

COURSE SYLLABUS

Fall Semester 2008

COURSE TITLE: CMSI 311 Interdisciplinary Seminar in Neurodevelopmental Disabilities, Part I

COURSE DESCRIPTION:

CMSI 311 is part one of an advanced graduate level seminar sequence offered through Vermont's Interdisciplinary Leadership Education for Health Professionals (VT-ILEHP) Program, which is required for all VT-ILEHP long-term trainees and fellows. It is a Fall Semester graduate course cross-listed in several departments and offered through Continuing Education for three graduate credits. The five competency areas emphasized throughout the VT-ILEHP core curriculum guide the specific content: neurodevelopmental and related disabilities; interdisciplinary process and collaborative teaming; cultural competence; family-centered care; and leadership in Maternal and Child Health. The VT-ILEHP faculty has actively and collaboratively developed the scope and sequence of the course content. This course is offered to community health professionals and related service providers, as well as students and faculty not directly involved in the VT-ILEHP Program. As an advanced course in neurodevelopmental disabilities emphasizing interdisciplinary practice, leadership and research, this would not be a course typically taken by undergraduate students. Students who do not have graduate status are required to get the instructor's permission to take this course.

NOTE: Course materials (i.e., syllabus, PowerPoints, handouts, outlines & related pdfs will be available through Blackboard). Please check out our course site at the UVM Blackboard site (bb.uvm.edu).

COURSE COORDINATORS: Patricia A. Prelock, Ph.D., CCC-SLP
Training Director
VT-ILEHP Program

Jean Beatson, Ed. D., RN
Clinical Director & Associate Training Director
VT-ILEHP Program

COURSE INSTRUCTORS: Core and Affiliated Faculty of the VT-ILEHP Program with recognized expertise in particular content areas.

CORE FACULTY

Jean Beatson (Nursing; Clinical Director, Associate Training Director)
James Calhoun (Psychology)
Stephen Contompasis (Pediatrics; Program Director)
Martha Dewees (Social Work)
Mary Alice Favro (Speech Pathology)
Tiffany Hutchins (Research)
Dorigen Keeney (Nutrition)

Julianne Nickerson (Family Support)
Deborah O'Rourke (Physical Therapy)
Marie-Christine Potvin (Occupational Therapy)
Patricia Prelock (Speech Pathology; Training Director)
Peggy Sands (Physical Therapy)
Susan Willis (Nutrition)

OTHER PARTICIPATING FACULTY & GUEST PRESENTERS

Jill Allen (Center for Disability & Community Inclusion)
Noma Anderson (Chair, Communication Sciences & Disorders, Florida International University)
Deborah Lisi Baker (Vermont Center Independent Living)
Susan Edelman (CDCI)
Pat Frawley, Director of the VT Crisis Intervention Network
Church Hindes (VNA)
Carol Locust (Center for Native American Health, Tucson, Arizona)
Richard Schattman (Principal, Warren Elementary)
Orlando Taylor (Dean, Graduate College, Howard University)
Elia Vecchione, Director, St. Francis Foundation
Jacqueline Rose (Refugee Resettlement Program)
Families

COURSE DAY & TIME: Thursdays, 5:00-8:00 pm

LOCATION: 400 Lafayette and Distance Learning sites

VT-ILEHP OFFICE: 4th floor Rehab wing, UHC, 1 S. Prospect St.
656-4291 (Jean Beatson, Clinical Dir. & Associate Training Dir.)
jean.beatson@uvm.edu
656-1915/2529 (Patricia A. Prelock, Training Director)
patricia.prelock@uvm.edu
656-3187 (Steve Contompasis, Program Director)
stephen.contompasis@uvm.edu
656-0204 (Kerstin Hanson, Program Support)
kerstin.hanson@uvm.edu

OFFICE HOURS: Please call or e-mail for an appointment.

VT-ILEHP MISSION STATEMENT:

The mission of the **Vermont Interdisciplinary Leadership Education for Health Professionals (VT-ILEHP) Program** is to improve the health of infants, children, and adolescents, with or at risk for, neurodevelopmental and related disabilities and their families through the development of culturally competent, family-centered, community-based leadership professionals.

VALUES WHICH FORM THE FOUNDATION FOR THE VT-ILEHP PROGRAM:

We believe that all individuals have a right to health. Systems that promote health should provide for universal access and accessibility, personal and family choice and promotion of independence within the community.

