and complete self-assessments of various LEND and MCH competencies. The results of the assessment will be used to develop an “Individualized Learning Plan” (ILP) with your Discipline Coordinator and LEND staff. The ILP is a helpful tool that will keep you on track with all of the LEND requirements and competencies. As you participate in LEND activities and requirements you will document what activities you have done as well as what competencies those activities address in your ILP. A draft of your ILP will be reviewed with you at the end of September, and the ILP should be updated on a regular basis throughout the year (see Form A for a blank Individualized Learning Plan).

Requirements by Type of Trainee

Requirements are the necessary tasks that LEND Trainees must complete in order to meet the LEND competencies. There are several requirements for the successful completion of the LEND program; however, these requirements vary depending on the type of trainee you are. The following table is a brief outline of the mandatory and optional requirements for LTT's and MTT's. Each requirement is described in detail in the next section.

Long-Term Trainees (LTT, >300 Hours per Semester)

Long-Term Trainees are expected to work a **minimum of 20 hours per week**, meeting all requirements within the 20 hours (including over winter break). LTT's will complete 600 hours of training for the year and will complete 20 hours of training per week (15 weeks x 20 hours= 300 hours); 600 hours for the academic year, including working over academic year breaks such as Thanksgiving break and winter break. All LTT's must complete an ILP to identify the activities they will be involved in to fulfill the LTT LEND requirements. Trainees must complete orientation, complete family visits, participate in every seminar, complete the three online courses, complete a group and individual research project, complete screening, assessment, and intervention assignments, record their time each week, and participate in an individualized practicum up to 40 hours each semester.

Medium-Term Trainees (MTT, 40 - 299 Hours per Semester)

Medium-Term Trainees are defined as those who will complete 40-299 hours of training in one academic year. All MTT's will complete a modified ILP to identify the activities they will be involved in to fulfill the MTT LEND requirements. Trainees must attend weekly seminars and record their attendance each week. The following activities are optional and should be described in the modified ILP: Family visits, reading reflections, practicum, and the three online courses.

Short-Term Trainees (STT, <39 Hours per Semester)

Short-Term Trainees are defined as those who will complete up to 39 hours of training in one academic year. STT's may decide which activities they would like to participate in, based on individualized need.

LONG-TERM TRAINEES (20 HOURS PER WEEK)

- Individualized Learning Plan
- Weekly Time Logs
- Weekly Friday Seminar
- Weekly Readings, Reading Reflections, and Reading Groups
- Emerging Issues Presentation
- Online Public Health and Disability Course and Assignments
- Online Family Centered Practice Course and Assignments
- Online Medical Home Module
- Family Matches (2)
- Practica: Fall and Spring: Observations, Participation, and Interventions
- Screening Assignments (5)
- Assessment Assignments (3)
- Intervention Assignments (1)
- Group Research Project
- Individual Research Project
- Advocacy Project and Meeting with Legislators
- Portfolio of all LEND work

MEDIUM-TERM TRAINEES

- Seminar
- Knowledge Pre/Post Assessment and Consumer Satisfaction Evaluations

Optional:

- Research Projects
- Practica: Fall and Spring
- Family Match
- Online Courses
- Advocacy Meetings
- Interventions
- Assessment Observations
- All Other LTT Activities

Pediatric Audiology Trainees: Pediatric Audiology Trainees are recruited by the UConn Audiology program. Each year, the Audiology program recruits 2 Long-Term Trainees and an additional 5 community members or Audiology students who wish to participate as Medium- or Short-Term Audiology Trainees. Pediatric Audiology Trainees will be required to: attend a weekly pediatric audiology seminar, attend and present on one Pediatric Audiology Grand Rounds case, conduct an individual research project, attend clinical practica for 4 hours per week as part of the LEND curriculum, and participate in an Enhanced Practicum in Audiology site for 25 hours per week (see Form B for a more detailed description of the requirements specific to Pediatric Audiology Trainees).

Family/Advocate Trainees: Family/Advocate Trainees provide expertise and valuable experience about raising a child with disabilities as well as what it is like to live with a disability. Family/Advocate Trainees participate in weekly seminars and are matched with other trainees to share their expertise. Family/Advocate Trainees are considered Medium-Term Trainees and will complete 40-299 hours of training in one academic year. They will complete a modified Individualized Learning Plan to identify activities they will be involved in to fulfill the MTT LEND requirements.

Community Trainees: Community Trainees (including adults and youth with disabilities, family members of individuals with disabilities and professionals) will also be included in LEND training as LTT, MTT, or STT. As a Community Trainee, your expectations align with those of the particular trainee group (Long, Medium, Short) you are assigned.

Students with Disabilities: Any student who has a disability that may prevent them from completing LEND requirements should contact LEND Director Mary Beth Bruder (bruder@uchc.edu) and online course instructors as soon as possible to discuss accommodations necessary to ensure your full participation and to facilitate your educational opportunity.



CTLEND Training Requirements

The following is an in-depth description of each LEND requirement. **As stated in the previous section, these requirements might differ depending on the type of trainee you are, your discipline, or any accommodations or substitutions you propose. However, for the majority of trainees, these are the requirements that should be completed by the end of the year.**

As you will see, many of the requirements have mandatory reflections, which will need to be uploaded to Blackboard (HuskyCT). If you need a NetID to access Blackboard (HuskyCT), please email LEND Co-Coordinator Terrell Reichow (treichow@uchc.edu). All reflections will be reviewed by the LEND staff, who will provide suggestions and feedback to support development of your leadership and critical thinking skills. You are expected to take this feedback into account in your work. LEND staff may ask that you “revise and resubmit” a reflection to meet LEND requirements.

Maternal and Child Health (MCH) and LEND Competencies in the ILP

LTT’s will complete all MCH and LEND competencies listed in the ILP located in [Form A](#). **Your ILP will be submitted with your portfolio at the end of the year.**

Weekly Seminars

Seminars are held every Friday from 8:30am – 4:30pm. The topics covered in seminars will be built upon by other LEND activities. Attendance is mandatory for Long-Term and Medium-Term Trainees. If you are unable to attend a seminar please discuss this ahead of time with LEND Director Mary Beth Bruder (bruder@uchc.edu) ([see Form C for the LEND Seminar Objectives](#)).

The Friday seminars are wonderful and unique to our Connecticut LEND! Never change this, the most valuable information came on Fridays for me, due to speakers, Family Faculty, and cohort.

-Former CTLEND Trainee

Readings, Reading Reflections, and Reading Groups

You will have required readings and reading reflections to complete before each seminar to enhance your understanding of the presented topics. Reading reflections will need to be submitted to Blackboard (HuskyCT) before the start of seminar each week, due by midnight every Thursday. During the fall semester, you will write one reflection for each reading. During the spring semester, you will complete one synthesized reflection of all the readings. These reflections will be read by the LEND staff, who will provide feedback. You are required to review this feedback, address any areas that say “revise and resubmit” and incorporate feedback into future reflections ([*see Form D for the Fall Reading Reflection Template and Form E for the Spring Reading Reflection Template*](#)). During the fall semester, you will discuss all readings as a group. During the spring semester, you will complete a synthesized discussion of all the readings. Reading Groups are typically held between 8:30am and 9:00am each week.

Knowledge Assessments and Consumer Satisfaction Surveys

At the beginning of each semester, you will complete a pre-knowledge assessment to measure your baseline understanding of the topics that will be discussed throughout that semester. These assessments will not be counted as grades for the LEND course, but are reflections on our ability to teach you the material, as well as your grasp of concepts presented during seminar and in readings. At the end of each semester, you will be given a final knowledge assessment to measure your understanding of the topics covered that semester. At the end of each seminar, you will also complete a Consumer Satisfaction Survey, reflecting on the seminar objectives, the presenters, and your overall satisfaction with the seminar. You will also complete the MCH Competencies, research competencies, and the end of semester and end of year LEND surveys.

Online Courses

If you are an LTT, you will complete three online courses. If you are an MTT, these modules are optional and you may choose to complete any of these courses ([*see Form F for more information about the online courses*](#)). The three online courses include:

- 1. Medical Home:** This training curriculum was created to enhance the knowledge and skills of professionals, paraprofessionals and families/caregivers who provide care for children and youth with special health care needs and to facilitate the development of medical homes across the state. The curriculum consists of online content, readings, reading reflections and activities, and takes 2-3 hours to complete.
- 2. Family Centered Practice:** This course illustrates the centrality of the family in the life of infants, children and youth with disabilities and, subsequently, intervention. This course relies on outside readings and completion of performance-based activities and competencies which are embedded into 6 modules, and takes approximately 20-30 hours to complete. This course was designed to be completed over a semester so that trainees can digest and apply content.
- 3. Disability in Public Health:** This short course is framed by the Including People with Disabilities: Public Health Workforce Competencies, and aligns with the 10 Essential Public Health Services. This course provides a critical examination of public health services and programs in terms of inclusion, access, and accessibility for persons with disabilities and their families as members of communities. The course consists of four modules and includes readings, external materials, and activities that demonstrate application of knowledge. This course will take approximately 20-30 hours to complete. LTT's may take one of the Certificate of Interdisciplinary Disability Studies in Public Health courses as a substitute, with permission.

Research Projects

- 1. Group Research Project (Fall)** LTT's are required to complete a group research project in the fall semester. LTT's will be assigned to work in interdisciplinary groups to complete a project focused on one of the MCH competency areas. MTT's may also choose to participate in the research projects, and should let the LEND Director Mary Beth Bruder (bruder@uchc.edu) and LEND Co-Coordinator Terrell Reichow (treichow@uchc.edu) know as soon as possible in order to be assigned to a group ([see Form G for Group Research Project requirements and deadlines](#)).
- 2. Individual Research Project (Spring)** LTT's are required to implement an individual research project focused on one of the MCH competency areas. MTT's may also choose to complete an individual research project, and this should be included on their ILP. Trainees will work with their discipline coordinators and LEND staff to develop ideas for their project throughout the fall semester, and a finalized research question is due prior to the start of the spring semester. If you anticipate that you will need to submit a protocol to the IRB for your individual research project, you will need to contact the LEND Director (bruder@uchc.edu) and your LEND Discipline Coordinator for support. Additionally, the IRB protocol should be drafted during the winter break in order to be submitted at the beginning of the spring semester ([see Form H for Individual Research Project](#)).

