University of Connecticut Leadership Education in Neurodevelopmental and Related Disabilities

2025 – 2026

Trainee Handbook

CONNECTICUT LEND
Leadership Education in Neurodevelopmental and Related Disabilities

UCONN
CENTER FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES

This handbook was developed for the 2025-2026 Connecticut Leadership Education in Neurodevelopmental and Related Disabilities (CT LEND) Trainees.

This handbook will assist trainees in becoming familiar with the policies, procedures, requirements, and expectations of the CT LEND program. CT LEND is a 5-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 disorder (ASD) and other neurodevelopmental disabilities in clinical practice, research, and public policy.

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CT LEND Director
Mary Beth Bruder, PhD
860.679.1500
bruder@uchc.edu

UNIVERSITY OF CONNECTICUT A.J. PAPPANIKOU CENTER FOR EXCELLENCE IN DEVELOPMENTAL DISABILITIES
263 Farmington Avenue, MC 6222, Farmington, CT 06030 • Phone: 860.679.1500 Fax: 860.679.1571
WWW.CTLEND.UCONNUCEDD.ORG

Table of Contents

Appendices

Templates

About LEND

The CT LEND Program is co-located at the University of Connecticut Center for Excellence in Developmental Disabilities (UConn UCEDD) which was established in 1985 and originally located on the University's campus in Storrs, Connecticut. In 2001, the UConn 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 25 years, the UConn UCEDD has played a key role in major disability initiatives. Through service, research, and training, the UConn UCEDD has assisted in the advancement of early intervention, health care, community-based services, inclusive and meaningful education, childcare, transition from school to work, employment, recreation and quality assurance, housing, assistive technology, transportation, and family support.

LEND Programs

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 (2014) and are administered by the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB). The purpose of the LEND 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, with one located in each state, as well as 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.

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.

The Association of University Centers on Disabilities (AUCD)
LENDs and UCEDDs are part of the Association of 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:

Count	AUCD Network member
68	University Centers for Excellence in Developmental Disabilities (UCEDDs), funded by the Administration on Intellectual Developmental Disabilities (AIDD)
60	Leadership Education in Neurodevelopmental Disabilities (LEND) Programs funded by the Autism CARES Act
16	Intellectual Developmental Disability Research Centers (IDDRCs), 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. As a trainee at an AUCD-member program (such as LEND), individuals are also members of AUCD. AUCD trainees—referred to as Emerging Leaders—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 Emerging Leaders Community and sign up for the AUCD Emerging Leaders newsletter.

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, Dr. Mary Beth Bruder (bruder@uchc.edu).

A Brief History of LEND

Year	Activity
1912	The Children's Bureau was created as the first federal agency to focus explicitly on improving the lives of children and families.
1935	Title V of the Social Security Act was enacted, including 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	The Developmental Disabilities Assistance and Bill of Rights Act was passed and LEND was created to provide interdisciplinary training to professionals in a variety of disciplines at all levels.
2006	LENDs were funded under the Combating Autism Act and were administered by the Health Resources and Services Administration's (HRSA) Maternal and Child Health Bureau (MCHB).
2014	The Combating Autism Act was reauthorized 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 fellow in pediatrics or psychology, or 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, Genetic Counseling, Nursing, Occupational Therapy, Pharmacy, Physical Therapy, Public Health, School Counseling, School Psychology, Social Work, Special Education, 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

As a CT LEND trainee, your experience will include a combination of required activities and self-directed activities. The CT LEND Program includes Connecticut-specific competencies and requirements based upon the competencies and requirements of the national LEND program and the Maternal and Child Health Bureau.

You will complete all CT LEND 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 CT LEND Director, Dr. 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).

Your first tasks as a CT LEND Trainee will be to review this handbook, to familiarize yourself with some of the aspects of being a LEND Trainee, and to complete self-assessments of LEND and Maternal and Child Health (MCH) Leadership Competencies. The results of the assessments will be used to develop an "Individualized Learning Plan" (ILP) with your LEND Discipline Coordinator and CT LEND Staff. The ILP is a helpful tool that will keep you on track to complete the LEND requirements and competencies.

Types of Trainees

There are several activities required for the successful completion of the CT LEND program. However, these requirements vary depending on the type of trainee you are. There are three types of trainees: Long-Term Trainees (LTTs), Medium-Term Trainees (MTTs), and Short-Term Trainees (STTs).

Long-Term Trainees (LTTs)
Long-Term Trainees are defined as those who will complete more than 300 hours of training per semester. At the CT LEND most LTTs are funded as Graduate Assistants (GAs). As such, LTTs are expected to work a minimum of 20 hours per week throughout the academic year, including breaks (e.g., Thanksgiving, winter recess, spring break). In total, LTTs will complete at least 600 hours of training across the academic year (at least 300 hours per semester; 15 weeks x 20 hours = 300 hours). LTTs must complete all activities in the ILP (or approved substitutions) to successfully complete CT LEND Program.

Medium-Term Trainees (MTTs)
Medium-Term Trainees are defined as those who will complete 40-299 hours of training in one academic year. MTTs will complete a modified ILP to identify the activities they will complete to fulfill the CT LEND MTT hours requirements. MTTs must attend weekly seminars and record their attendance each week. All other activities are optional and should be described in the modified ILP.

Short-Term Trainees (STTs)
Short-Term Trainees are defined as those who will complete up to 39 hours of training in one academic year. STTs may decide which activities they would like to participate in based on individualized need and interest.

Additional Trainee Classifications

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 Appendix A for a more detailed description of the requirements specific to Pediatric Audiology Trainees).

Family/Self-Advocate Trainees
Family/Self-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/Self-Advocate Trainees participate in weekly seminars and are matched with other trainees to share their expertise. Family/Self-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 complete to fulfill the CT LEND MTT requirements.

Community Trainees
Community Trainees (i.e., professionals, other community members) will also be included in CT LEND program as LTT, MTT, or STT. As a Community Trainee, your expectations align with those of the trainee group (Long-, Medium-, or Short-Term) you are assigned.