We believe that the family provides the foundation for the health of our children and that programs supporting the health of children need to support the health of the family and provide services that are family-centered and family oriented.

We believe that all supports should be integrated within the community and that individuals and families needing supports should exercise control over funding, delivery and quality of supports.

We believe in a strength's approach to assessment and support rather than a problems approach.

We believe in prevention and health promotion in order to manage crisis intervention.

We encourage diversity throughout our community, in our classrooms, play, neighborhoods, marketplaces, and workplaces.

We believe that communities should be fully accessible for every citizen.

GENERAL COURSE OBJECTIVES:

- 1.** To increase the knowledge of VT-ILEHP trainees/fellows, faculty, graduate students and community professionals of primary, secondary and tertiary aspects of *prevention* and health promotion for children with special health needs and their families. (ASHA Standard III-D; VT Standard 1: Learning, Principles #1)
- 2.** To increase the knowledge of VT-ILEHP trainees/fellows, faculty, graduate students and community professionals of various models of *interprofessional collaboration and teaming* and service provision in the health care of children with special health needs and their families. (ASHA Standard IV-G, #3; VT Standard 3: Collegueship, Principle #10; VT Standard 4: Advocacy, Principle 11)
- 3.** To increase understanding and skill in developing partnerships with families, and learn how *families and professionals can work collaboratively* in providing family-centered, high quality integrated services. (ASHA Standard IV-G, #3; VT Standard 3: Collegueship, Principle #10; VT Standard 4: Advocacy, Principle #11)
- 4.** To increase the *cultural sensitivity and competence level* of VT-ILEHP trainees/fellows, faculty, graduate students and community professionals in their interactions with families and their children with special health needs including disability, age, gender, religion and *culture*. (ASHA Standards III-D & IV-F; VT Standard 2: Professional Knowledge, Principles #2 & 3)

5. To increase the knowledge and skill of VT-ILEHP trainees/fellows and interested graduate students and community professionals in methods of information acquisition, public policy problem identification, and *research* in Maternal and Child Health. (ASHA Standard III-F)
6. To *critically analyze and evaluate* cutting edge issues (e.g., *managed care, informed consent, confidentiality*, new technologies, etc.) that are currently impacting the lives of children and families. (ASHA Standards III-E, F, G, H; VT Standard 2: Professional Knowledge, Principle #9; VT Standard 4: Advocacy, Principles #12 & 13)

SPECIFIC COURSE OBJECTIVES:

Specific course objectives have been defined for each seminar topic. These objectives and the learning activities designed to meet these objectives will be provided to each student the evening of the individual seminars by the interdisciplinary team responsible for the seminar's planning.

COURSE READINGS: Additional journal articles used to supplement the required text can be found as part of the electronic reserve in Bailey-Howe Library.

To access the electronic reserve, students go to the UVM home page (www.uvm.edu) and click on the Featured Link on the right hand side for Libraries. At the Library page click on Course Reserves in the green section up on top towards the right. You will then see the following if you scroll down:

To perform a Course Reserve search:

1. Select an item from one (or more) of the following drop-down lists: Instructor, Department, Course. (Selecting all 3: Prelock/Beatson, CMSI, CMSI 311 is recommended)
2. Click the Search button to begin your search.
3. Select a record you wish to view by clicking on it. Each record includes a complete citation, the reserve location for the item, and its call number.
4. If the record contains a call number, (e.g. HF549.T56, XC 445, or ZZZ 754), you will need to go to the Reserve Desk at the Bailey Howe Library or Dana Medical Library, depending on the location, and ask one of the staff there for the item.

If "E-Reserve" is indicated in the call number field, the item is available electronically. Note: all of the required readings should be available electronically.

To get an item on electronic reserve, click on the title of the article, at the next screen click on the Internet address in the record. You will be prompted to type your user name and password. Use your UVM email/network user name and password. Note that you

need to have Adobe Acrobat, version 7.0 or higher, loaded on your computer in order to view items on Electronic Reserve. If you do not have Adobe Acrobat Reader on your computer, you can download it:

<http://www.adobe.com/products/acrobat/readermain.html>

REQUIRED TEXTS:

Law, M. (2002). *Evidence-based rehabilitation: A guide to practice*. Thorofare, NJ: Slack Incorporated.