Expectations Regarding Written Work

All written work must follow APA style citation. This includes reading reflections and both research projects (see Resources for a link on APA style). Submitted work must be proofread for spelling and grammar errors and adhere to the confidentiality expectations described in this handbook. The work you submit must show that you spent time and effort reflecting on the assignment, incorporating the principles of LEND, and linking back to your current and/or future practice. These reflections and assignments are essential to your growth as a trainee and any work that does not meet the program expectations will be required to be revised.

Practicum

During the fall semester, LTT's **observe up to 40 hours** of interdisciplinary teaming, assessments and interventions for infants, children and youth with complex neurodevelopmental and other related disabilities including ASD in a variety of settings. Virtual and in-person visits will be offered based upon the practicum site. After each observation or visit trainees must submit the "Fall Practicum Observation Reflection" ([see Form I](#)). Reflections are due within **one week** of completing an observation and practicum hours must be included on the weekly hours log.



During the spring semester LTT's will complete an **individualized practicum** at a single practicum location, decided in conjunction with LEND staff and based on the trainee's interests. The focus of spring practicum is to participate in assessment and intervention addressing the needs of people with neurodevelopmental disabilities including ASD. Each week, trainees are required to complete the "Spring Practicum Reflection" to reflect on their experiences that week ([see Form J for Spring Practicum Reflection Template](#)). Reflections are due within **one week** and practicum hours **must** be included on the weekly hours log.

Screening Assignment

LTT's are required to screen **five** young children for developmental and other delays (including ASD). The purpose is to familiarize LTT's with ASD screening protocols. After completing a screening, trainees are required to complete a screening reflection describing the screener they chose and a brief interpretation of the scores ([see Form K for the Screening Assignment Template and for a list of available screening measures](#)). We will work to provide virtual opportunities to complete these, but this requirement may be subject to change based on available opportunities.

Assessment Observations

As part of the interdisciplinary practice model component of the LEND curriculum, LTT's are required to observe **three** assessments with an infant/child/youth who is suspected of having ASD over the course of the year. We will attempt to provide these through virtual practica experiences, and other opportunities will be presented as available. Changes may be announced based on available opportunities. After observing an assessment, trainees are required to complete the "Assessment Observation Reflection" form within one week ([see Form L](#)).

Intervention

LTT's are required to provide an intervention for **one child** with ASD. This is typically achieved through spring practica experience, and as such may be subject to change based on public health concerns. If a trainee needs assistance or would like to propose a substitution, please contact LEND Director Mary Beth Bruder (bruder@uchc.edu). Once an intervention is completed, trainees must complete the "Intervention Reflection" form within one week ([see Form M for the Intervention Reflection Template](#)).



Practica Expectations

In addition to the program expectations outlined in the previous section, there are additional expectations specific to each practica site throughout the year. It is important to note that all LEND expectations (such as upholding the core values about people with disabilities, using a strengths-based viewpoint, being family-centered, and effective time management) apply to all practicum experiences as well.

Professional Conduct: Trainees should dress business casual; when in doubt err on the conservative, formal side. This is especially true for any event that parents may attend (such as meetings or conferences). Uphold the standards of confidentiality at all times by using initials in email when discussing a particular person with disabilities. Initials or a pseudonym **MUST** be used in all practicum reflections as well. Never talk about a child or youth in the presence of other people who are not involved with the child's plan. Maintain strictly professional relationships with supervisors, clients, patients, and students at all times. Trainees should remember they represent the LEND program, The University of Connecticut, and their specific discipline's professional conduct standards at all times when at practicum sites. Bring any concerns to the attention of the LEND program supervisors as they happen and/or before engaging in the activity in question.

Punctuality: If a trainee will miss Friday seminar or any other LEND activity due to illness or a family emergency, they are responsible for calling or emailing LEND Director Mary Beth Bruder (bruder@uchc.edu) as soon as possible. Additionally if a trainee will be late or absent for any practicum experience, email Co-Coordinator, Terrell Reichow (treichow@uchc.edu) and the site supervisor as soon as possible.

Adherence to Practicum Placement Policies: As a guest at the practicum placement site, it is the trainee's responsibility to adhere to the policies and procedures at the site. This is especially true for sign in/out policies, parking, computer, and cell phone/phone use. Trainees may ask to view a copy of the employee handbook to become aware of these policies, if available. Additionally, if your practicum site has policies about paperwork required before starting (such as your list of vaccinations, documentation of a flu shot, immunization waivers, etc.), trainees must ensure that all of that paperwork is completed and submitted. Please note: The University of Connecticut permits immunization waivers for religious or medical reasons. Please contact Employee Health by phone (860.679.2893) or email occmedehs@uchc.edu if you have any questions.

Before Spring Practicum Starts: At least a week before your first practicum visit, send an email to the supervisor to introduce yourself and thank him/her for allowing you to participate. This email is a good way to iron out any first-day logistics as well; for example, which room number the supervisor's office is located and what arrival time the practicum supervisor expects. It is a good idea to send a confirmation email the day before a visit confirming the schedule for the next day. Finally, determine how program cancellations/closures (like those due to bad weather) are communicated at the site. Establish the best way to receive this information ahead of time. The first two visits can be spent by: shadowing the practicum supervisor; observing; taking notes on the routines, transitions, and daily activities of the practicum supervisor/students; and getting to know the children, youth, and staff at the site. Trainees may also want to have a meeting with the supervisor at practicum to discuss responsibilities and expectations, share the list of LEND requirements, and share the ILP.



During Practicum: Throughout practicum, trainees should tackle every task with positivity and enthusiasm, keep notes on the activities they are involved in during visits, and follow through on commitments. Make sure to revisit your Individualized Learning Plan throughout practicum to track progress. The main priorities of the trainee are to demonstrate LEND competencies, apply new learning, and observe/use evidence-based practices. As such, the practicum supervisor is expected to assign tasks that allow trainees to demonstrate leadership skills and knowledge commensurate with the LEND program philosophy.

Examples of tasks that would be appropriate to assign a LEND Trainee include:

- Observing team meetings (including IFSP/IEP meetings).
- Participating in tasks that facilitate completion of LEND program assignments (such as the research project or competencies).
- Contributing to a community resource or program through research, ideas, or data collection.
- Conducting an intervention (with permission/input from the family and supervision from the practicum supervisor).
- Reading a student or client's background file (with permission) and discussing with the practicum supervisor.
- Identifying and visiting potential community resources.
- Developing a "mock" plan for feedback.
- Observing assessment administration (with permission from the family and/or individual).
- Sharing updated information with colleagues involved in a child or youth's plan.
- Providing suggestions for contending with resources, schools, law, etc.
- Planning activities or writing reports (however, these reports would be for practice only and should not be used as a basis for team decision-making in the child or youth's program).
- Completing an activity that would enhance a child or youth's individual program (such as developing a brochure or information pamphlet to be disseminated to families, updating a resource guide for agency and staff to use, etc.).
- Learning how to develop an individualized family service plan or healthcare plan based on the results of a strengths-based assessment.
- Anticipating potential problems with intervention or program plans and brainstorm ways to address them.
- Recording data.

Tasks that should not be assigned include:

- Clerical tasks, such as passing out papers, making copies, etc.
- Any task inappropriate for the trainees to complete without supervision, such as a supervisor asking a trainee to complete an unfamiliar assessment.
- Employee related tasks, such as filling a worker vacancy, helping supervise students during lunch, substituting for a one-on-one for a student, etc. (remember, trainees are NOT paid employees).

Unstructured Time: Trainees are expected to take full advantage of learning experiences at practicum. While waiting for a practicum supervisor to provide instructions, trainees should take initiative and request another way to engage. Observing other classes/programs located within the site, shadowing colleagues in a different discipline, reviewing background records (if permission is granted from the family), obtaining schedules, and taking observation notes are all examples of activities that can be done during idle times to use time efficiently.

End of Practicum: It is important to plan the end of the spring practicum experience. Before the last day, ensure all hours have been completed for practicum and schedule any make up days that were missed during the semester. On the last day, trainees may want to schedule a final meeting with the practicum supervisor to evaluate progress and to bring closure to the experience. A personal thank you note for the supervisor and any colleagues or staff the trainee worked closely with is strongly recommended.

Expectations Regarding Confidentiality: Because of the nature of the activities you will part take in as a LEND Trainee, such as observations and family visits, all your work **must be kept confidential**. This includes no identifiable information, such as names or the town of your families, in your submitted work. Names must be changed or initials used in your reflections. If you alter names that must be clearly stated. Names of schools may be included because that is public information.

Family Match

As an LTT, or an MTT if you choose to be, you will be matched with one family per semester, one with a child with ASD and one with a child with a neurodevelopmental disability.

The requirements of this partnership include a minimum of two Zoom visits with your assigned family per semester. You will record your experiences with your assigned families in a reflection.

The LEND Family Faculty Coordinator, Laurie Cantwell, will link each LTT with a family and/or youth advocate. For this year, visits will be conducted virtually or in person. Work with the assigned family to meet the required types of visits through virtual meetings; if this is not possible, contact the LEND team to discuss alternate ways to meet this requirement. After conducting an observation, trainees are required to complete the “Family/Advocate Reflection” form. Completed forms should be uploaded into Blackboard(HuskyCT) under “Family/Advocate Reflection” ([see Form O](#)). As with all reflections, these are to be submitted within one week of each observation. Trainees must email the LEND Family Faculty Coordinator within 24 hours of the visit to let them know it occurred. In addition, the “home visit guiding questions” in this section will help trainees be prepared with questions to ask during a home visit with a family. Reflections are due within one week and hours must be included on the weekly hours log.