CT LEND Requirements

The following table includes a detailed description of each CT LEND activity and related trainee expectations. Whether each activity is required depends on the type of trainee you are, your discipline, and any accommodations or substitutions you propose. Long-Term Trainees must complete all requirements to successfully complete the CT LEND Program. Asterisks (*) indicate activities that are required for Medium-Term Trainees. All activities are optional for Short-Term Trainees. Templates are indicated with bold font and will be available on HuskyCT (UConn's online learning management system). For support with CT LEND requirements, or to propose substitutions, please contact CT LEND Director, Dr. Mary Beth Bruder (bruder@uchc.edu).

UConn NetIDs
Many of the activities have mandatory reflections, which must be submitted via HuskyCT. A UConn NetID is required to access HuskyCT. If you need a UConn NetID, please contact Dr. Bruder and Christine Jozef (jozef@uchc.edu).

Submission Review Process
All reflections will be reviewed by the CT LEND Staff, who will provide suggestions and feedback to support development of your leadership and critical thinking skills. You are expected to review this feedback and incorporate it into your future work. In some cases, CT LEND Staff may ask that you "revise and resubmit" a reflection to meet CT LEND requirements.

Progress Reports
In the middle and end of each semester, trainees will receive progress reports on their completion of the CT 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. CT LEND faculty/staff, or your Discipline Coordinator can also schedule time to meet individually to monitor progress and provide additional feedback. They are also available for assistance, as needed.

CT LEND Requirements, Resources, and Trainee Expectations

Requirement	Description and Resources	Trainees will be expected to:
*Weekly Seminars	Seminars are held every Friday from 8:30am – 4:30pm in person at the UConn UCEDD. The topics covered in seminars will be built upon by other CT LEND activities. The *CT LEND Seminar Objectives Overview (Appendix B)* outlines the overarching objectives for the LEND weekly seminars.	• Attend and participate in weekly seminars.
*Knowledge Assessments	At the beginning of each semester, trainees complete a Pre-Knowledge Assessment to measure baseline understanding of the topics that will be discussed throughout that semester. At the end of each semester, trainees complete a Post-Knowledge Assessment to measure their understanding of the topics covered that semester. These assessments are not counted as grades for the CT LEND course. Instead, they are designed to help evaluate the effectiveness of the LEND curriculum and trainees' understandings of critical content.	• Complete pre-knowledge assessments at the beginning of the Fall and Spring semesters. • Complete post-knowledge assessments at the end of the Fall and Spring semesters.
*MCH Leadership Competency Self-Assessments	Trainees complete the MCH Leadership Competency Self-Assessment (i.e., self-report) to evaluate their knowledge and skills related to each of the MCH Leadership Competencies. Trainees complete this self-assessment at three timepoints (beginning, middle, and end of the LEND Program).	• Complete the MCH Leadership Competency Self-Assessment three times: (1) at the beginning of the Fall semester; (2) between the Fall and Spring semesters; (3) at the end of the Spring semester.
*Consumer Satisfaction Surveys	Trainees complete a Consumer Satisfaction Survey at the end of each weekly seminar to provide feedback on the seminar objectives, presenters, and overall satisfaction.	• Complete Consumer Satisfaction Surveys after each weekly seminar.
*Individualized Learning Plan (ILP)	Trainees will work collaboratively with CT LEND Staff and LEND Discipline Coordinators (as relevant) to develop an Individualized Learning Plan (ILP). The ILP is a helpful tool designed to keep trainees on track with the LEND requirements and competencies. As trainees participate in LEND activities and complete	• Use the Individualized Learning Plan (ILP) Template to complete and maintain an Individualized Learning Plan (ILP). At the end of the academic year, submit the completed ILP to HuskyCT.

Requirement	Description and Resources	Trainees will be expected to:
	requirements, they document their activities and the competencies those activities address in their ILP. CT LEND Staff review drafted ILPs with trainees at the end of September. The ILP should be updated on a regular basis throughout the year.	
Portfolio	At the end of the academic year, trainees submit a 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, Public Health module activities and reflections, advocacy/policy activities, and all reflections (practicum, screening, assessment, intervention, family match, advocacy, and events/webinars). Please contact CT LEND faculty/staff if you would like to see examples of portfolios.	• Submit the completed Portfolio to HuskyCT at the end of the academic year.
Weekly Time Logs	Trainees document the time spent on LEND activities each week (by day; Saturday to Friday). This documentation serves as evidence of trainees' accomplishments during the LEND program. For each activity logged, trainees must specify how the activity aligns with one or more LEND and/or MCH Leadership Competencies. For example, time spent on the group research project might be logged as MCH Leadership Competency 1.4 (Describe SDOH, understand health equity, and offer strategies to address health disparities within MCH populations) and LEND Competency 1.6 (Research design and analysis). In the Weekly Time Log, trainees should simply list the competency numbers as provided in the Individualized Learning Plan Template (rather than writing out the entire competency, e.g., MCH 1.4, LEND 1.6). The *Weekly Time Log Sample (Appendix C)* should be used as an example of proper documentation.	• Use the Weekly Time Log Template to complete the Weekly Time Log each week. Submit the completed log to HuskyCT at the end of each week (by 11:59 pm on Thursdays).

Requirement	Description and Resources	Trainees will be expected to:
Weekly Readings	Weekly readings are assigned before each seminar to enhance your understanding of the topics presented. Trainees participate in Reading Groups during weekly seminars to discuss the readings. Reading Groups are typically held between 8:15am and 9:15am during weekly seminars. During the fall semester, trainees write one reflection for each reading and discuss each reading as a group. During the spring semester, trainees write a single synthesized reflection on all readings and participate in a group discussion.	• Read weekly assigned readings. • Use the appropriate Reading Reflection Template(s) (Fall or Spring) to complete Reading Reflections. Submit reflections to HuskyCT by Thursday at 11:59 pm before each seminar. • Participate in reading groups during weekly seminars.
Research Projects	There are two opportunities to conduct research: a group research project in the fall semester and an individual research project in the spring semester. 1. Group Research Project (Fall): Trainees are assigned to work in interdisciplinary groups to complete a short-term research project focused on an area of interest that supports the LEND objectives. 2. Individual Research Project (Spring): With the support of their LEND Discipline Coordinators and LEND staff, trainees complete an individual research project The *Group Research Project Guide (Appendix D)* and *Individual Research Project Guide (Appendix E)* contain additional information about the requirements and deadlines.	• Complete a group research project during the fall semester, including four (4) final products: abstract, presentation, paper, and poster. • Complete an individual research project during the spring semester, including four (4) final products: abstract, presentation, paper, and poster.
Practicum	Trainees participate in two practicum experiences, one during each semester. 1. Fall Practicum: Trainees observe between 10-20 hours of interdisciplinary assessments, and team meetings for infants, children, youth or adults with complex neurodevelopmental and other related disabilities (including ASD) in a variety of settings. Virtual and/or in-	• Attend practicum site visits. • Use the appropriate Practicum Reflection Template (Fall or Spring) to complete Practicum Reflections for each practicum site visit. Submit reflections to HuskyCT within one week of each site visit.