Vargas, C. M. & Prelock, P. A. (Eds.) (2004). *Caring for Children with Neurodevelopmental Disabilities and their Families: An Innovative Approach to Interdisciplinary Practice*. Lawrence Erlbaum Associates, Inc., Publishers.

REQUIRED BOOK for BOOK REVIEW:

Fadiman, A. (1997). *The spirit catches you and you fall down: A Hmong child, her American doctors and the collision of two cultures*. NY: Farrar, Straous & Giroux.

COURSE REQUIREMENTS:

- 1. Attendance and Participation in Class Discussions.** Students are expected to attend all classes and actively participate in class discussions. Required readings can be found in the course packs. Any additional required readings will be announced and provided two weeks prior to each class. Students are expected to come prepared to class and ready to relate the assigned readings and any questions posed by the presenters to the topic of discussion for that class session.

Taking personal responsibility for your learning is a priority value in this class. Students are expected to be respectful of their peers and instructors in their comments during class, their communication around course requirements and content knowledge, and their responsiveness to e-mail requests, assignments and/or other contacts made. Instructors will also demonstrate respect for the viewpoints of students and will provide timely and responsive feedback to student assignments and questions.

- 2. Article Review.** Students are required to reflect, in writing, on the required readings for one of the topics presented during the semester. This means that students are to read all the required readings provided by the seminar team for a particular topic and integrate the information from these readings to address the following:
 - a. Compare and contrast the theoretical or conceptual frameworks espoused in each article? **(5 pts.)**
 - b. Have any of the theoretical or conceptual frameworks presented in the articles led to evidence-based practice as described within the article or within your own discipline? Please explain. **(5 pts.)**

- c. What are the implications for interdisciplinary practice with children with neurodevelopmental disabilities and their families based on the articles you read? (5 pts.)

Students may choose any topic areas they wish to use for their article review. The review is due the class following the presentation of the topic and is worth 15 points.

2. **Evidence-Based Practice Critique.** Students are required to select one research article from the readings listed in the course syllabus or in their discipline specific area that focuses on evidence-based practice. Students are to determine through a comprehensive critique of the research presented in the article if, in fact, the findings would be considered valid. Students may select a quantitative or qualitative research article to review.

For review of the format for evaluating **quantitative** studies, please read Appendix C & D (pgs. 306-321) in your Law (2002) text.

For review of the format for evaluating **qualitative** studies, please read Appendix E & F (pgs. 324-338) in your Law (2002) text.

To access these same Law materials on line, please follow these links:

<http://www.fhs.mcmaster.ca/rehab/ebp/>

Quantitative review form - [quanreview.pdf](#)

Quantitative review guidelines - [quanguidelines.pdf](#)

Qualitative review form - [qualreview.pdf](#)

Qualitative review guidelines - [qualguidelines.pdf](#)

NOTE: If you use an article that is not in the syllabus, but from your discipline, please attach the article to your critique.

Each review form requires yes/no responses and explanations for 8 major areas. Responses for each of the first 7 areas are worth 2 points (7 x 2=14) and the last area is worth 6 points for a total of **20** points. **This assignment is due on October 30th.**

4. **Book Review.** To increase students' awareness and understanding of the specific challenges and joy experienced by individuals with disabilities and their families as well as to reflect on the theoretical health perspectives affecting individuals with chronic conditions, students are required to read a book about a child and/or family affected by a chronic health condition or developmental disability. Students will be reading: Fadiman, A. (1997). *The spirit catches you and fall down: A Hmong child, her American doctors & the collision of two cultures*. NY: Farrar, Straous & Giroux. An order in the bookstore has been made for Fadiman's book.

Students are to prepare a book review of no more than 5 pages, which includes the following:

- a. description of the child with the chronic health condition or special need and the child's family (**5 points**)
- b. explanation of the different health perspectives that affected the care of the child and the interaction with the child's family (**10 points**)
- c. reflection on the most important thing you learned while reading the book which is likely to change your practice for children with chronic health conditions or special needs & their families (**10 points**)

This assignment is worth a total of 25 points and is due on October 2nd.