Expectations Regarding Professional Conduct when Working with Families: As part of the CTLEND competencies, LTT’s will be matched with a family (this is referred to as a “Family Match”). During visits, there are a few expectations to abide by, including:

- All identifiable information must be kept **confidential** in the write-up of the visit. Even if the Family Match is okay with their information being shared, trainees are bound by HIPAA and confidentiality regulations. This includes using initials or pseudonyms for names, and pseudonyms for the setting or town that was visited. Please see the section below for further information on the expectations on confidentiality.
- It is **the trainee’s responsibility** to initiate and maintain communication with family matches. As soon as a match has been made, the trainees should reach out and offer to exchange contact information.
- The purpose of conversations with the Family Match will be to simply get to know the family. Trainees may find it appropriate to discuss the following: scheduling/rescheduling visits, requesting permission for visits/confirming visits, and debriefing about a seminar topic.

- If a family asks you for ideas about what to observe during visits, trainees might suggest shadowing the family on a community outing (such as a soccer game or chorus concert), conducting a home visit, shadowing the child/youth at school, interviewing the family or individual with a disability at a location that is convenient for them, attending family support group meetings, or observing a PPT meeting.
- Check-in with the Family Match on a bi-weekly basis, via telephone, face-to-face/virtual visits, or email. All communication should be professional, nonjudgmental, polite, and supportive of the family's needs.
- The family member will report back on your application and use of Family Centered Practice during these conversations and visits to the Family Faculty Coordinator.
- Trainees should dress business casual for the first visit, and for additional visits dress to meet the needs of the visit while maintaining a neat standard.
- Remember: the requirements of the program are purposely flexible to allow for the convenience of the family and advocate first and foremost. Families' lives are busy, and sometimes it can be difficult for their child to adjust to a change in routine. As such, trainees are expected to "keep their word," show up on time for visits, reschedule only when absolutely necessary (and with plenty of notice), be flexible if the family needs to reschedule, and be sure to thank the family.

Additional Requirements

LEND Weekly Hours Log: LTT's are required to submit a LEND Weekly Schedule of time spent on LEND. Detailed documentation of all activities for each day of work on LEND is required. Entries will provide evidence of your accomplishments as a LEND Trainee. Trainees need to specify how the entry aligns with the LEND competencies and entries may align with more than one competency. For example, time spent on the group research project might be logged as MCH 1.4, "Describe SDOH, understand health equity, and offer strategies to address health disparities within MCH populations," in addition to LEND 1.6 "Research design and analysis." Please use the competency numbers as provided in the LEND Individualized Learning Plan, and simply list the competency numbers. The logs must contain hours from Saturday to Friday and are to be submitted to Blackboard (HuskyCT) by the end of the day on Friday. Trainees should keep a paper or electronic copy for their records, as this will need to be included in their portfolio at the end of the year (*see Form P for the Weekly Hours Log Template which you can use to track hours on an ongoing basis*). LTT's are required to complete 20 hours a week over Thanksgiving, Spring Break, and Winter Break, as they will be paid for these hours. This is non-negotiable. On the next page, please follow the sample Weekly Hours Log example to properly log your activity of time spent on LEND.

On the next page, please follow the sample Weekly Hours Log example to properly log your activity of time spent on LEND.

Weekly Hours Log Example | 2023 - 2024

Weekly Hours Log Name: Jane Doe Week of 10/22/2023			
DATE	HOURS	ACTIVITY	PROGRAM COMPETENCY
10/22	8 Hours	LEND Seminar	MCH: 1.3 LEND: 1.5
10/23	2 Hours	Practicum Hours @ UHMS	MCH: 2.1 LEND: 3.6
10/24	1 Hour	Worked on Group Research Project	MCH: 1.4 LEND: 1.6
10/25	.5 Hours	Spoke to Family Match on phone to schedule home visit	MCH: 8.3 LEND: 1.2
10/26	2.5 Hours	Webinar: Teaching Parents to Facilitate Social-Emotional Communication Skills for Children with Disabilities; reflection uploaded to Blackboard	MCH: 9.8 LEND: 2.9
10/27	6 Hours	Weekly Readings & Reactions	MCH: 1.8 LEND: 1.6
Total Hours	20		

Expectation Regarding Work Completion and Time Management: Trainees are expected to meet their weekly hours obligation and assignment obligations. All reflections are due within one week of the activity/observation. However, we understand that life happens, and some weeks it will not be possible to do so. For weeks where completing LEND requirements is not manageable, uncompleted hours are required to be made up in future weeks. It is the trainee's responsibility to contact LEND Co-coordinator Terrell Reichow (treichow@uchc.edu) informing her of any work that will not be completed on time and propose a timeline for completing the missing hours and work. Given a trainee's understanding of LEND obligations and additional academic/work responsibility, it is the trainee's responsibility to develop a plan to balance meeting both. As a trainee, effective time management will be necessary; however, this is a skill that takes time to develop. LEND is a rigorous program that is being completed in addition to a trainee's already rigorous graduate degree program, and it will take a conscious effort and a great deal of practice to balance the work of both. Planning, prioritizing, incorporating self-care, setting work schedules, and sticking to work schedules are all important aspects of effective time management. Remember that the CTLEND faculty and staff are here to support trainees. If at any point a trainee becomes overwhelmed, or feels that they will need to submit a LEND assignment late, this must be communicated as soon as possible so assistance can be provided.

Advocacy Activities: LTT's will attend one (1) KASA Meeting, People First Meeting, ARC Meeting, or other community advocacy agency meeting. After each visit trainees must will complete the "Event Reflection" form and upload it into Blackboard(HuskyCT) under "Event Reflection" ([see Form Q for the Event Reflection Template](#)).

LTT's will also participate in one (1) advocacy project that will culminate with a visit with legislators. Advocacy is acting on behalf of another. Each trainee will participate in a group to identify a systemic need for those with disabilities. The group will prepare a presentation for a legislator that outlines the problem and presents a solution that has been researched and is realistic. Please see LEND director Mary Beth Bruder (bruder@uchc.edu) for more details.

Additional Reflections

The following reflections are required after attendance at webinars, site observations, and events. A description of each reflection form is outlined below. These reflections should be uploaded as needed (i.e., when completed throughout the year). If trainees have any questions about which form to complete for an activity, please email the Teaching Assistants.

Webinar Reflections: Throughout the year, trainees may attend webinars that are of interest and that align with MCH and LEND competency requirements (if a trainee identifies a webinar topic of interest but is not sure if it aligns with LEND topics, please email bruder@uchc.edu and ask). After viewing the webinar, the trainee is required to complete the “Webinar Reflection” form and upload it into Blackboard(HuskyCT) within one week under “Webinar Reflection” ([*see Form R for the Webinar Reflection Template*](#)).

Event Reflection: If a trainee attends a workshop or special event that aligns with LEND or MCH competencies, they are required to complete an “Event Reflection” form. Completed Event Reflection forms should be uploaded into Blackboard(HuskyCT) within one week under “Event Reflection” ([*see Form Q for the Event Reflection Template*](#)).

Progress Reports

Each month, trainees will receive progress reports on your completion of the LEND Requirements. These reports are meant to help trainees stay on track and develop plans for completing required tasks. Reports will contain information on all requirements relevant to the trainee’s position and missing hours. LEND Co-coordinators Tina Rhodes and Terrell Reichow (tirhodes@uchc.edu and treichow@uchc.edu) or your assigned mentor can also schedule time to meet individually to monitor progress and provide additional feedback. They are also available for assistance, as needed.

Portfolio

At the end of the year LTT’s must submit a printed portfolio documenting completion of the requirements listed above. The portfolio should include the completed ILP, hours for the year, the Family Centered Practice Module grade sheet and competencies, Medical Home Module activities, Public Health module activities and reflections, advocacy/policy activities, and all reflections (practicum, ASD screening, assessment, intervention, family visits, KASA meetings, and events/webinars). Please contact LEND Co-coordinator Terrell Reichow (treichow@uchc.edu) if you would like to see examples of previous trainee portfolios.

National Information Reporting System

The National Information and Reporting System (NIRS) is the national, web-based data reporting and retrieval system for the AUCD network. NIRS enables us, as network members, to manage our own Center’s productivity, provide the public with access to the projects and products of our Center, and to comply with federal reporting requirements. The data gathered in NIRS also enables AUCD to develop composite snapshots of the UCEDD and LEND programs throughout the country. If you have any questions about NIRS, please contact LEND Director Mary Beth Bruder (bruder@uchc.edu).

The map displays the United States with state boundaries and abbreviations. Three types of markers are used to indicate the locations of specific centers:

- UCEDD (Yellow Squares):** University Centers for Excellence in Developmental Disabilities. Locations include WA, OR, ID, MT, ND, MN, WI, MI, NY, VT, NH, ME, MA, RI, CT, NJ, DE, MD, DC, PA, WV, VA, NC, SC, GA, FL, TX, OK, AR, MS, AL, TN, KY, OH, IN, IL, IA, NE, KS, MO, CO, WY, UT, NV, CA, AZ, NM, HI, AK, GU, AS, MP, PR, and VI.
- LEND (Red Triangles):** Leadership Education in Neurodevelopmental and Related Disabilities. Locations include WA, OR, ID, MT, ND, MN, WI, MI, NY, VT, NH, ME, MA, RI, CT, NJ, DE, MD, DC, PA, WV, VA, NC, SC, GA, FL, TX, OK, AR, MS, AL, TN, KY, OH, IN, IL, IA, NE, KS, MO, CO, WY, UT, NV, CA, AZ, NM, HI, AK, GU, AS, MP, PR, and VI.
- IDDRC (Orange Circles):** Intellectual and Developmental Disabilities Research Centers. Locations include WA, OR, ID, MT, ND, MN, WI, MI, NY, VT, NH, ME, MA, RI, CT, NJ, DE, MD, DC, PA, WV, VA, NC, SC, GA, FL, TX, OK, AR, MS, AL, TN, KY, OH, IN, IL, IA, NE, KS, MO, CO, WY, UT, NV, CA, AZ, NM, HI, AK, GU, AS, MP, PR, and VI.