Requirement	Description and Resources	Trainees will be expected to:
	person visits will be offered based upon the practicum site. You may also complete observations at your clinical site. 2. Spring Practicum: Trainees observe and/or participate in 10-20 hours of interdisciplinary interventions and team meetings for infants, children, youth or adults with complex neurodevelopmental and other related disabilities (including ASD). You may also complete observations/participation at your clinical site.	
Screening	Trainees screen five young children for developmental and other delays (including ASD). The purpose is to familiarize trainees with screening instruments. The *Screening Guide (Appendix F)* contains additional information about available screening instruments and specific requirements.	• Use the Screening Report Template to complete a Screening Report after each screening. Submit reports to HuskyCT within one week of each screening.
Assessment Observation	Trainees observe three assessments with an infant/child/youth who is suspected of having ASD. For example, assessments might include the Autism Diagnostic Observation Schedule (ADOS) or the Childhood Autism Rating Scale (CARS).	• Use the Assessment Observation Reflection Template to complete an Assessment Observation Reflection after each assessment observation. Submit reflections to HuskyCT within one week of each observation.
Family Match	Trainees are matched with one family each semester, one with a child with ASD and one with a child with a neurodevelopmental disability. The Family Match Guide (Appendix G) contains additional information about requirements and expectations for Family Match visits.	• Email the CT LEND Family Faculty Laurie Cantwell (ctpolicymaking@gmail.com) within 24 hours of each visit to let her know it occurred. • Use the Family Match Reflection Template to complete a Family Match Reflection after each visit with the family. Submit the reflection within one week of the visit.

Requirement	Description and Resources	Trainees will be expected to:
Emerging Topics	Trainees will work collaboratively to develop an oral presentation and written product on an emerging MCH topic. Topics will be supplied to trainees and will reflect MCH Leadership competencies not covered during the seminar.	• Prepare a PowerPoint presentation to be presented during a CT LEND seminar. Submit the PowerPoint slides to HuskyCT. • Write a short, descriptive paper about the topic, including relevant references. Submit the paper to HuskyCT.
Advocacy	Trainees participate in one advocacy project that culminates with a visit to Connecticut legislators. Trainees participate in groups to identify a systemic need for those with disabilities. The group prepares a presentation for a legislator that outlines the problem and presents a research-based, realistic solution. The *Legislative Advocacy Guide (Appendix H)* contains guidance to help trainees prepare for the Legislative Advocacy Day.	• In groups, prepare the Legislative Advocacy presentation. • Write a summary about your advocacy topic with references and resources • After Legislative Advocacy Day, complete a reflection (Event Reflection Template) about your meeting with legislators and the hearings you attend. Submit the reflection to HuskyCT within one week of the Legislative Advocacy Day.
Online Modules	Trainees complete two online modules to supplement training. 1. Family-Centered Practice: This module (20-30 hours) includes outside readings and completion of performance-based activities and competencies. *2.* Disability in Public Health: This module (20-30 hours) includes readings, external materials, and activities that demonstrate application of knowledge. *LTTs may take one of the Certificate of Interdisciplinary Disability Studies in Public Health courses as a substitute, with permission.* The *Online Module Guide (Appendix I)* contains additional information about online module objectives and deadlines.	• Complete Family-Centered Practice module online via HuskyCT • Complete Disability in Public Health module online via HuskyCT

Additional Activities and 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 submitted to HuskyCT as needed (i.e., when completed throughout the year). If trainees have any questions about which reflection template to complete for an activity, please email the Teaching Assistants.

Webinar Reflections
Throughout the year, trainees may attend webinars that are of interest and align with MCH and LEND competencies. If a trainee identifies an event topic of interest but is unsure whether it aligns with competencies, please email the CT LEND Director, Dr. Mary Beth Bruder (bruder@uchc.edu). After the webinar, the trainee will use the Webinar Reflection Template to complete a *Webinar Reflection* and submit it to HuskyCT within one week of the webinar.

Event Reflection
Throughout the year, trainees may attend workshops or special events that are of interest and align with MCH and LEND competencies. If a trainee identifies an event topic of interest but is unsure whether it aligns with competencies, please email the CT LEND Director, Dr. Mary Beth Bruder (bruder@uchc.edu). After the event, the trainee will use the Event Reflection Template to complete an *Event Reflection* and submit it to HuskyCT within one week of the event.

Make-up Class Reflection
Trainees may have to miss a class because of illness or a personal commitment. Trainees are required to inform the LEND director of their absence as soon as possible. Trainees will be sent a zoom recording of the class they have missed, and they will submit a written reflection using the *Make-up Class Reflection*.

CT LEND Program Expectations

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

Attendance
If you are unable to attend a seminar, please discuss this in advance with CT LEND Director, Dr. Mary Beth Bruder (bruder@uchc.edu). Trainees are responsible for calling or emailing CT LEND Director, Dr. Mary Beth Bruder (bruder@uchc.edu) as soon as possible if they need to miss a CT LEND event for illness or a family emergency.

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

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 when completing LEND requirements is not manageable, uncompleted hours must be made up in future weeks. It is the trainee's responsibility to contact CT LEND faculty/staff to inform them 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 CT LEND 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.

Expectations Regarding Written Work
All written work must follow APA style (see *Resources* section). This includes reading reflections and both research projects. 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.

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 (Al) 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. The university has Al detection software that distinguishes between Al generated content and human generated content.