5. **Policy Assignment:** Students are expected to identify and respond to a policy issue (e.g., availability of the Medicaid waiver for children with special health needs, requirement of standardized measures to document deficits in academic performance for children with special health needs, training requirements for Personal Care Attendants, Respite workers or Instructional Assistants, availability of cultural interpreters for children with disabilities and their families with limited English proficiency, etc.) that has been raised in class discussions regarding services for children with special health needs and their families, that has been raised in your readings or is a current issue in your community setting. You will be asked to provide the following in your written response
 - a. Describe the policy you are addressing. (10 points)
 - b. Please describe the problem with the policy and its impact (e.g., inappropriate policy, implementation problems, practice issues, lack of policy) on services for children with special health needs and their families? (10 points)
 - c. What changes would you recommend to address the policy problem? (10 points)
 - d. Who needs to be involved in your recommended changes? (10 points)

Ideas and concepts in this paper must be supported by the literature. Suggested length is 8-10 pages, following APA 5th edition format. **This assignment is worth a total of 40 points and is due on or before December 4th. Students will present their policy paper to the class on December 11.**

IMPORTANT NOTES FOR STUDENT CONSIDERATION:

1. Any student in this course who has a disability that may prevent him/her from fully demonstrating his/her abilities should contact the course coordinator as soon as possible so we can discuss accommodations necessary to ensure full participation and facilitate your educational opportunity.
2. There will be a 10% reduction in grade for each assignment turned in late except for extraordinary circumstances as determined by the instructor and communicated in advance.
3. As instructor feedback is critical to your ongoing learning and evolution in thinking critically, writing and integrating information, late assignments must be turned in prior to the due date of the next assignment unless there are

extraordinary circumstances as determined by the instructor. An assignment not turned in prior to the next assignment due cannot be accepted for credit and will be given a zero.

4. All papers should be double-spaced & follow APA 5th edition format with references where appropriate.

EVALUATION:

Article Review:	15 points
Evidence-Base Practice Critique	20 points
Book Review:	25 points
Policy Assignment:	<u>40 points</u>
TOTAL:	100 points

Graduate Students

100- 99 points	A+
98 - 94 points	A
93 - 90 points	A-
89 - 87 points	B+
86 - 84 points	B
83 - 80 points	B-
79 - 75 points	C
below 75 points	F

COURSE OUTLINE:

SEPTEMBER 4, 2008

Review of Syllabus, Course Requirements
Interdisciplinary Collaboration

FACULTY COORDINATORS: Jean Beatson*
Patty Prelock

Required Readings

Guralnick, M. J. (2000). Interdisciplinary team assessment for young children: purposes and processes. In M. J. Guralnick (Ed.), *Interdisciplinary clinical assessment of young children with developmental disabilities* (pp.3-15). Baltimore: Paul H. Brookes Publishing Company.

Prelock, P., & Vargas, C. (2004). A different kind of challenge. In C. M. Vargas & P. A. Prelock (Eds.), *Caring for children with neurodevelopmental disabilities and their*

families: An innovative approach to interdisciplinary practice. Lawrence Erlbaum Assoc., Inc. Publishers.

Snell, M. & Janney, R. (2005). Improving communication and handling conflict. In *Collaborative Teaming (2nd edition)* (pp. 121-140). Baltimore, MD: Paul H. Brookes Publishing.

SEPTEMBER 11

Neurodevelopmental Disabilities: Conceptual Frameworks

FACULTY COORDINATORS: Marty Dewees
Debbie O'Rourke*

Required Readings

Canda, E.R. (2006). The significance of spirituality for resilient response to chronic illness: A qualitative study of adults with Cystic Fibrosis. In D. Saleebey (Ed.), *The strengths perspective in social work practice.* (4th ed., pp.61-76). Boston: Allyn & Bacon.

World Health Organization (2007). ICF-CY and ICF Introduction. In International classification of functioning, disability, and health: children and youth version. (pp. ix-28) Geneva, Switzerland: WHO Press.

Hagan, J.F., Shaw, J.S., & Duncan, P.M. (2008). Promoting child development. In *Bright futures: guidelines for health supervision of infants, children, and adolescents,* (3rd ed., pp. 39-75). Elk Grove Village, IL: American Academy of Pediatrics. Retrieved July 1, 2008 from http://brightfutures.aap.org/pdfs/Guidelines_PDF/3-Promoting_Child_Development.pdf

SEPTEMBER 18

Family-Centered Care

FACULTY COORDINATORS: Julianne Nickerson*
Marty Dewees

Required Readings

Beatson, J.E. (2006). Preparing speech-language pathologists as family-centered practitioners in assessment and program planning for children with Autism spectrum disorder, *Seminars in Speech and Language, 27,* 1-9.