CTLEND Faculty

An important part of CTLEND is the team that supports the program. This team collaborates frequently to ensure that planning and implementation of the LEND program meets the LEND objectives. The following list contains the names, roles and contact information of these team members. They are available to support trainees and answer any questions, comments or concerns.



Mary Beth Bruder, PhD
bruder@uchc.edu
Professor, UCEDD Director
LEND Director
Contact for: Research projects, requirements, approval, absences, general questions



Terrell Reichow, MA, CCC-SLP
treichow@uchc.edu
LEND Co-Coordinator
Contact for: Technical Assistance regarding Blackboard (HuskyCT), research projects, requirements and general questions



Tina Rhodes, MS, OTR/L
tirhodes@uchc.edu
Clinical Research Associate
LEND Co-Coordinator
Contact for: Practicum questions, requirements and general questions



Chris Blake
chris-r-blake@hotmail.com
LEND Family Faculty
Self Advocate



Laurie Cantwell
ctpolicymaking@gmail.com
LEND Family Faculty Liason



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CTLEND Teaching Assistants



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Kathryn Smith

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Contact for: General Questions

LEND Discipline Coordinators



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*Speech, Language,
and Hearing Sciences*



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Assistant Professor



Sara Renzulli, PhD
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*Counselor Education and
Counseling Psychology*



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Special Education



Marianne Snyder, PhD
marianne.snyder@uconn.edu
Nursing



Cristina Mogro-Wilson, MSW, PhD
cristina.wilson@uconn.edu
Social Work

Resources

ADA National Network: <http://adata.org/>

APA Style Citation:

http://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/general_format.html

Association of University Centers on Disabilities (AUCD): <http://www.aucd.org>

AUCD Trainee Corner: <http://www.aucd.org/template/page.cfm?id=313>

Center for Parent Information & Resources: <http://www.parentcenterhub.org/>

Connecticut State Department of Education: <http://www.sde.ct.gov/sde/site/default.asp>

Connecticut Birth to Three Program: <http://www.birth23.org>

Early Career Professionals: <http://www.aucd.org/ecp/template/index.cfm>

Federal Website with Disability-Related Resources: <https://www.dol.gov/agencies/odep/topics>

Maternal and Child Health Bureau: <http://www.mchb.hrsa.gov/>

Maternal & Child Health Knowledge Base & Library Collection, Georgetown University:

<http://www.ncemch.org/knowledge-base.php>

Maternal and Child Health Training: <https://mchb.hrsa.gov/training/>

National Center on Disability and Journalism (disability language):

<http://ncdj.org/wp-content/uploads/2012/08/NCDJStyleGuide2015.pdf>

National Council on Disability: <http://www.ncd.gov/>

People-First Language: <https://www.thearc.org/who-we-are/media-center/people-first-language>

Principles of Strengths-Based Practice:

<http://greaterfallsconnections.org/wp-content/uploads/2014/07/Principles-of-Strength-2.pdf>

United States Department of Health and Human Services: <http://www.hhs.gov/>

University of Connecticut LEND Website: <http://ctlend.uconnucedd.org/>

University of Connecticut Center for Excellence in Developmental Disabilities: <http://uconnucedd.org/>

— FORMS —



Form A. Individualized Learning Plan (ILP)

Connecticut LEND Requirements: Individualized Learning Plan | 2023 - 2024

Name:

Discipline:

Graduate Program:

Approved by LEND Staff:

Date:

Discipline Coordinator:

Date:

Trainee:

Date:

2023 - 2024 Trainee Requirements

MCH COMPETENCIES | LEND COMPETENCIES | ONLINE COURSEWORK | RESEARCH | CLINICAL | ADVOCACY

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
1. MCH Knowledge Base/Context			
1.1 Describe MCH populations and provide examples of MCH programs including Title V programs.			
1.2 Describe the utility of a systems approach in understanding how interactions between individuals, groups, organizations, and communities in health outcomes.			
1.3 Use data to identify issues related to the health status of a particular MCH population group and use these to develop or evaluate policy.			
1.4 Describe SDOH, understand health equity, and offer strategies to address health disparities within MCH populations.			
1.5 Critically evaluate programs and policies for translation of evidence to practice.			
1.6 Understand the value of partnering with people with lived experience and family and community-led organizations to improve programs, policies, and practices.			
1.7 Demonstrate the use of a systems approach to examine the interactions among individuals, groups, organizations and communities.			
1.8 Assess the effectiveness of an existing program for specific MCH population groups.			
1.9 Ensure that health equity and cultural responsiveness are at the forefront of program planning and service delivery.			

Form A. MCH COMPETENCIES

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MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
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2. Self-Reflection

2.1 Recognize how one's personal values, beliefs, communication, culture and experiences influence one's leadership practice.			
2.2 Use self-reflection techniques to strengthen communication across program development and implementation, service delivery, clinical care, community collaboration, teaching, research and scholarship.			
2.3 Seek and use feedback from peers and mentors to improve leadership practice.			
2.4 Apply understanding of one's own leadership style and sources of personal resilience to assemble and promote cohesive, well-functioning teams with diverse perspectives and complementary styles.			

3. Ethics

3.1 Work to understand the individual's and community's cultural values to ensure the delivery of culturally responsive and ethical policies, programs, and practices.			
3.2 Identify and address ethical issues within the specific practice settings, such as patient care, public health programming, and research.			
3.3 Identify the ethical implications of health inequities and implicit bias affecting MCH populations.			
3.4 Act as catalysts to discuss and address ethical dilemmas and issues that affect MCH population groups.			

Form A. MCH COMPETENCIES

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MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
4. Critical Thinking			
4.1 Evaluate various perspectives, sources of information, strengths and limitations of various approaches, and possible unintended consequences of addressing a clinical, organizational, community-based, or research challenge.			
4.2 Use population data, community input and lived experience to determine the needs of a population for the purposes of designing programs, formulating policy, and conducting research or training.			
4.3 Demonstrate the ability to use an equity lens to critically analyze research, programs, and policies.			
4.4 Present and discuss a rationale for policies and programs that is grounded in evidence and addresses the information needs of diverse audiences.			
4.5 Use implementation science to analyze and translate evidence into policies and programs.			
4.6 Identify and propose promising practices and policies that can be used in situations where action is needed but where the evidence base is not yet established.			
4.7 Develop and apply evidence-informed practice guidelines and policies in their field.			
5. Communication			
5.1 Share thoughts, ideas, and feelings effectively with individuals and groups from diverse backgrounds.			