Practicum Expectations

In addition to the program expectations outlined in the previous section, there are additional expectations specific to each practicum site throughout the year. It is important to note that all CT 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 or caregivers may attend (such as meetings or conferences). Always uphold the standards of confidentiality by using initials in an email when discussing a particular person with disabilities. In addition, initials or a pseudonym MUST be used in all practicum reflections. Never talk about an individual in the presence of others who are not involved with the individual's plan. Maintain strict professional relationships with supervisors, clients, patients, and students always. Trainees should remember that they represent the LEND program, UConn, and their specific discipline's professional conduct standards at all times while at practicum sites. Bring any concerns to the attention of the CT LEND program supervisors as they happen and/or before engaging in the activity in question.

Punctuality
If a trainee will be late or absent for any practicum experience, email CT LEND Practicum Coordinator Ashlee Houle (ahoule@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 request a copy of the employee handbook to become aware of these policies, if available. Additionally, if the practicum site has policies about paperwork required before starting (such as a list of vaccinations, documentation of a flu shot, immunization waivers, etc.), trainees must ensure that all required paperwork is completed and submitted. Please note that 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.

Practicum Guidelines

Before Practicum Starts
At least a week before your first practicum visit, send an email to the supervisor to introduce yourself and thank them for allowing you to participate. This email is a good way to iron out any first-day logistics as well; for example, where and when to arrive. 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 CT 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. Trainees should revisit their ILP 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.

<u>Examples of tasks that would be appropriate to assign a LEND Trainee include:</u>

- 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 or updating a resource guide for agency and staff to use)
- 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

<u>Tasks that should not be assigned include:</u>

- Clerical tasks, such as passing out papers or making copies
- 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 one-on-one for a student (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 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 close out the experience. A personal thank-you note for the supervisor and any colleagues or staff the trainee worked closely with is strongly recommended.

Family Match

The CT LEND Family Faculty, Laurie Cantwell, will match each LTT with a family and/or youth advocate. The requirements of the Family Match include a minimum of three visits with the assigned family per semester: home, school/educational, community. Visits may be in person or virtual, depending on family preference. Trainees will record each of their experiences with assigned families in a reflection.

The purpose of conversations with the Family Match is to 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 trainees 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. The family member will report back to the Family Faculty on your application and use of Family Centered Practice during these conversations and visits. Please see the *Family Match Visit Guide (Appendix G)* for more information about family match visits, including optional questions to ask during a home visit with a family.

Expectations Regarding Professional Conduct during Family Match Visits

- It is the trainee's responsibility to initiate and maintain communication with family matches. As soon as a match has been made, trainees should reach out and offer to exchange contact information. If you are having trouble connecting with the family, please contact CT LEND Family Faculty Laurie Cantwell (ctpolicymaking@gmail.com) as soon as possible so she can facilitate the connection or look into alternatives.
- 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.
- 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 necessary (with plenty of notice), be flexible if the family needs to reschedule, and thank the family.
- 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 above for further information about confidentiality-related expectations.

CT LEND Faculty and Staff

An important part of CT LEND 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 CT LEND faculty and staff are available to support trainees and address any questions, comments, or concerns.

Mary Beth Bruder, PhD *bruder@uchc.edu* CT LEND Director	
Chris Blake *chris-r-blake@hotmail.com* CT LEND Self-Advocate Faculty	
Laurie Cantwell *ctpolicymaking@gmail.com* CT LEND Family Faculty	
Paula DeMichiel *demichiel@uchc.edu* CT LEND Administrative Program Coordinator	
Ashlee Houle *ahoule@uchc.edu* CT LEND Practicum Coordinator	
Vaishnavi Shahane *shahane@uchc.edu* CT LEND Research Associate	

CT LEND Teaching Assistants

Lauren Bauer Audiology *lauren.t.bauer@uconn.edu*	
Zane Carey Audiology *zane.carey@uconn.edu*	
Max Grossman School Psychology *max.grossman@uconn.edu*	

CT LEND Discipline Coordinators

Anton Alerte, MD Pediatrics aalerte@uchc.edu		**Sara Renzulli, PhD** **Counselor Education and Counseling Psychology** **sara.renzulli@uconn.edu**	
Melissa Bray, PhD School Psychology melissa.bray@uconn.edu		Brandi Simonsen, PhD Special Education brandi.simonsen@uconn.edu	

Kathleen Cienkowski, PhD Audiology cienkowski@uconn.edu		Marianne Snyder, PhD Nursing marianne.snyder@uconn.edu	
Inge-Marie Eigsti, PhD Clinical Psychology inge-marie.eigsti@uconn.edu		Tammie Spaulding, PhD Speech, Language, and Hearing Sciences tammie.spaulding@uconn.edu	
Maria Gyure, MS, CGC Genetic Counseling maria.gyure@uconn.edu		Cristina Wilson, PhD, MSW Social Work cristina.wilson@uconn.edu	
Tara Lutz, PhD, MCHES® Public Health lutz@uchc.edu			

Resources

ADA National Network
http://adata.org/

APA Style Formatting
https://owl.purdue.edu/owl/research_and_citation/apa_style/apa_formatting_and_style_guide/index.html

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

AUCD Emerging Leaders Community
https://www.aucd.org/emergingleaders

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

Connecticut State Department of Education, Bureau of Special Education
https://portal.ct.gov/sde/special-education/bureau-of-special-education

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

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

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

Maternal and Child Health Knowledge Base & Library Collection, Georgetown University
http://www.ncemch.org/knowledge-base.php

Maternal and Child Health Workforce Development
https://mchb.hrsa.gov/programs-impact/focus-areas/mch-workforce-development

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/

Office of Special Education Programs (OSEP)
https://www2.ed.gov/about/offices/list/osers/osep/index.html

Person-First vs. Identity-First Language
https://www.nih.gov/about-nih/what-we-do/science-health-public-trust/perspectives/writing-respectfully-person-first-identity-first-language

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

University of Connecticut Center for Excellence in Developmental Disabilities (UCEDD)
http://uconnucedd.org/

University of Connecticut Center for Students with Disabilities
https://csd.uconn.edu/

University of Connecticut LEND Program
http://ctlend.uconnucedd.org/

Appendix

A. Pediatric Audiology Trainee 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): LTTs 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 LTTs 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.