Griffin, T. (2003). Facing Challenges to Family-Centered Care I: Conflicts Over Visitation. *Pediatric Nursing.* Posted 05/09/2003. Retrieved 05/05/2008.

Parish, S.L., & Cloud, J.M. (2006). Financial well-being of young children with disabilities and their families. /Social Work, 51, /3, 223-232.

SEPTEMBER 25

American-Indian Concepts of Health, Unwellness and Disability

FACULTY COORDINATOR: Jean Beatson*
Patty Prelock
GUEST FACULTY: Carol Locust

Required Readings

Canales, M.K. (2004). Connecting to Nativeness: The influence of women's American Indian identity on their health care decisions. *CJNR*, 36, 18-44.

Joe, J. R. (2002). The Rationing of Health Care and Health Disparity for the American Indians/Native Alaskan. In B.D. Smedley, A. Y. Stith, & A. R. Nelson (Eds.), *Unequal Treatment: Confronting Racial and Ethnic Disparities in Health Care* (528-551). [On line: http://print.nap.edu/pdf/030908265X/pdf_image/528.pdf].

Locust, C. (1985). *American Indian concepts concerning health and unwellness*. Unpublished manuscript. Supported by the National Institute on Disability and Rehabilitation Research, U.S. Department of Education.

Locust, C. *The Piki maker: Disabled American Indians, cultural beliefs, and traditional behaviors*. Unpublished monograph. Tucson, AZ: Native American Research and Training Center, College of Medicine, University of Arizona.

OCTOBER 2

IDEA: The Policy & the Practice

FACULTY COORDINATOR: James Calhoun
Julianne Nickerson*
GUEST FACULTY: Connie Curtin

Required Readings

Act 117 Annual Report to the House and Senate Committees on Education; Act 117- An act to strengthen the capacity of Vermont's Education system to meet the educational needs of all Vermont students (January 15, 2004). http://www.state.vt.us/educ/new/html/pgm_act117.html

Kelman, M. (2001). Chapter 4: The moral foundations of special education

law. In *Rethinking Special Education for a New Century*. Chester E. Finn, Jr., Andrew J. Rotherham, and Charles R. Hokanson, Jr. (Eds).
http://www.edexcellence.net/library/special_ed/index.html

Palmaffy, T. (2001). Chapter1: The evolution of the federal role. In *Rethinking Special Education for a New Century*. Chester E. Finn, Jr., Andrew J. Rotherham, and Charles R. Hokanson, Jr. (Eds).
http://www.edexcellence.net/library/special_ed/index.html

Vermont Department of Education special education rules and regulations and other pertinent regulations from the Vermont state board of education manual of rules and practices (Revised and effective 8/29/03).
<http://www.state.vt.us/educ/new/html/board/rules.html>

OCTOBER 9

Autism: Defining the Issues

FACULTY COORDINATORS: Patty Prelock*
James Calhoun
GUEST FACULTY: Parents of children with ASD
Individual with ASD

Required Readings

DiCicco-Bloom, E., Lord, C., Zwaigenbaum, L., Courchesne, E., Dager, S., R., Schmitz, C., Schultz, R., T., Crawley, J., & Young, L., J. (2006). The developmental neurobiology of autism spectrum disorder. *Journal of Neuroscience*, 26(6), 6897-6906.

Johnson, C. & Myers, S. (2007). Identification and Evaluation of Children with Autism Spectrum Disorder. *Pediatrics*, 120 (5), 1183-1215.

Prelock, P.A. & Vargas, C. M. (2004). The role of partnerships in program development for adolescents with Autism Spectrum Disorders. In *Caring for children with neurodevelopmental disabilities and their families: An innovative approach to interdisciplinary practice* (pp. 274-301). Mahwah, NJ: Lawrence Erlbaum.