Form A. MCH COMPETENCIES

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MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
5.2 Communicate clearly and effectively using plain language and other accessibility principles to express information about issues that affect MCH population groups.			
5.3 Cultivate active listening skills and attentiveness to nonverbal communication cues.			
5.4 Tailor information for the intended audiences(s), purpose, and context by using appropriate communication messaging, tools like interpretations services, and health literacy principles, and using different modalities for dissemination. Audiences can include consumers, policymakers, clinicians, and the public.			
5.5 Employ foundational communication skills in challenging situations, such as receiving or presenting information during an emergency, relaying difficult news, or explaining opportunities and risks for health promotion and disease prevention.			
5.6 Summarize complex information appropriately for a variety of audiences and contexts.			
6. Negotiation & Conflict Resolution			
6.1 Understand their own implicit biases, points of view, and styles of managing conflict and negotiation and possess emotional self-awareness and self-regulation.			
6.2 Understand other's points of view, how various styles can influence negotiation and conflict resolution, and how to adapt to other's styles to navigate differences.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
6.3 Apply strategies and techniques of effective negotiation and evaluate the impact of communication and negotiation style on outcomes.			
6.4 Demonstrate the ability to manage conflict in a constructive manner.			
6.5 Navigate and address the ways identity, culture, power, socioeconomic status, and inequities shape conflict and the ability to come to a resolution.			
6.6 Use consensus building to achieve mutual understanding of challenges and opportunities, establish common goals, and agree on approaches for solving problems.			
7. Diversity, Equity, Inclusion, and Accessibility			
7.1 Conduct personal and/or organizational self-assessments regarding DEIA.			
7.2 Assess and elevate the strengths of individuals and communities based on sensitivity and respect for their diverse backgrounds and lived experiences and respond appropriately.			
7.3 Incorporate an understanding and appreciation of differences in experiences and perspectives into professional behaviors and attitudes while maintaining an awareness of the potential for implicit bias.			
7.4 Modify clinical and public health systems to meet the specific needs of a group, family, community, or population.			
7.5 Employ strategies to ensure equitable public health and health service delivery systems.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
7.6 Integrate DEIA into programs, research, scholarship, communications, and policies.			
7.7 Use data-driven tools and data disaggregation to guide efforts toward health equity and use plain language to present data.			
8. Honoring Lived Experience			
8.1 Solicit and implement input from people with lived experience in the design and delivery of clinical or public health services, program planning, materials development, program activities, and evaluation. Also, compensate participants as appropriate for such services.			
8.2 Provide training, mentoring, and other opportunities to people with lived experience, and community members, to lead advisory committees or task forces. Further, seek the training and guidance from these groups to inform program and care development.			
8.3 Demonstrate shared decision-making among individuals, families, and professionals using a strengths-based approach to strengthen practices, programs, or policies that affect MCH populations.			
8.4 Assess and tailor recommendations to social, educational, and cultural issues affecting people with lived experience.			
8.5 Celebrate individual and family diversity and provide an open and accepting environment.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
8.6 Recognize that organizational and system-level policies and practices may impact people with lived experience as well as acknowledge the role that people with lived experience can play in influencing policy and practice.			
8.7 Collaborate with organizations that are led by people with lived experience to build and deepen involvement across all MCH programs.			
8.8 Use feedback from people with lived experience, and community members, obtained through focus groups, surveys, community advisory boards, and other mechanisms as part of the project's continuous quality improvement efforts. Monitor and assess the program overall for effectiveness of partnerships between professionals and people with lived experience.			
8.9 Ensure that perspectives from people with lived experience are actively informing the development, implementation, and critical evaluation of MCH research clinical practice, programs, and policies.			
8.10 Assist health care professionals, organizations, and health plans to develop, implement, and evaluate models of family-professional partnerships and direct partnerships with self-advocates.			
8.11 Incorporate content about partnerships between people with lived experience and professionals into health professions and continuing education curricula and assess the effect of this training on professional skills, programs, and policies.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
9. Teaching, Coaching & Mentoring			
9.1 Practice humility and cultivate rapport so that teaching, mentoring, and coaching relationships can be productive.			
9.2 Clearly set and continuously reinforce boundaries and define expectations in a mentoring or coaching relationship.			
9.3 Use instructional technology tools that facilitate broad participation based on DEIA principles.			
9.4 Give and receive constructive feedback about behaviors and performance.			
9.5 Cultivate active listening skills.			
9.6 Incorporate inclusive evidence-informed education and be responsive to individuals' needs for accommodations.			
9.7 Consistently engage individuals using active learning methods.			
9.8 Effectively facilitate learning in groups with individuals of varying baseline knowledge, skills, and experiences.			
9.9 Expand beyond task- or project-focused coaching to career- and professional advancement-focused coaching and mentoring.			
9.10 Contribute to diversity in leadership by facilitating equitable, culturally appropriate, and accessible opportunities for teaching, coaching, and mentoring.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
10. Interdisciplinary/Interprofessional Team Building			
10.1 Accurately describe roles, responsibilities, and scope of practice of all members of the ID/IP team.			
10.2 Actively seek out and use input from people with diverse perspectives in decision making processes.			
10.3 Identify and assemble team members with knowledge and skills appropriate to a given task.			
10.4 Facilitate group processes for team-based decisions, including articulating a shared vision, building trust and respect, and fostering collaboration and cooperation.			
10.5 Identify and redirect forces that negatively influence team dynamics.			
10.6 Use a shared vision of mutually beneficial outcomes to promote team synergy.			
10.7 Share leadership based on appropriate use of team member strengths in carrying out activities and managing challenges.			
10.8 Adopt tools, techniques, and methods from a range of disciplinary knowledge and practice bases to address challenges and meet needs.			
10.9 Use knowledge of competencies and roles for disciplines other than one's own to improve teaching, research, advocacy, and systems of care.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
11. Systems Approach			
11.1 Ensure the mission, vision, and goals of an organization relate to the broader system in which it belongs to advance DEIA to facilitate shared understanding, responsibility, and action.			
11.2 Practice budgeting, effective resource use, continuous quality improvement, coordination of tasks, and problem solving.			
11.3 Develop projects that reflect a broader systems approach and lead meetings/teams effectively.			
11.4 Identify external partners and the extent of their engagement in the collaborative process.			
11.5 Interpret situations using a systems perspective (i.e., identify both the whole system and the dynamic interplay among its parts).			
11.6 Assess the environment, with community, family, and individual input, to determine goals and objectives for a new or continuing program, list factors that facilitate or impede implementation of evidence-based/informed strategies, develop priorities, and establish a timeline for implementation.			
11.7 Manage a project effectively and efficiently, including planning, implementing, delegating, sharing responsibility, staffing, and evaluating.			
11.8 Use implementation science to promote use of evidence-informed practices.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
11.9 Develop proficiency in program administration, policy development, and health care financing.			
11.10 Acknowledge the impact of historical oppression that has led to disparities in MCH populations to maintain and grow strong external partnerships based on openness, inclusion, and trust.			
11.11 Build effective and sustainable coalitions to achieve equitable population outcomes.			
11.12 Use community collaboration models (e.g., collective impact) and leverage existing community improvement efforts to define a meaningful role for MCH.			

12. Policy

12.1 Frame problems based on key data that affect MCH populations, including epidemiological, economic, and other community and state/jurisdictional trends.			
12.2 Use available sources of evidence when assessing the effectiveness of existing policies or proposing policy change.			
12.3 Distinguish the roles and relationships of groups (executive, legislative, and judicial branches, as well as interest groups and community coalitions) involved in the public policy development and implementation process.			
12.4 Apply appropriate evaluation standards and criteria to the analysis of alternative policies.			

Form A. MCH COMPETENCIES

You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

MCH Leadership Competencies	What specific activities will you do to demonstrate this? <i>(e.g. classwork, practicum, competency assignment, webinar, meeting, other)</i>	Documentation <i>(e.g. submitted reflection, signed attendance, presentations)</i>	Date Completed
12.5 Analyze the potential impact of policies using an equity lens on MCH population groups.			
12.6 Formulate strategies to balance the interests of diverse partners in ways that are consistent with MCH priorities.			
12.7 Effectively present evidence and information as a cohesively crafted MCH story to a legislative body, key decision makers, foundations, or the general public.			

C O N N E C T I C U T
LEND
Leadership Education in Neurodevelopmental
and Related Disabilities

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
1. MCH Foundations			
1.1 Life course perspective			
1.2 Family centered practice			
1.3 Cultural competence			
1.4 Medical home/health promotion			
1.5 Social determinants of health			
1.6 Research design and analysis			
2. Neurodevelopment/Disability Risk			
2.1 Brain development			

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
2.2 Neural tube defects			
2.3 Genetics and genetic syndromes			
2.4 Prematurity			
2.5 Nutrition and metabolic errors			
2.6 ASDs			
2.7 Intellectual disability			
2.8 Cerebral palsy and other motor/physical conditions			
2.9 Multiple disabilities			
2.10 Medically complex needs			
2.11 Mental health/ADHD			
2.12 Acquired brain injury			

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
3. Interdisciplinary Practices			
3.1 Discipline roles and competences			
3.2 Team process			
3.3 Screening and surveillance			
3.4 Assessment and diagnosis			
3.5 Evidence based practices			
3.6 Intervention planning and team service delivery			
3.7 Data based decision making			
3.8 Evaluation			
4. Developmental Disability Systems			
4.1 Developmental Disabilities Network			
4.2 NICU			

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
4.3 Early intervention			
4.4 Special education			
4.5 Community living and resources			
4.6 Transition to adult medical, work, community, and living			
4.7 Geriatric care			
4.8 Mental health			
5. Individual Person-Centered Supports			
5.1 Self-advocacy			
5.2 Service/care coordination			
5.3 Positive behavior supports			
5.4 Assistive technology			
5.5 Person centered planning			

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
5.6 Self determination			
5.7 Supported decision making			
6. Leadership			
6.1 Strategic planning			
6.2 Adult learning			
6.3 Leadership characteristics			
6.4 Scaling up EB practices with fidelity			
6.5 Model systems development			
6.6 Systems change			
6.7 Policy development and evaluation			
6.8 Principles of advocacy			
6.9 Legislative process			

Form A. LEND COMPETENCIES

Please indicate how you will plan to complete each of competencies. You will be required to document how you have attained each competency. If you are documenting the competency solely through seminar participation, please list specific seminars in which this competency was addressed.

CTLEND Competencies	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
6.10 Leading with and through others			
6.11 Responsibilities to others through mentorship			
7. Emerging Issues for MCH Leaders			
7.1 Life course planning			
7.2 Health disparities			
7.3 Service integration			
7.4 Inclusive community living			
7.5 ASD: systems of care over the lifespan			
7.6 Interdisciplinary research			
7.7 Early career development			
7.8 NAS – opioid exposure			
7.9 Obesity			
7.10 Zika virus			
7.11 Lead contamination			

Form A. ONLINE COURSEWORK

You will participate in three online courses and document your completion of these activities.

Online Courses	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Course Completed
1. Medical Home		
2. Family Centered Practice		
3. Public Health		

Form A. RESEARCH

1. Complete a group research project (Fall).

Group Research Project	What specific activities will you do to demonstrate this? (e.g. classwork, practicum, competency assignment, webinar, meeting, other)	Documentation (e.g. submitted reflection, signed attendance, presentations)	Date Completed
1. Research Preparation and Question			
2. Research Design			
3. Data Collection and Analysis			
4. Research Discussion and Dissemination			

2. Complete an individual research project (Spring).

1. Research Preparation and Question			
2. Research Design			
3. Data Collection and Analysis			
4. Research Discussion and Dissemination			

Form A. FALL PRACTICUM

1. Observe interdisciplinary practice (assessments and intervention models across the age span) for at least 40 hours during Fall semester (4 hours per week) with infants, children and youth with the complex neurodevelopmental and other related disabilities including ASD.

[illegible]

Form A. SPRING PRACTICUM

2. Participate in interdisciplinary practice models (across the age span) for at least 40 hours during Spring semester with infants, children and youth with complex neurodevelopmental and other related disabilities including ASD.

Spring Practicum (Site)	Date and Time	Reflection

Form A. CLINICAL

3. Screen five (5) young children for ASD.

Screening	Where	Date and Time	Reflection
Student One			
Student Two			
Student Three			
Student Four			
Student Five			

4. Participate in three (3) assessments with an infant/child/youth who is suspected of having ASD.

Assessment	Where	Date and Time	Reflection
Assessment One			
Assessment Two			
Assessment Three			

Form A. CLINICAL

5. Design and implement an interdisciplinary intervention with one child with ASD.

Intervention	Where	Date and Time	Reflection
Student (with ASD)			

6. Family Match Visits: follow a family with an infant/child/youth with ASD. Conduct one initial visit; two home visits; two school visits; one doctor's visit and one community activity visit.

Family Match Visits (Fall)	Where	Date and Time	Reflection
Initial Meeting			
Home Visit One			
Home Visit Two			
School Visit One			

Form A. CLINICAL

Family Match Visits (Fall)	Where	Date and Time	Reflection
School Visit Two			
Doctor Visit			
Community Visit			

Family Match Visits (Spring)	Where	Date and Time	Reflection
Initial Meeting			
Home Visit One			
Home Visit Two			
School Visit One			
School Visit Two			
Doctor Visit			
Community Visit			

Form A. ADVOCACY

1. Attend one (1) KASA Meeting, People First Meeting, ARC Meeting, or other community advocacy agency or meeting.

Advocacy Meeting	Where	Date and Time	Reflection

2. Participate in one (1) advocacy project that will culminate with a visit with legislators.

Project Title	Where	Date and Time	Reflection

Form A. Setting Your Own Goals for LEND

Please provide specific and comprehensive answers to the following questions.