B. CT LEND Seminar Objectives Overview

By participating in weekly seminars, trainees 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.

C. Weekly Time Log Sample

Weekly Hours Log

Name: Jane Doe

Date (week of): 2/14 – 2/20/2025

Discipline: Audiology

Total hours for week: **20.5**

Date	Hours	Activity	CT LEND and/or MCH Leadership Competency
F 2/14	8	LEND Seminar 4 (spring) • Speaker (presentation title) • Speaker name (presentation title)	MCH 6.5 MCH 12.1 MCH 12.2 LEND 1.6 LEND 6.9
Sa 2/15	1	Reading assignment for Seminar 5: Brown, I., Wehmeyer, M. L., Webb, K. W., & Seabrooks-Blackmore, J. (2017). The transition from school to adult life. In M. L. Wehmeyer, I. Brown, M. Percy, K. A. Shogren & W. L. A. Fung (Eds.), *A comprehensive guide to intellectual and developmental disabilities* (2nd ed., pp. 541-555). Baltimore, MD: Brookes.	MCH 6.6
Sa 2/15	2	Reading assignment for Seminar 5: Flegenheimer, C., & Scherf, K. S. (2022). College as a developmental context for emerging adulthood in autism: A systematic review of what we know and where we go from here. *Journal of Autism and Developmental Disorders,* 52(5), 2075-2097. https://doi.org/10.1007/s10803-021-05088-4	MCH 4.6
Su 2/16	1	Reading assignment for Seminar 5: Luecking, R. G., & D'Agati, A. D. (2017). Work and employment for people with intellectual and developmental disabilities. In M. L. Wehmeyer, I. Brown, M. Percy, K. A. Shogren & W. L. A. Fung (Eds.), *A comprehensive guide to intellectual and developmental disabilities* (2nd ed., pp. 557-568). Baltimore, MD: Brookes	LEND 1.1

Date	Hours	Activity	CT LEND and/or MCH Leadership Competency
Su 2/16	1.5	Reading assignment for Seminar 5: Papay, C., Grigal, M., & Migliore, A. (2022). Matching in-school predictors of post-school success to variables in the National Longitudinal Transition Study 2012. *Think College Report*. Boston, MA: University of Massachusetts Boston, Institute for Community Inclusion. https://thinkcollege.net/sites/default/files/files/resources/TC_reports_MTC_Matching%20Predictors%20Post%20School%20Outcomes_2022_R.pdf	LEND 4.6
Su 2/16	2	Reading assignment for Seminar 5: Sanderson, K. A., & Goldman, S. E. (2020). A systematic review and meta-analysis of interventions used to increase adolescent IEP meeting participation. *Career Development and Transition for Exceptional Individuals, 43*(3), 157-168. https://doi.org/10.1177/2165143420922552	LEND 4.6 LEND 5.6
M 2/17	2	Individual research project • Developing survey • Filling out IRB	LEND 1.6
M 2/17	1.5	Hours log, updating ILP	N/A
M 2/17	1.5	Reading synthesis for Seminar 5	(As above) LEND 1.1 LEND 4.6 LEND 5.6 LEND 6.6

D. Group Research Project Guide

Summary

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 CT 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 a comprehensive literature review that summarizes the research on a given topic.

Requirements

Task	Description
Abstract	Your group will prepare an abstract of your research project of no more than 250 words. Final versions of the abstracts will be posted on the CT LEND website.
Paper	As a group, you will write an 8- to 10-page (double-spaced) paper that summarizes your group research project. It will include an introduction, a description of your project methods, a summary of the results, and discussion of your project's implications. This paper should be prepared in APA (7th edition) format.
Presentation	As a group, you will create and deliver a PowerPoint presentation of your group research projects that covers the background, rationale, and methods for completing the project. The presentation should be 15 minutes, including time for questions.

Submission Instructions

Rought drafts of all products should be submitted via email to the CT LEND Director Mary Beth Bruder (bruder@uchc.edu) for review and feedback.

Final drafts of all products should be submitted to HuskyCT.

E. Individual Research Project Guide

Summary

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-reviewed journals 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. These include (a) family engagement; (b) medical home; (c) early detection/newborn screening; (d) medical transition; (e) ASD; or (f) another MCH Emerging Topic Area approved by CT LEND Director Mary Beth Bruder (bruder@uchc.edu).
3. Involve systematic data collection. Data must be collected systematically 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.

Requirements

Task	Description
Topic and Research Question	You will propose a topic and aligned research question for your individual research project. Consider the requirements listed above, your interests, and feasibility when selecting a research question. Please see the *Standards and Criteria for Conducting Research and Evaluation* (Bruder, 2004) on HuskyCT for additional guidance in developing research questions and choosing appropriate designs.
Research Proposal	You will write a brief (1-2 page; double-spaced) research proposal that contains the following components: 1. Project Title 2. Background (for this research proposal, this section can be a brief literature review with a few pivotal, recent key references) a. Purpose b. Research Question

Task	Description
	3. Methods: describe how you will complete this project (e.g., literature review, data collection) 4. Timeline: provide a detailed projected timeline of your process and deadlines 5. References
IRB Protocol (if required)	If your individual research project involves human subjects, you will work with CT LEND Faculty to write and submit an IRB protocol. Data collection cannot begin until the IRB protocol is approved by the UConn Health IRB.
Abstract	You will prepare an abstract of your individual research project of no more than 250 words. This should include a brief introduction, purpose statement, methods, results, and conclusion. Final versions of the abstracts will be posted on the LEND website.
Paper	You will write an 8- to 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 sections: Introduction, Methods, Results, Discussion. This paper should be prepared in APA format.
Presentation	You will create and deliver a PowerPoint 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.
Poster	You will create a poster of your research findings using the template provided. The posters may be displayed in the CT LEND classroom.

Note. You must receive permission from your mentor and the CT LEND Director before proceeding onto the next step. Additional rounds of edits may be required before proceeding to the next step.

Additional (Optional) Products

Additional products (such as peer-reviewed manuscripts and/or conference 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 should reference the LEND grant in their acknowledgments.