OCTOBER 16

Supporting Families & Providers in Making Intervention Decisions for Children with Autism

FACULTY COORDINATORS: Patty Prelock*
James Calhoun
GUEST FACULTY: Parents of Individuals with ASD

Required Readings

Iovannone, R., Dunlap, G., Huber, H., & Kincaid, D. (2003). Effective educational practices for students with autism spectrum disorders. *Focus on Autism and Other Developmental Disabilities, 18* (3), 150-165.

Rocha, M. L., Schreibman, L., & Stahmer, A. C. (2007). Effectiveness of training parents to teach joint attention in children with autism. *Journal of Early Intervention, 29* (2), 154-172.

Simpson, R. L., (2005). Evidence-based practices and students with autism spectrum disorders. *Focus on autism and other developmental disabilities, 20* (3), 140-149.

OCTOBER 23

Overview of Policy Concepts & Processes

FACULTY COORDINATOR: Stephen Contompasis*

Marty Dewees

GUEST FACULTY:

Church Hinder

Required Reading

Cooper, P. J., and Dennis, R. (2004). Building capacity in law, policy, and leadership: public administration in support of families and clinicians. In C. M. Vargas & P. A. Prelock (Eds.), *Caring for children with neurodevelopmental disabilities and their families: An innovative approach to interdisciplinary practice* (pp. 303-333). Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

OCTOBER 30

Environmental Health Factors: From Neurons to Neighborhoods, Part I

FACULTY COORDINATORS: Stephen Contompasis*

Dorigen Keeney

Required Readings

Lanphear BP, Hornung R, Khoury J, Yolton K, Baghurst P, Bellinger DC, Canfield RL, Dietrich KN, Bornschein R, Greene T, Rothenberg SJ, Needleman HL, Schnaas L, Wasserman G, Graziano J, Roberts R. Low-level environmental lead exposure and children's intellectual function: an international pooled analysis. *Environ Health Perspect.* 2005 Jul;113(7):894-9.

<http://www.pubmedcentral.nih.gov/ezproxy.uvm.edu/articlerender.fcgi?tool=pubmed&pubmedid=16002379>

Painter, R. C., Roseboom, T. J., Bleker, O. P. (2005). Prenatal exposure to the Dutch famine and disease in later life: An overview. *Reproductive Toxicology*, 20; 345–352.
http://www.sciencedirect.com.ezproxy.uvm.edu/science?_ob=ArticleURL&_udi=B6TC0-4G54HM8-1&_user=1563816&_coverDate=10%2F31%2F2005&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_acct=C000053744&_version=1&_urlVersion=0&_userid=1563816&_md5=d38179fd8b001027da8e591df5245c50

Frank, D.A., Rose-Jacobs, R., Beeghly, M., Wilbur, M. Bellinger, D., Cabral, H. (2005). Level of prenatal cocaine exposure and 48-month IQ: importance of preschool enrichment. *Neurotoxicology and Teratology* 27, 15–28.
http://www.sciencedirect.com.ezproxy.uvm.edu/science?_ob=ArticleURL&_udi=B6T9X-4DPCBSN-1&_user=1563816&_coverDate=01%2F01%2F2005&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_acct=C000053744&_version=1&_urlVersion=0&_userid=1563816&_md5=95406fa6b1a0d01ecf169a3770d8ac51

NOVEMBER 6

Environmental Health Factors: From Neurons to Neighborhoods, Part II

FACULTY COORDINATORS: Stephen Contompasis
Dorigen Keeney*

Required Readings

Lanphear BP, Hornung R, Khoury J, Yolton K, Baghurst P, Bellinger DC, Canfield RL, Dietrich KN, Bornschein R, Greene T, Rothenberg SJ, Needleman HL, Schnaas L, Wasserman G, Graziano J, Roberts R. Low-level environmental lead exposure and children's intellectual function: an international pooled analysis. *Environ Health Perspect.* 2005 Jul;113(7):894-9.
<http://www.pubmedcentral.nih.gov.ezproxy.uvm.edu/articlerender.fcgi?tool=pubmed&pubmedid=16002379>

Painter, R. C., Roseboom, T. J., Bleker, O. P. (2005). Prenatal exposure to the Dutch famine and disease in later life: An overview. *Reproductive Toxicology*, 20; 345–352.
http://www.sciencedirect.com.ezproxy.uvm.edu/science?_ob=ArticleURL&_udi=B6TC0-4G54HM8-1&_user=1563816&_coverDate=10%2F31%2F2005&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_acct=C000053744&_version=1&_urlVersion=0&_userid=1563816&_md5=d38179fd8b001027da8e591df5245c50

