## Introduction to the LEND Program Quality Improvement (LPQI) Network

May 20, 2022



ON AUTISM AND DEVELOPMENTAL DISABILITIES



- Ensure your name is displayed correctly in the participant list. You may also include program name and state and preferred pronouns.
  - Example: Jackie Czyzia, AUCD, she/her
  - Hover over your name in the "Participants" box and select "More" → "Rename"
- Remain muted unless speaking
- State your name prior to speaking
- Captioning is available
- Use chat box to introduce yourself!



#### Learning Objectives



Recognize the value and benefit of a national QI approach to evaluate the impact of interdisciplinary training.



Discuss common measures used to evaluate LEND training.



Learn how participating LEND programs are using LPQI to inform their program.

# **Quick Poll**

# What is LPQI?

#### Jeff Brosco Director, Mailman Center LEND



- Helps individual LEND training programs improve the <u>quality of LEND training</u> in core competencies (family-professional partnership, interdisciplinary teams, advocacy/policy) by:
  - 1) creating standardized measurement tools
  - 2) developing a voluntary, inter-institutional database
  - 3) providing program-level feedback to programs that choose to participate
  - identifying programs that demonstrate changes consistent with best practices



#### **LPQI Network**

- Web-based dashboard that provides data on your LEND program compared to national benchmarks
- Linked to NIRS (minimal data entry)
- Monthly technical assistance calls
- Suite of online tools/FAQs/etc.
  - Tutorials on how to implement, use dashboard, etc.
  - Trainee self-report measures
  - Faculty observation measures
  - Training materials for faculty observation measure

https://www.aucd.org/lpqi



#### Participating LEND Programs (32) use two common tools:

| Trainee Self-Report<br>CCM (Core Competency Measure)    | Faculty Observation<br>I-FOR (Interdisciplinary/Family-Centered<br>Care Observation Rubric) |  |  |  |
|---|---|--|--|--|
| administered at baseline and completion of program year | administered 1/3 of the way through<br>program year and at completion of<br>program year    |  |  |  |

- LPQI dashboard automatically analyzes data from participating LEND programs to determine change in baseline for each competency across both measures.
- Programs have access to reports on their own performance & the ability to compare outcomes with aggregate national data.



#### CCM Example: Interdisciplinary / Interprofessional Teaming Building

| Ac  | oal II<br>hievement of the knowledge, skills & attitudes needed to support an<br>erdisciplinary team process   |                    |                    |                |                |
|-----|--|--------------------|--------------------|----------------|----------------|
| Ple | ease rate how much you agree with each statement.  | Disagree           | Somewhat Agree     | Agree          | Strongly Agree |
| a)  | I have knowledge of the different characteristics of health care professions<br>(e.g., developmental pediatrics, audiology, physical therapy, occupational<br>therapy, speech-language pathology, psychology, social work, nursing,<br>health care administration, dentistry), including assessment tools and<br>methods, developmental domains, and intervention strategies commonly<br>addressed by the respective disciplines | 1                  | 2                  | 3              | 4              |
| )   | I am able to identify complementary areas of expertise, as well as<br>overlapping areas of expertise among the respective pediatric disciplines.   | 1                  | 2                  | 3              | 4              |
| :)  | I understand ways in which to foster strong collaborations with health care professionals from different disciplines   | I                  | 2                  | 3              | 4              |
| I)  | If given a case study of a child with developmental disability, I am able to identify which disciplines are most essential to an accurate diagnosis and treatment plan   | 1                  | 2                  | 3              | 4              |
| :)  | I am able to support the significant role parents and patients play as<br>members of the interdisciplinary team  | 1                  | 2                  | 3              | 4              |
|     | w important is it for you to have knowledge, skills, & attitudes to support an<br>erdisciplinary team process  | Not Very Important | Somewhat Important | Important<br>3 | Very Important |



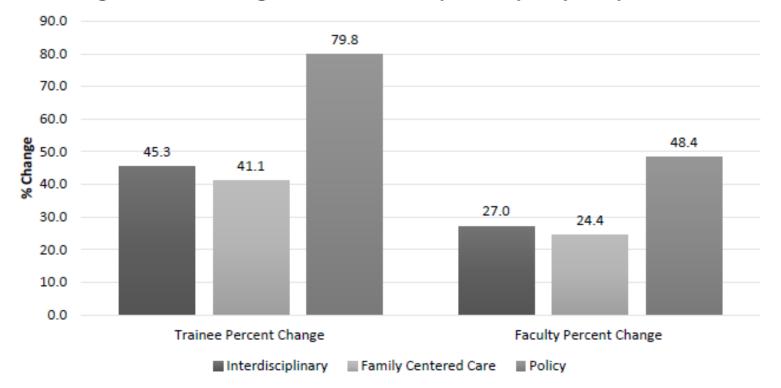
#### I-FOR Example: Interdisciplinary / Interprofessional Teaming Building