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.

Submission Instructions
Rought drafts of all products should be submitted via email to the CT LEND Director Mary Beth Bruder (bruder@uchc.edu) for review and feedback.

Final drafts of all products should be submitted to HuskyCT.

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/paqes/research-course-and-traininq-proqram
2. http://depts.washinqton.edu/lend/trainees/proiect.html

F. Screening Guide

Screening Instruments

In the Weekly Seminars, we will discuss several screening instruments, including:

- The Social Responsiveness Scale-Second Edition
- The Ages and Stages Questionnaires
- Modified Checklist for ASD in Toddlers-Revised with Follow-Up (M-CHAT-R/F).
  Note: If you use this instrument, you must ask at least three of the follow-up interview questions regardless of the child's performance on the rating scale.

You can use any of the above instruments or any of these tools identified by the American Academy of Pediatrics.

Requirements

You will screen five different children, at least one of whom must be under age 3 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.

G. Family Match Guide

Summary
The purpose of the Family Match visits should be to talk to and get to know the family. The following questions were created to help you start the conversation, and answers to them should provide you with enough information to reflect and write about your visits. 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 reflection.

Questions

1. Tell me about your child. This could include background information, important information, strengths, etc.
2. What are their strengths?
3. Can you describe what a typical day looks like for your family?
4. What does your child 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 child use at home or in the community? How did you go about getting those?
9. What other supports does your child need at home or in the community?

Reflection
After each visit, you will use the Family Match Reflection Template to prepare a written reflection describing the details of the visit. The reflection 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

H. Legislative Advocacy Guide

Planning
Meet with your group to plan your meeting. Gather background information, research or data, and identify your “ask” (what do you want the legislator to do?).

Meeting Structure
Everyone must have a role in the group meeting. Meetings are 15 minutes.

1. One person opens the meeting. Begin by thanking the legislator for meeting with you. 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.
5. One person closes with a thank you. Restate your 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.

I. Online Module Guide

Family Centered Practice

Summary

The purpose of this module is to illustrate the centrality of the family in the life of infants, children, and youth with disabilities, and subsequently, intervention. This module relies on outside readings, online discussions, and completion of performance-based activities and competencies which are embedded into the module.

Objectives

By the end of this module, trainees 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.

Submission Instructions and Deadline

All work should be submitted online via the *LEND Family Centered Practice* module in HuskyCT.

Disability in Public Health

Summary
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 embedded sub-module addresses one of the *Including People with Disabilities: Public Health Workforce Competencies* and associated objectives.

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.

Objectives
By the end of this module, trainees will be able to:

1. Discuss disability models across the lifespan.
2. Discuss methods used to assess health issues for people with disabilities.
3. Identify how public health programs impact health outcomes for people with disabilities.
4. 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.

Submission Instructions and Deadline
All work should be submitted online via the *CT LEND Public Health* module in HuskyCT.

J. Templates

1. Individualized Learning Plan

Name:

Date:

Discipline:

CT LEND Trainee Requirements

- Maternal and Child Health (MCH) Leadership Competencies
- CT LEND Competencies
- Online Modules
    - Family Centered Practice
    - Disability in Public Health
- Research
    - Group Research Project (Fall)
    - Individual Research Project (Spring)
- Clinical
    - Practicum (Fall)
    - Practicum (Spring)
    - Screening (5)
    - Assessments (3)
    - Intervention (1)
    - Family Match (Fall)
    - Family Match (Spring)
- Advocacy

Instructions

MCH & CT LEND Competencies
You will be required to (a) describe the specific activity (or activities) in which you participated to demonstrate each competency (e.g., classwork, practicum, competency assignment, webinar, meeting) and (b) indicate how you have documented the completion of each competency (e.g., submitted reflection, signed attendance, presentations). If you are demonstrating a competency solely through seminar participation, please list specific seminar(s) in which the competency was addressed.

Online Modules
You will complete two online modules and document your completion of these activities (e.g., submitted reflections, activities, readings).

1. Family Centered Practice
2. Disability in Public Health

Research
You will complete two research projects: a group project (fall) and an individual project (spring).

1. Group project
    a. Presentation
    b. Final paper
    c. Poster
2. Individual project
    a. Presentation
    b. Final paper
    c. Poster

Fall Practicum
Observe interdisciplinary assessments (across the age span) for 10-20 hours with infants, children, youth and adults with complex neurodevelopmental and other related disabilities including ASD.

Spring Practicum
Participate in interdisciplinary practice models (across the age span) for up to 20 hours with infants, children, youth and adults with complex neurodevelopmental and other related disabilities including ASD.

Screening
Screen five young children aged 6 months to 5 years for ASD.

Assessment
Observe three (3) assessments with an infant/child/youth who is suspected of having ASD.

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

Family Match Visits
Follow a family with an infant/child/youth with ASD. Each semester, conduct one initial visit, one home visit, one school/educational visit, and one community visit.

Advocacy
Participate in an advocacy project culminating in a visit to legislators.