Frank, D.A., Rose-Jacobs, R., Beeghly, M., Wilbur, M. Bellinger, D., Cabral, H. (2005). Level of prenatal cocaine exposure and 48-month IQ: importance of preschool enrichment. *Neurotoxicology and Teratology* 27, 15–28.
http://www.sciencedirect.com.ezproxy.uvm.edu/science?_ob=ArticleURL&_udi=B6T9X-4DPCBSN-1&_user=1563816&_coverDate=01%2F01%2F2005&_rdoc=1&_fmt=&_orig=search&_sort=d&_view=c&_acct=C000053744&_version=1&_urlVersion=0&_userid=1563816&_md5=95406fa6b1a0d01ecf169a3770d8ac51

NOVEMBER 13

Health Disparities in Cultural Groups & the Role of Leaders

FACULTY COORDINATOR: Patty Prelock*
Debbie O'Rourke
GUEST FACULTY: Orlando Taylor
Noma Anderson

Required Readings

Agency for Healthcare Research and Quality, U.S. Department of Health and Human Services (2007). *National Healthcare Disparities Report* (pp.196-210). Rockville, MD: Author.

Racial and Ethnic Disparities in Diagnosis and Treatment: A Review of the Evidence and a Consideration of Causes. (pp. 417-454). Washington, D.C.: The National Academies Press.

On line: http://print.nap.edu/pdf/030908265X/pdf_image/417.pdf

Vargas, C. M., Prelock, P.A., & Cooper, P. J. (2004). The pillars, the process, and the people: An innovative approach to training health professionals in interdisciplinary practice. In C. M. Vargas & P. A. Prelock (Eds.), *Caring for children with neurodevelopmental disabilities and their families: An innovative approach to interdisciplinary practice* (pp. 335-356). Mahwah, NJ: Lawrence Erlbaum Associates, Inc.

NOVEMBER 20

Serving Immigrant and Refugee Families

FACULTY COORDINATORS: Jean Beatson*
Mary Alice Favro
GUEST PRESENTERS: Jacqueline Rose
Jon Bourgo
Fanny Robichaud

Required Readings

Olness, K.N. (1998). Refugee health. In Loue, (Ed.), *Handbook of Immigrant Health* (pp. 227-241). NY: Plenum Press.

Sotnick, P. & Jezewski, M.A. (2005). Culture and the disability services. In J. H. Stone (Ed.), *Culture and Disability: Providing Culturally Competent Services* (pp. 15-36). Thousand Oaks, CA: SAGE Publications.

Please thoroughly read this website: www.refugee.org

NOVEMBER 27

THANKSGIVING DAY--NO CLASS

DECEMBER 4

Motor Disabilities: Life Span Considerations

FACULTY COORDINATORS: Marie-Christine Potvin
Debbie O'Rourke*
GUEST SPEAKERS: Deborah Lisi-Baker

Required Readings

Institute of Medicine (2007). Secondary conditions and aging with disability. *Future of Disability in America* (pp. 111-130). Washington, DC: The National Academies Press. http://books.nap.edu/openbook.php?record_id=11898&page=111

Law, M, King, G., King, K, Kertoy, M., Hurley, P., Rosenbaum, P., Young, N. & Hanna, S. (2006). Patterns of participation in recreational and leisure activities among children with complex physical disabilities. *Developmental Medicine and Child Neurology*, 48, 337-342.
<http://www.blackwell-synergy.com.ezproxy.uvm.edu/doi/pdf/10.1017/S0012162206000740>

Rosenbaum, P., Paneth, N., Leviton, A., Goldstein, M. & Bax, M. (2007). Definition and classification of cerebral palsy. *Developmental Medicine and Child Neurology*, 49, (Suppl. 109): 8-14.
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DECEMBER 11

Policy Presentations and Seminar Discussion

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STUDENTS ARE REMINDED OF THE UNIVERSITY OF VERMONT'S COMMON GROUND FOR BEHAVIOR AS A STUDENT IN A COMMUNITY OF LEARNERS

Our Common Ground

The University of Vermont is an educationally purposeful community seeking to prepare students to live in a diverse and changing world. We who work, live, study, teach, do research, conduct business or participate in the University of Vermont are members of this community. As members, we believe in the transforming power of education and agree to help create and foster an environment where we can discover and reach our true potential.