|   | I - FOR: Interdisciplinary / Interprofessional Team Building                                |     |   |        |   |  |   |             |  |  |  |
|---|---|-----|---|--------|---|--|---|-------------|--|--|--|
|   | 1   | 1.5 | 2   | 2<br>5 | 3   |  | 4   |             |  |  |  |
| A | Does not yet understand<br>other disciplines and their<br>significance                      |     | Beginning to understand general<br>roles, responsibilities, and scope of<br>practice of other disciplines   |        | Identifies and assembles team members<br>with knowledge and skills appropriate to a<br>given task (e.g. clinical, research, and policy<br>challenges)   |  | Uses knowledge of competencies and roles for<br>disciplines other than one's own to improve<br>teaching, research, policy, and systems of care                                  | N<br>/<br>A |  |  |  |
|   |   |     |   |        |   |  |   |             |  |  |  |
| в | Does not yet participate in<br>interdisciplinary activities                                 |     | Beginning to participate in<br>interdisciplinary activities   |        | Participates actively in interdisciplinary<br>activities; excellent team player   |  | Serves as a role model in interdisciplinary<br>work; shares leadership based on appropriate<br>use of team member strengths   | N<br>/<br>A |  |  |  |
|   |   |     |   |        |   |  |   |             |  |  |  |
| с | Does not yet recognize the<br>need to use terminology<br>accessible to other<br>disciplines |     | Beginning to understand the value of<br>and sometimes employ terminology<br>accessible to other disciplines   |        | Adjusts terminology to meet the needs of team members   |  | Understands other disciplines well enough to<br>"translate" among them  | N<br>/<br>A |  |  |  |
|   |   |     |   |        |   |  |   |             |  |  |  |
| D | Does not yet recognize team<br>dynamics nor resolve<br>conflicts                            |     | Beginning to recognize team<br>dynamics; listens well but does not<br>routinely work to improve team<br>function  |        | Builds trust and respect; fosters collaboration and cooperation   |  | Articulates shared outcomes to promote team<br>synergy; identifies and redirects forces that<br>negatively influence team dynamics  | N<br>/<br>A |  |  |  |
|   |   |     |   |        |   |  |   |             |  |  |  |
| E | Does not yet recognize that<br>disciplines differ in approach                               |     | Beginning to recognize that<br>disciplines differ in approach; seeks<br>answers only from within their own<br>discipline, even when there are<br>disputes |        | Recognizes different disciplinary paradigms;<br>appeals to scientific evidence to resolve<br>disputes   |  | Recognizes philosophical differences among<br>disciplines; contributes to research to resolve<br>disputes   | N<br>/<br>A |  |  |  |
|   |   |     |   |        |   |  |   |             |  |  |  |
| F | Does not yet seek input from<br>other disciplines aside from<br>their own                   |     | Beginning to use the input of other<br>disciplines, but is unlikely to seek out<br>those individuals when confronted<br>with ambiguous situations         |        | Actively seeks out and uses input from<br>people with diverse perspectives to make<br>decisions; develops prioritized, coordinated<br>plans that focus on the task at hand (not just<br>their own disciplinary needs) |  | Adopts tools, techniques and methods of other<br>disciplines to address challenges and meet<br>needs; submerges disciplinary identity to<br>address organizational/system needs | N<br>/<br>A |  |  |  |





#### Figure 1: Percent Change in Trainee and Faculty Scores by Competency Domain



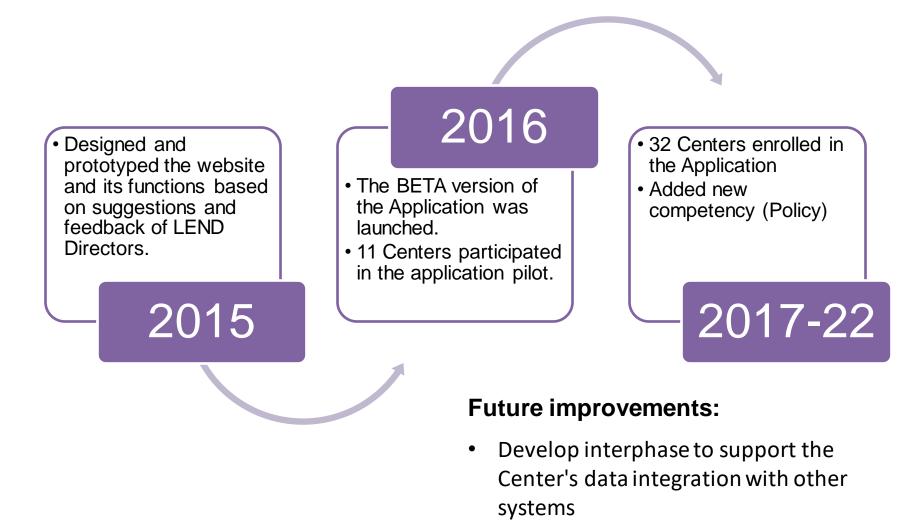
ITAC - Interdisciplinary Technical Assistance Center on Autism and Developmental Disabilities | aucd.org/itac

#### LPQI History & Dashboard Orientation

Oksana Klimova Director of Web Services, AUCD



#### LPQI Application Development Timeline



Introduction of new measures

#### Insights from Participating Programs

Jen Smith Director, Cincinnati LEND

Toni Whitaker Director, UTHSC LEND

Kristie Ford Training Coordinator, UAB LEND

## Why Participate in LPQI?



#### **#1 Improve LEND Training**

# Allows programs to measure outcomes compared to national benchmarks

(Raises bar for entire network!)



#### **#2 Faculty Development**

# I-FOR helps all faculty better understand the core concepts/goals of LEND



#### **#3 Trainee Expectations**

# Sharing I-FOR with trainees makes it clear what they are supposed to learn



#### **#4 Are Our Assessment Tools Working?**

Are we sure that trainees have achieved LEND core competencies?

- Family-professional partnerships
- Interdisc/Interprof Teaming
- Policy/Leadership



#### **#5 Are Our LEND Activities OK?**

Are we sure that our clinics/research/policy efforts are consistent with LEND core concepts?

- Family-professional partnerships
- Interdisc/Interprof Teaming
- Policy/Leadership



#### **#6 Best of All**

# Monthly LPQI meetings are FUN! (and short)

(Second Tuesdays of each Month at 11 AM ET)

## **Questions?**



# Thank you for joining us!

Please provide feedback: https://www.surveymonkey.co m/r/LPQINetwork

Or Scan the QR Code