1. What do you want to be doing 5 years from now?

2. Based on this, list 3 personal goals for your participation in LEND?

Pediatric Audiology Requirements

The UConn LEND program is one of 12 LEND programs that receives supplemental funds to expand and augment their pediatric audiology training efforts. Requirements of these trainees include:

- **Pediatric Audiology Seminar:** This is a weekly, three-hour seminar in Pediatric Audiology focusing on hearing loss for individuals with complex needs such as individuals with ASD and other developmental disabilities, MCH competencies and program competencies. This seminar may be taken for credit through the SLHS program or as an independent study with a LEND faculty member. The interactive seminars are provided in conjunction with required readings, assignments, participation in national AUCD activities (e.g., journal club, conferences), observations of screening, diagnosis and treatment of infants, children, adolescents and adults with developmental disabilities, and other practical experiences.
- **Pediatric Grand Rounds:** Each LTT will be required to participate in Audiology Grand Rounds. Grand Rounds serve as an opportunity to review challenging audiology cases. Audiology Grand Rounds are offered monthly through the Doctor of Audiology program in the Department of SLHS. Each LTT will be expected to present one grand rounds case that will spotlight a challenging pediatric case with an emphasis on interdisciplinary care. LEND competencies should be identified for the presented grand rounds case.

Individual Research Projects: Each LTT will be required to implement a research project with infants, children and youth with hearing loss with a focus on those individuals and their families with complex needs, including ASD or other developmental disabilities. Dr. Cienkowski will provide guidance for these projects.

Clinical Practica: Each LTT will be required to participate in a clinical practicum site for 4 hours a week during the academic year as part of the LEND curriculum.

- **Enhanced Practicum in Audiology (25 hours a week):** LTT's will participate in enhanced practicum at a site that provides services for infants, children, youth and/or adults with hearing loss. The primary practicum site is Capitol Region Education Council (CREC) Soundbridge; however, practicum site opportunities for LTT's have been expanded to include innovative hospital and community based models that serve underserved populations of children/youth in Hartford and New Haven. In addition, the Audiology doctoral students who participate in this enhanced training will participate across the state in other agencies that provide services to this population. All provide opportunities to screen, assess and intervene with a range of infants/children/youth with hearing loss and other developmental disabilities including ASD.

LEND Seminar Objectives

As a result of participating in the seminar, students will demonstrate knowledge of the following:

- 1.** Systems of care serving people with neurodevelopmental and related disabilities and the strengths and limitations of these systems. This includes the Administration on Developmental Disabilities (ADD), early intervention and special education and understanding the Maternal and Child Health Bureau's mission and the role of the LEND program in advancing MCHB's mission.
- 2.** Skills necessary for leadership, including those needed to work with and advocate for persons with Neurodevelopmental Disabilities (ND) and their families effectively.
- 3.** Benefits and challenges of interdisciplinary teams. This includes understanding the perspective of each discipline involved in providing services and supports to persons with ND and their families.
- 4.** Family-centered and culturally competent philosophy and practices for persons with neurodevelopmental and related disabilities.
- 5.** Medical home across the lifespan.
- 6.** Genetics and genetic syndromes and the implications for life functioning.
- 7.** Screening, diagnosis and interventions for particular neurodevelopmental and related disabilities with an emphasis on ASD, including but not limited to: Fragile X, Cerebral Palsy, Down Syndrome, ADHD, Intellectual Disabilities, Traumatic Brain Injury, and Epilepsy.
- 8.** Supports and strategies to enhance quality of life. This includes assistive technology, positive behavior supports, and inclusive communities.
- 9.** Comprehensive systems of care across the lifespan. This includes early intervention, schools, transition to adulthood and geriatrics.
- 10.** Principles of adult learning theory.
- 11.** Principles of evidence-based research and the challenges associated with their application in real world settings.

Form D. Fall Reading Reflection Template

Fall Reading Reflection

Name:

Date:

Name of Article/Chapter:

Author:

For each reading, please respond to the following questions (please limit your responses to one page)

1. What do you like about the reading?

2. What do you dislike about the reading?

3. How will you apply what you learned from this reading to your current/future career?

4. What is one thing you will do differently as a result of this reading?

Form E. Spring Reading Reflection Template

Spring Reading Reflection

Name:

Date:

Readings:

Write a reflection addressing the following questions and prompts:

1. Synthesize the main points of each reading into one reflection addressing all readings.

2. Identify similarities and differences between readings.

3. Write about how you will use this information to inform/improve your practice.
How can you put your learning into practice?

4. What would you like to learn more about as a result of these readings?

Medical Home

The Medical Home for Children and Youth with Special Health Care Needs Training Academy (MHTA) Curriculum is based on the training program “Every Child Deserves a Medical Home” produced in 2000 in a collaboration including the American Academy of Pediatrics, Family Voices, Maternal and Child Health Bureau (MCHB), the National Association of Children’s Hospitals and Related Institutions and the Shriner’s Hospitals for Children. The CT DPH developed and funded the course and the CT UCEDD administers it. **Completion of this course is due on December 18, 2023 by 11:59pm.**

By the end of the course, students will be able to

1. Provide professionals, paraprofessionals and families/caregivers who care for children and youth with special health care needs (CYSHCN) with information and materials to assist them in providing care for this population.
2. Provide pediatric and family primary care practices with information and strategies for becoming medical homes in the community.
3. Provide information on the concept of medical home to persons including families/caregivers who have children and youth with special health care needs and organizations that work with CYSHCN.
4. Understand the essential components of care coordination in the medical home concept and how it supports the provision of comprehensive collaborative care.
5. Promote family-professional partnerships to provide care, advocacy and support in a manner that is coordinated and explicit about roles and expectations and ensures clear and consistent communication of information.
6. Provide information and training to health care providers, community providers, community based organizations and family members and Youth with SHCN about transition as a necessary and important aspect of life and to educate and motivate these key stakeholders to become active participants in the transition process.

Form F. Online Courses

Family Centered Practice

The purpose of this course is to illustrate the centrality of the family in the life of infants, children and youth with disabilities and, subsequently, intervention. This course relies on outside readings, on-line discussions, and completion of performance-based activities and competencies which are embedded into 15 modules. **Completion of this course is due on December 18, 2023 by 11:59pm.**

By the end of the course, students will be able to

1. Identify family system components and internal/external influences on family functioning.
2. Discuss the core principles of family centered practice.
3. Demonstrate the use of effective communication skills with families, including active listening, questioning techniques, reflection of feelings, and reflections of content.
4. Demonstrate understanding and respect of culture, diversity and individuality of families.
5. Communicate effectively with families to identify their resources, priorities and concerns.
6. Communicate effectively with families to identify their formal and informal social support networks.
7. Identify and review current family assessment protocols.
8. Identify and review measures of quality of life.
9. Demonstrate understanding of effective family outcomes to be delineated on the IFSP/IEP/transition plan.
10. Collaborate with families to identify home and community activity settings and learning opportunities for the development of IFSP/IEP/transition outcomes.
11. Identify components of a responsive service delivery system based on the IFSP/IEP/transition plan.
12. Identify key components of effective service coordination.
13. Demonstrate family capacity building practices to be used in intervention.
14. Demonstrate data collection and data decision rules to be used in interventions with families.
15. Identify guidelines for implementing research with families.

Public Health and Disability

Disability in Public Health draws from the four public health graduate courses which comprise the UCEDD's Certificate of Interdisciplinary Disability Studies in Public Health to provide LEND trainees with foundational knowledge and practical application to include persons with disabilities in all public health activities as framed by the 10 Essential Public Health Services. Each module addresses one of the Including People with Disabilities: Public Health Workforce Competencies and associated objectives.

By the end of the course, students will be able to

Discuss disability models across the lifespan.

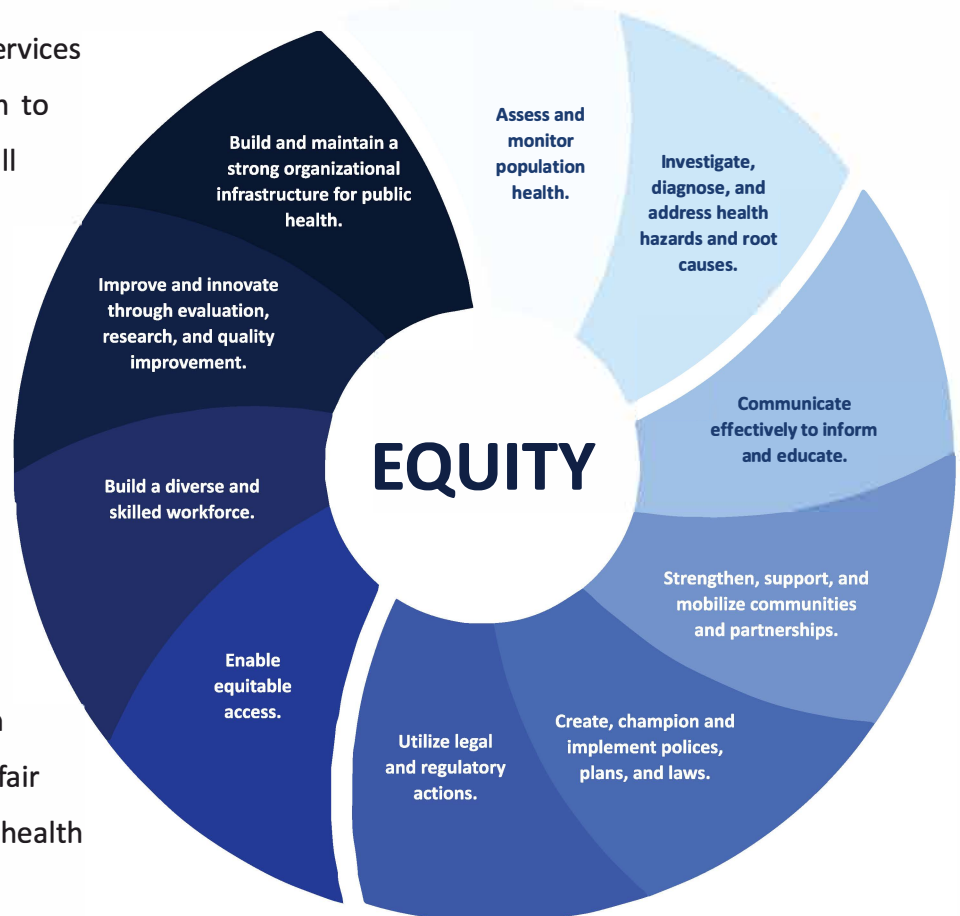
Discuss methods used to assess health issues for people with disabilities.