We aspire to be a community that values:

- **Respect:** We respect each other. We listen to each other, encourage each other and care about each other. We are strengthened by our diverse perspectives.
- **Integrity:** We value fairness, straightforward conduct, adherence to the facts and sincerity. We acknowledge when things have not turned out the way we had hoped. As stewards of the University of Vermont, we are honest and ethical in all responsibilities entrusted to us.
- **Innovation:** We want to be at the forefront of change and believe that the best way to lead is to learn from our successes and mistakes and continue to grow. We are forward-looking and break new ground in addressing important community and societal needs.
- **Openness:** We encourage the open exchange of information and ideas from all quarters of the community. We believe that through collaboration and participation, each of us has an important role in determining the direction and well-being of our community.
- **Justice:** As a just community, we unite against all forms of injustice, including, but not limited to, racism. We reject bigotry, oppression, degradation and harassment, and we challenge injustice toward any member of our community.
- **Responsibility:** We are personally and collectively responsible for our words and deeds. We stand together to uphold our common ground.

As part of the Unit Faculty for the University of Vermont that prepares speech-language pathologist, teachers, and counselors as educators in school settings, the following conceptual framework is shared across educators at UVM to ensure quality learning and teaching:

Conceptual Framework “The heart and mind of programs”

Unit faculty at the University of Vermont aspire to prepare a committed reflective practitioner, instructional leader and change agent, collaborating with other professionals to make a positive difference in schools and in the lives of all learners.

Through Reflective learning and practice, the UVM prepared educator is grounded in . . .

C Constructivism

Knowledge is socially constructed through dialogue and community-based practice (constructivism).



C Collaboration

Teachers and other school professionals work collaboratively to problem-solve with stakeholders (collaboration, inter-professional practice, reflective practice, excellence).

H Human development & empowerment

Education facilitates development of human potential (developmentally appropriate practice, strengths perspective, empowerment).

I Inclusion

All students can learn and have value in their communities (inclusion).

M Multiculturalism/culturally responsible pedagogy

Learning communities demonstrate respect for and honor diversity; pursue knowledge and affirmation of our diverse cultures (multiculturalism, culturally responsive pedagogy, equity).

E Equity & justice

Education should advance social justice and democracy (equity).

. . . and meets these standards - KSD Standards for Beginning Teachers and Others School Professionals in Initial Programs

- Demonstrates content knowledge and skills
- Understands learners and differences
- Understands learning
- Translates curriculum into instruction
- Creates equitable, inclusive learning environments
- Assesses student learning
- Practices culturally responsive pedagogy
- Demonstrates collaborative and interpersonal skills
- Engages in reflective practice

- Integrates technology
- Acts consistently with the belief that all students can learn
- Engages in self-directed learning and professional development for growth

Faculty beliefs have shaped their professional commitments that are expressed in Outcome Statements for Candidates.

The professional educator in **initial** preparation programs at The University of Vermont . . .

1. Knows content/subject matter, understands connectedness with other disciplines, and translates curriculum into materials and instructional strategies appropriate for subject matter and learners. (Critical Thinker)
2. Understands all learners as individuals, in the context of families and social groups, and uses standard's based instruction to create equitable safe and supportive learning environments that promote acceptance and belonging. (Problem Solver)
3. Understands learning and ways of evaluating and enhancing it, including through the application of technology. (Instructional Leader)
4. Knows social, cultural, historical, legal and philosophical context of schools in a democracy and practices equitable and culturally responsive pedagogy appropriate for subject matter and learners. (Reflective Practitioner)
5. Can create inclusive learning environments which meet diverse learning needs, incorporate and reflect all learners' experiences, and facilitate students' learning, including about their own biases and understandings. (Reflective Practitioner/Change Agent)
6. Demonstrates effective collaborative and interpersonal skills in problem-solving with students, families, colleagues and related professionals. (Inter-professional Practitioner)
7. Engages in professional development and continually examines own assumptions, beliefs and values. (Reflective Practitioner)
8. Demonstrates the belief that all students can learn and that they can take responsibility for their own learning; demonstrates high expectations for all students and takes responsibility for helping them aspire to high levels of learning. (Student Advocate)