MCH Leadership Competencies

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	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 fairness in health outcomes, 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 direct experience and family and community-led			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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 fair and just access to health resources and responsiveness to varied community perspectives guide program planning and service delivery.			
2. Self-Reflection			
2.1. Recognize how one's personal values, beliefs, communication, background, and experiences influence one's leadership practice.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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 varied perspectives and complementary styles.			
3. Ethics			
3.1. Work to understand the individual's and community's belief systems and values to ensure the delivery of 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.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
3.3 Identify the ethical implications of disparities in health access and outcomes and implicit bias affecting MCH populations.			
3.4 Act as catalysts to discuss and address ethical dilemmas and issues that affect MCH population groups.			
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 individuals' firsthand experiences 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 a fair and just approach to critically analyze research, programs, and policies.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
4.4. Present and discuss a rationale for policies and programs that is grounded in evidence and addresses the needs of audiences with varied backgrounds and perspectives.			
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 varied backgrounds.			
5.2. Communicate clearly and effectively using plain language and other accessibility principles to express information about issues that affect MCH population groups.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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.			
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, background, power, socioeconomic status, and disparities influence 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. Differences, Fairness, Inclusion, and Accessibility			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
7.1. Conduct personal and/or organizational self-assessments.			
7.2. Assess and elevate the strengths of individuals and communities based on sensitivity and respect for their backgrounds and personal experiences and respond appropriately.			
7.3. Incorporate an understanding and appreciation of differences in experiences and perspectives into professional behaviors and attitudes.			
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 accessible public health and health service delivery systems.			
7.6. Integrate multiple perspectives into programs, research, scholarship, communications, and policies.			
7.7. Use data-driven tools and data disaggregation to guide efforts addressing health disparities, health, and use plain language to present data.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
8. Honoring Personal Experiences			
8.1. Solicit and implement input from individuals with firsthand 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 individuals with firsthand 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			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
community-related issues affecting individuals with direct experience, ensuring approaches reflect respect for a variety of backgrounds and circumstances.			
8.5. Celebrate the unique qualities of individual and families and provide an open and accepting environment.			
8.6. Recognize that organizational and system-level policies and practices may impact individuals with firsthand experience as well as acknowledge the role these individuals can play in influencing policy and practice.			
8.7. Collaborate with organizations that are led by individuals with firsthand experience to build and deepen involvement across all MCH programs.			
8.8. Use feedback from individuals with firsthand experience, and community members, obtained through focus groups, surveys,			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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 individuals with direct experience.			
8.9. Ensure that perspectives from individuals with firsthand 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 individuals with firsthand experience and professionals into health professions and continuing education curricula and assess the			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
effect of this training on professional skills, programs, and policies.			
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 promote fair and inclusive participation and ensure accessibility for all.			
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.			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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 representation in leadership by facilitating fair, respectful, and accessible opportunities for teaching, coaching, and mentoring.			
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 individuals with varied 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			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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.			
11. Systems Approach			
11.1. Ensure the mission, vision, and goals of an organization relate to the broader system in which it operates to advance fairness, representation, inclusion, and accessibility, facilitating			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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,			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
implementing, delegating, sharing responsibility, staffing, and evaluating.			
11.8. Use implementation science to promote use of evidence-informed practices.			
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 fair 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,			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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.			
12.5. Analyze the potential impact of policies using a fairness perspective on MCH population groups.			
12.6. Formulate strategies to balance the interests of partners with varied backgrounds 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			

MCH Leadership Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
decision makers, foundations, or the general public.			

CT LEND Competencies

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
1. MCH Foundations			
1.1. Life course perspective			
1.2. Family centered practice			
1.3. Responsiveness to unique needs			
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			

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	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			
3. Interdisciplinary Practices			

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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			
4.3 Early intervention			

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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			
5.6 Self determination			

CT LEND Competency	What <u>specific</u> activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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			
6.10 Leading with and through others			

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
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			

CT LEND Competency	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
7.11 Lead contamination			

Online Modules

Online Module	Documentation of Completion	Date Module Completed
Family Centered Practice		
Disability in Public Health		

Research
Group Research Project (Fall)

Project title:

Group Research Project	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
1. Research Preparation and Question			
2. Research Design			
3. Data Collection and Analysis			
4. Research Discussion and Dissemination			

Individual Research Project (Spring)

Project title:

Individual Research Project	What specific activities will you do to demonstrate this?	Documentation of Completion	Date Completed
1. Research Preparation and Question			
2. Research Design			
3. Data Collection and Analysis			
4. Research Discussion and Dissemination			

Clinical
Fall Practicum

Fall Practicum Site/Activity	Date and Time	Date Reflection Submitted

Spring Practicum

Spring Practicum Site/Activity	Date and Time	Date Reflection Submitted

Screening

Screening	Setting	Date and Time	Date Reflection Submitted

Assessment

Assessment	Setting	Date and Time	Date Reflection Submitted

Intervention

Intervention	Setting	Date and Time	Date Reflection Submitted

Family Match (Fall)

Family Match Visit	Setting	Date and Time	Date Reflection Submitted
Initial Meeting			
Home Visit			
School/Educational Visit			
Community Visit			

Family Match (Spring)

Family Match Visit	Setting	Date and Time	Date Reflection Submitted
Initial Meeting			
Home Visit			
School/Educational Visit			
Community Visit			

Advocacy

Project Title	Description	Date Completed	Date Reflection Submitted

2. Weekly Time Log

Name:

Date (week of):

Discipline:

Total hours for week:

Date	Hours	Activity	CT LEND and/or MCH Leadership Competency

3. Fall Reading Reflection

Name:

Date:

Discipline:

Full reference:

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

1. What do you like about the reading, positive aspects?

2. Was there anything you disliked about the reading?

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

4. What is one thing you learned that you will apply to your practice and will do differently as a result of this reading?

4. Spring Reading Reflection Synthesis

Name:

Date:

Discipline:

Readings:

Please complete one synthesis of the readings. The synthesis should be at least one (1) page and no more than two (2) pages. It must also address the following in a single, cohesive synthesis (i.e., do not list each question separately and respond to it).

- Identify similarities and differences across the readings.
- Synthesize the main points of the readings into one summary that summaries all the readings.
- Reflect upon how you will use this information to inform/improve your current or future career/practice. How can you put your learning into practice?
- As a result of completing these readings, what would you like to learn more about?

5. Practicum Reflection (Fall)

Name:

Discipline:

Observation Date:

Observation Site:

Total hours for observation:

Reflection Date:

Briefly respond to the following questions based on the assessment observation and meetings.

1. What type of team meeting did you observe?

2. Who was in the meeting and what were the roles of each person?

3. Was there an agenda for the meeting and what was it? If there was no formal agenda, what was the purpose of the meeting? (Provide context).

4. Was the projected outcome of the meeting described at the beginning of the meeting?

5. a) Was a parent/caregiver in attendance? b) If so, were they welcomed and introduced? c) Was their input requested and welcomed throughout the meeting?

6. a) Was there open communication among team members throughout the meeting? Describe communication strategies you observed?

7. Were the strengths of the student described and discussed?

8. Were the needs of the student described in a negative way?

9. Did the group develop an integrated plan (across disciplines)?

10. If a parent/caregiver was involved, were they satisfied with the outcome? How did you know?

11. Were the needs of the student described in a negative way?

12. How would you describe the team process?

    a. What were the facilitators to a positive team process?

    b. What were the barriers to a positive team process?