Identify how public health programs impact health outcomes for people with disabilities.

Implement and evaluate strategies to include people with disabilities in public health programs that promote health, prevent disease, and manage chronic and other health conditions.

THE 10 PUBLIC ESSENTIAL PUBLIC HEALTH SERVICES

The 10 Essential Public Health Services provide a framework for public health to protect and promote the health of all people in all communities. To achieve optimal health for all, the Essential Public Health Services actively promote policies, systems, and services that enable good health and seek to remove obstacles and systemic and structural barriers, such as poverty, racism, gender discrimination, and other forms of oppression, that have resulted in health inequities. Everyone should have a fair and just opportunity to achieve good health and well-being.



Form G. Group Research Projects

LEND Group Research Projects Fall 2023

As an introduction to the research process and conducting interdisciplinary research, you will complete a short-term research project in a small group. We will work with you to choose a research project relevant to the MCH Emerging Topic Areas (e.g., medical transition, newborn screening, etc.). You will participate in a small group assigned by the LEND Leadership Team. It will be based on your reported competence, confidence, and experience conducting research and will involve working with other disciplines. As a team, you will write a paper on your topic and provide a brief presentation of your project.

The goal of this project is to have you systematically collect data/information (i.e. conduct research) as a group. You will conduct comprehensive literature reviews that summarize the research on a given topic.

TIMELINE

Task	Deadline
Rough drafts due via email to the LEND Director (Abstract, Paper, & PowerPoint).	October 26, 2023
Presentation Day	December 8, 2023

Final Products

Abstract: Your group will prepare an abstract of no more than 250 words from your project. Final versions of the abstracts will be posted on the LEND website. Abstract drafts should be submitted via email to the LEND Director (bruder@uchc.edu) and LEND Co-Coordinator Terrell Reichow (treichow@uchc.edu) by October 26, 2023 for revisions. ***The final version of your abstract is due December 8, 2023.***

Presentation: As a group, you will create a presentation of your capstone project that covers the background, rationale, and methods for completing the project. The presentation should be 15 minutes, including time for questions. Presentation drafts (e.g. Power Point slides) should be submitted via email of the LEND Director (bruder@uchc.edu) and LEND Co-Coordinator Terrell Reichow (treichow@uchc.edu) by October 26, 2023 for revisions. ***The final version of your presentation is due December 8, 2023.***

Paper: As a group, you will write an 8-10 page double-spaced paper that summarizes your capstone project. In addition to the sections from your research proposal, it will also include a summary of the results of your project and your project implications. This paper should be prepared in APA format. Paper drafts should be submitted via email to the LEND Director (bruder@uchc.edu) and LEND Co-Coordinator Terrell Reichow (treichow@uchc.edu) by October 26, 2023 for revisions. ***The final version of your paper is due December 8, 2023.***

Form H. Individual Research Project

LEND Individual Research Project Spring 2024

All LTTs are responsible for completing an independent research project. **The goal of this project is to have you systematically collect data (i.e. conduct research) that results in products that will be disseminated to variety of audiences and in a variety of settings.** Some of your projects will lead to publications in peer-review manuscripts and/or presentations at scholarly conferences including the annual AUCD conference.

All projects must:

1. **Be interdisciplinary.** At the minimum, they must inform members of your discipline about how your discipline can intersect more effectively with other disciplines.
2. **Be focused on one of the MCH Emerging Topic Areas**
 - a. Family engagement
 - b. Medical home
 - c. Early detection/newborn screening
 - d. Medical transition
 - e. ASD
 - f. Other MCH Emerging Topic Area approved by LEND Director (bruder@uchc.edu)
3. **Collect data.** Data must be collected systematically in order to contribute to the evidence base in your and/or other content areas.
 - a. *Your project **DOES NOT HAVE** to include quantitative analysis (i.e., statistics are not required). It can be qualitative or descriptive in nature. In some cases, it could also involve a comprehensive review of literature.*
 - b. *Your project **does not have to be novel**. You can replicate previous research.*
4. **Be aimed at systems change.** Your project must lead to specific practice/policy implications.
5. **Lead to the creation of products that stand-alone.** A person who is naïve to the nature of LENDs and your discipline must be able to accurately interpret what you did, why you did it, and what the implications are.

Form H. Individual Research Project

LEND Individual Research Project Spring 2024

TIMELINE

Task	Deadline
Propose a topic and research question for approval via email to the LEND Director (bruder@uchc.edu) and LEND Co-Coordinator (treichow@uchc.edu)	October 19, 2023
Submit a complete proposal via e-mail to the LEND Director.	December 7, 2023
(If required) Send draft of IRB protocol via email to the LEND Director.	December 7, 2023
(If required) Submit IRB protocol with the LEND Director.	January 18, 2024
Rough drafts due via email to the LEND Director (Abstract, Paper, & PowerPoint).	March 21, 2024
Presentation Day	April 26, 2024
Dissemination Day	April 26, 2024

Research Proposal Components

1. Project Title
2. Background: For this research proposal, the section can be a brief review with a few pivotal, recent key references
 - a. Purpose
 - b. Research question
3. Methods: How you will complete this project (e.g., literature review, data collection, etc.)
4. Timeline: Provide a detailed projected timeline of your process and deadlines
5. References

Final Products

Abstract: You will prepare an abstract of no more than 250 words from your research. This should include a brief introduction, purpose statement, methods, results, and conclusion. Final versions of the abstracts will be posted on the LEND website and submitted to AUCD for a conference poster presentation. Abstract drafts should be submitted via email to the LEND Director (bruder@uchc.edu) by March 21, 2024 for revisions. *The final version of your abstract is due April 26, 2024.*

Form H. Individual Research Project

Presentation: You will create a presentation of your research project that covers the background, rationale, methods, results, and discussion of the project. The presentation should be 8-10 minutes, including time for questions. Presentation drafts (e.g. Power Point slides) should be submitted via email to the LEND Director (bruder@uchc.edu) by March 21, 2024 for revisions. ***The final version of your presentation is due April 26, 2024.***

Paper: You will write an 8-10 page double-spaced paper that summarizes your research project. This paper should be written as if it were to be submitted to a journal for publication, and should include the following headings: Introduction, Methods, Results, Discussion. This paper should be prepared in APA format. Paper drafts should be submitted via email to the LEND Director (bruder@uchc.edu) by March 21, 2024 for revisions. ***The final version of your paper is due April 26, 2024.***

Additional products (such as peer-review manuscripts and/or presentation proposals) may be created at the discretion of the Trainee and the mentor. These products do not need to be created by the end of the semester. **However**, they also should reference the LEND grant in their acknowledgments.

Note: Authorship for any scholarly works/presentations resulting from these research projects will be assigned based on the criteria noted in the Publication Manual of the American Psychological Association. Practically speaking, authorship will be a result of contribution to the conceptualization and/or development of a specific product (manuscript or presentation). The authorship order will be determined a priori and according to level of contribution to the specific product. With rare exceptions, the LEND Trainee will always be the first author on all publications and presentations. *As a rule of thumb, it is better to offer authorship to all of those individuals who helped contribute to your research project.* Many individuals will simply ask to be included in the acknowledgments section.

These deadlines are tentative, as you must receive permission from your mentor and the LEND Director before proceeding onto the next step. Additional rounds of edits may be required before proceeding to the next step, but all IRB documents need to be submitted by January 18, 2024 at the latest. Please see the Standards and Criteria for Conducting Research and Evaluation (Bruder, 2004) on Blackboard (HuskyCT) for additional guidance in developing research questions and choosing appropriate designs.

Acknowledgments

These guidelines were developed/adapted from previous versions created by Dr. Cristina Mogro-Wilson. Additional sources that informed their creation are:

1. <http://www.chop.edu/pages/research-course-and-training-program>
2. <http://depts.washington.edu/lend/trainees/project.html>

Form I. Fall Practicum Observation Reflection Template

Fall Practicum Observation Reflection

Name:

Date of Visit:

Name of Site Observed:

Total Time Spent On Site:

Date of Reflection:

After the site observation, answer the following questions:

1. Describe the setting where you conducted your observation.
2. Describe your impressions of the teaming or interdisciplinary approach that is demonstrated in caring for/working with persons at the site. What type of team is it? What examples support this opinion?
3. How did your practicum observation align with the following LEND core values: family centered practice, cultural competence, interdisciplinary team process, medical home, inclusive practice, evidence-based practice and people-first language? Why/why not?
4. Reflect on whether children with neurodevelopmental disabilities have access to non-disabled peers in this setting. If this was not an “inclusive” environment, HOW could what you observed be accomplished in an inclusive setting? Explain why or why not.
5. Which MCH Leadership and LEND program competencies were specifically addressed in your observation? (List all that apply)
6. What did you learn from this experience and how will it impact your work in the future? Specifically, what will you do differently as a result of this experience?

Form J. Spring Practicum Reflection Template

Spring Practicum Reflection

Name:

**Week Addressed by
this Reflection:**

Name of Site Observed:

Date of Reflection:

Total Time Eligible for LEND:

Answer the following questions to address all practicum hours completed in this week:

1. Activity/lesson/therapy observed or participated in (if more than 1 please describe all).
2. How many professionals were involved in the activity/lesson/therapy and what were their disciplines?
3. Was the activity/lesson/therapy planned by a group of professionals (who and how many) or by the teacher/interventionist/therapist? You will have to ask the leading professional either prior or after the activity/lesson.
4. Did the activity/lesson/therapy address multiple domains of learning (e.g. reading and math; language and motor, etc.)?
5. Was there data being taken on student performance during the activity/lesson/therapy?
6. How did today's experience confirm or change something you believed about interdisciplinary practices?
7. How did today's experience confirm or change something you believed about culturally sensitive or culturally competent practices?
8. How was family centered practice applied? If family was not present, describe how they should have been included.
9. Reflect on whether children with neurodevelopmental disabilities have access to non-disabled peers in this setting. If this was not an "inclusive" environment, HOW could what you observed be accomplished in an inclusive setting? Explain why or why not.
10. If you were leading the activity/lesson you observed or participated in today, is there anything you would do differently and why?
11. How did your work today help you improve your competence, in what area and why?

Screening Assignment

As described in grant activity 1.4.6, every Long-Term Trainee is required to screen five young children for developmental and other delays (including ASDs). In the seminar, we have discussed several screening instruments including:

- The Social Responsiveness Scale-Second Edition,
- The Ages and Stages Questionnaires, and the
- Modified Checklist for ASD in Toddlers- Revised with Follow-Up (M-CHAT-R/F).

You will have to utilize a screening measure with five different children. You can use any of the above measures or any of the measures available here: <https://www.aap.org/en/patient-care/developmental-surveillance-and-screening-patient-care/> At least one of the children must be under age three currently. The remaining children can be older currently, but you will have to ask their parents to report on their behaviors from this developmental period. The children do not need to be diagnosed with a developmental disability.

To document this competency, you will need to write a short (~ 1/2 page) report detailing the following:

- A short developmental history of the child (1 paragraph; if you can get this information)
- Describe the screening instrument you used
- Present the results of this screening assessment including
 - Scores
 - Whether the child met the cutoff
- Recommendations based on these results (e.g. refer for a full diagnostic evaluation)

Note: If you use the M-CHAT-R/F, you must ask at least three of the follow-up interview questions regardless of the child's performance on the rating scale.

Form L. Assessment Observation Reflection Template

Assessment Observation Reflection

Name:

Date of Visit:

Assessment Site:

Date of Reflection:

After observing an ASD assessment, answer the following questions.

1. What assessment did you observe?
2. What are the psychometric properties (i.e., validity, reliability) of the assessment?
3. What is the purpose of this assessment?
4. Why was this assessment given?
5. What procedures were used to plan, prepare, collect, and/or summarize the assessment information?
6. Provide an example of appropriate use of the assessment results in program planning/monitoring for this child or youth. Why would this be an appropriate example?
7. Were there any limitations you observed during the assessment observation?
8. Was there anything you would have done differently if you were the service provider administering this assessment?
9. If you were the service provider administering the assessment, what other sources of information would be important to consider when gathering information?
10. Do you feel that the assessment used was appropriate? Why or why not?
11. How does this assessment observation inform your practice?

Form M. Intervention Reflection Template

Intervention Reflection

Name:

Date of Visit:

Intervention Provided:
Did the person have ASD?

Date of Reflection:

After completing an intervention, answer the following questions.

1. What intervention was used? Why was this intervention chosen?
2. What is the evidence base that demonstrates effectiveness of this intervention?
3. How many children received the intervention, and what was the age range?
4. What data did you use as a baseline for this intervention? How did data inform this intervention?
5. What dosage of intervention was provided (e.g., what amount of intervention was provided)?
Why was this dosage chosen?
6. What was the intended outcome for providing this intervention? (i.e., what did you want the child to learn?)
How did you plan for generalization of this outcome across different settings and routines? (i.e., home, community)
What behavior is being addressed?
7. How did you plan for positioning needs, environmental modifications or other support strategies?
8. How was family engagement planned for and implemented throughout the intervention? How could family participation be improved?
9. What challenges did you experience while providing this intervention? What might you do different in the future?
10. How does this intervention experience inform your practice?

Home Visit Guiding Questions

The purpose of the home visit should be to talk and get to know the family. After the visit, you will prepare a written reflection describing the details of the visit. The write up (*Form O, next page*) could include concepts such as:

- The family's views (beliefs, values, etc.) about the child's learning and their own role in helping their child learn.
- The family's views about intervention services they receive.
- The kinds of supports and resources the family needs or desires.

The following questions were created to support you to start the conversation, and answers to them should provide you with enough information to reflect and write about your visit. However, if you would like to use these as examples to come up with your own questions to ask you are welcome to do so, but please include any questions asked in your write-up.

Questions:

1. Tell me about your son/daughter.
(could include background info, important information, strengths, etc.)
2. What are his/her strengths?
3. Can you describe what a typical day looks like for your family?
4. What does your son/daughter like to do for fun?
5. What do you like to do as a family for fun?
6. What have been some of your biggest challenges as a family? How do you overcome those?
7. Who have been the most supportive for your child and family? How have they supported you?
Why is this support important to your family?
8. What types of accommodations does your son/daughter use at home or in the community?
How did you go about getting those?
9. What other supports does your son/daughter need at home or in the community?

Form O. Family/Advocate Reflection Template

Family/Advocate Reflection

Name:

Date of Visit:

Family/Community Activity:

Date of Reflection:

Expectations Regarding Confidentiality: Because of the nature of the activities you will part take in as a LEND Trainee, all your work **must be kept confidential**. This includes no identifiable information, such as names or the town of your families, in your submitted work. Names must be changed or initials used in your reflections. If you alter names that must be clearly stated. Names of schools may be included because that is public information.

*Respond to the following questions based on the family/advocate community activity you attended.
Remember all identifiable information must be kept confidential.*

1. Describe the Family/Community activity you observed. How was the activity to be observed decided?
2. What family strengths did you observe?
3. Describe formal/informal supports.
4. Describe challenges observed or articulated by the family and if shared, what the family did/is doing to overcome them.
5. What did you observe about opportunities for meaningful participation of all family members?
6. How did this visit influence your views on inclusion, disability, or families?
7. Based on this observation what would a “good life” look like for this child/youth/young adult?
8. How does this life differ from any other child/youth/young adult?

Form P. Weekly Hours Log

Weekly Hours Log | 2023-2024

Date	Hours	Activity	Program Competency
Total Hours			

Form Q. Event Reflection Template

Event Reflection

Name:

Date of Visit:

Event Title:

Presenter of Event:

Date of Reflection:

Briefly respond to the following questions based on the event you attended.

1. Why were you interested in this event?

2. How does the information presented in the event relate to the MCH Leadership competencies?

3. Explain how the information provided in the event relates to your current role as a LEND Trainee.

4. Explain how you will use the information provided in the event in your future career.

5. Which MCH Leadership and LEND program competencies were specifically addressed in the event you participated in?

Form R. Webinar Reflection Template

Webinar Reflection

Name:

Date of Webinar:

Title of Webinar:

Presenter of Webinar:

Date of Reflection:

Briefly respond to the following questions based on the webinar.

1. Why were you interested in this webinar?

2. Explain how the information provided in the webinar relates to an MCH Leadership competency.

3. Explain how the information provided in the webinar relates to your current role as a LEND Trainee.

4. Explain how you will use the information provided in the webinar in your future career.

Meet with your group to plan your meeting. Include background information, research or data, and your

ASK-what do you want the legislator to do?

GUIDELINES FOR YOUR MEETING

- Everyone must have a role in the group meeting. Meetings are fifteen minutes.
- **Assign Roles:**
 1. **One person opens the meeting and does the “Thank you for meeting with us today.”** Give a **brief** description of the LEND. State in one sentence what you are discussing today. Segue to introductions.
 2. **Each person introduces themselves** Share what town you are from and your personal or professional experience, including if you have personal/professional experience with the issue being discussed. These should be BRIEF.
 3. **One person describes the purpose of the meeting.** We are here to discuss... This person sets the overview of the discussion and presents basic facts and data. This person makes your ASK. What do you want the legislator to do: enact a bill, study the issue, change appropriations, etc.? If you have a handout to leave, **DO NOT HAND IT OUT NOW.**
 4. **One person, preferably someone who has had personal or professional experience with the issue being discussed, illustrates with a story.** If you don’t have this, illustrate with a story about this that you may have heard.

One person closes with a thank you. Restate our ask, make yourselves available to answer any other questions on this issue. If you have a handout, hand it to the legislator as you close the meeting.

Tips for a Successful Meeting

- Do not read scripts. Make eye contact and talk to your legislator. It is okay to have index cards with bulleted notes.
- Do not punt! If you are asked a question and you don’t know the answer, say so, and then promise to get them the information. **Send them the information as a follow up.**
- Try not to talk about programs-talk about people. If you must, talk about initiatives. Programs don’t vote-constituents vote.
- Lastly, be sure to send thank you notes to all those who attend our session.

Guidelines Prohibiting the use of Artificial Intelligence and ChatGPT

All students are expected to act in accordance with the Guidelines for Academic Integrity at the University of Connecticut. If you have questions about the academic integrity or intellectual property, you should consult UConn's guidelines for academic integrity. Posting course material on student tutoring and course sharing websites (e.g. Chegg, Course Hero) may be a violation of copyright and intellectual property and a violation of academic integrity. Many of you may also be aware of the recent release of ChatGPT3, a Large Language artificial intelligence (AI) model that has the capacity to quickly produce text on a range of topics. ChatGPT3 aggregates the ideas and insights of many researchers without giving them credit. Submitting ChatGPT-generated text as your own work would be an act of plagiarism insofar as it would involve passing off the work of others as your own. For these reasons, you are not allowed to use this ChatGPT or any other similar tools to produce essays or other academic work for this class, unless otherwise explicitly permitted to do so. You should also know that the university has AI detection software that distinguishes between AI generated content and human generated content.

Notes:

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