13. Which MCH Leadership and LEND program competencies were specifically addressed in your observation? (List all that apply)

14. What did you learn from this experience and how will it impact your work in the future?

6. Practicum Reflection (Spring)

Name:

Discipline:

Observation Date/Week:

Observation Site:

Total hours for observation:

Reflection Date:

After each practicum observation, please respond to the following questions using specific examples of what you saw/did. Include references to LEND content, such as readings, speakers, and other LEND activities (e.g., family match) to demonstrate how you are connecting what you are learning in LEND to what you are observing in practicum.

1. Describe the meeting/activity/lesson/intervention you observed or participated in (if more than one, please describe them.

2. How many and what types of professionals were involved in each meeting/activity/lesson/intervention?

3. Was the meeting/activity/lesson/intervention planned by a group of professionals (who and how many?) or by a teacher/interventionist/therapist? You may need to ask the professional who is leading the meeting/activity/lesson/intervention who is leading either prior to or after.

4. What domains did the meeting/activity/lesson/intervention address (e.g., life skills, reading, math, language, motor, etc.)?

5. Was there data being taken on student performance during the meeting/activity/lesson/intervention? Describe.

6. How did this observation confirm something you believed about interdisciplinary practices?

7. How did this observation change something you believed about interdisciplinary practices?

8. How did this observation confirm something you believed about culturally sensitive or culturally competent practices?

9. If the meeting/activity/lesson/intervention occurred with the student's family present, did the lead professional/teacher/interventionist used family centered practice? Describe.

10. Reflect on whether the child you observed on one or more observations for your practicum (child with neurodevelopmental disabilities) has access to non-disabled peers in the setting. If this was not an inclusive environment, how could what you observed be accomplished in an inclusive setting? Explain why or why not.

11. If you were leading the meeting/activity/lesson/intervention, is there anything you would do differently and why?

12. How did your work help you improve your competence? In which area(s), (MCH Leadership and LEND program competencies) and why?

7. Screening Report Reflection

Name:

Discipline:

Screening date:

Screening site:

Screening instrument:

Reflection date:

Please respond to the following questions.

1. **Brief developmental history:** Provide a brief (1 paragraph) description of the child's developmental history, if possible.

2. **Screening instrument**: Describe the screening instrument you used with the child. Include the psychometric properties of the instrument.

3. **Results of the screening**: What were the results of the screening? Include the score(s) and whether the child met the cutoff.

4. **Recommendations:** Provide recommendations based on the results (e.g., refer for a full diagnostic evaluation).

8. Assessment Observation Reflection

Name:

Discipline:

Assessment date:

Assessment site:

Reflection date:

After observing an ASD assessment, please respond to the following questions.

1. What type of assessment did you observe?

2. Describe the assessment process you observed (e.g., what were the tools used? Observations? Was a parent report included? Etc.)

3. What professionals were involved in the assessment process? What were their disciplines and roles?

4. Where did the assessment occur? Describe the setting.

5. What are the psychometric properties (i.e., validity, reliability) of the assessment tools that were used?

6. What procedures were used to summarize the results?

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 the assessment?

9. Intervention Reflection (Not implemented Spring 2026)

Name:

Discipline:

Intervention date:

Intervention provided:

Reflection date:

Did the recipient of the intervention have ASD?

☐ Yes

☐ No

After implementing an intervention, please respond to 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? What ages?

4. What data did you use as a baseline for this intervention? How did data inform this intervention?

5. What dosage of the intervention was provided (i.e., what amount of the 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 (e.g., home, community?)? What behavior is being addressed?

7. How did you plan for position 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 differently in the future?

10. How does this intervention experience inform your practice?

10. Family Match Reflection: Visit 1 (Initial Meeting)

Name:

Discipline:

Visit date:

Total hours for visit:

Reflection date:

Expectations regarding confidentiality
Family information must be kept confidential. Do not include any identifiable information such as names or towns in your submitted work (change names or use initials). If you use pseudonyms (i.e., different names), that must be clearly stated.

Briefly respond to the following questions based on the Family Match Visit 1: Initial Meeting.

1. Describe the family. Who is in the family as they describe their family (e.g., extended, informal members, etc.)?

2. Describe the family's strengths.

3. Describe the challenges shared by the family.

4. Describe the child/youth/adult with disabilities. What are their strengths and needs?

5. What accommodations does the family use to support the child/youth/adult with disabilities to participate in family activities?

6. Describe a typical day for the child/youth/adult.

11. Family Match Reflection: Visit (After Initial Meeting)

Name:

Discipline:

Visit date:

Total hours for visit:

Reflection date:

Expectations regarding confidentiality
Family information must be kept confidential. Do not include any identifiable information such as names or towns in your submitted work (change names or use initials). If you use pseudonyms (i.e., different names), that must be clearly stated.

Briefly respond to the following questions based on the Family Match Visit 2+.

1. Where did you meet and observe the family and child/youth/adult with disabilities? Describe the setting, purpose of visit/activity (e.g., home, school/education, community, etc.), and how the family arrived at the visit location (What type(s) of transportation were needed? Etc.)

2. How was the child/youth/adult with disabilities included in the activity? What accommodations does the family use to support the child/youth/adult with disabilities to participate in this setting?

3. Describe any interactions and/or play between the child/youth/adult with disabilities and typical peers.

12. Event/Webinar Reflection

Name:

Discipline:

Webinar Date:

Webinar Title:

Webinar Presenter(s):

Reflection Date:

Briefly respond to the following questions based on the event.

1. Why were you interested in this webinar?

2. Which MCH Leadership and LEND program competencies were specifically addressed? Explain.

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

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

13. Make-up Class Reflection

Name:

Date:

Discipline:

Date & Week of Missed Seminar:

You will be sent a link to Seminar recording. You are to watch the recording in full. Then reflect on the following (in at least 2 pages double-spaced):

- What did you learn from the speakers?
- How will you apply what you learned to inform/improve your current or future career/practice? How can you put your learning to practice?
- Which MCH/LEND competencies were addressed?