SDBP 2026 Pre-Conference Sessions

Half Day Workshops & Clinical Symposia

Extra fee applies to attend - see registration

Saturday, October 24 - Morning Sessions
Clinical Symposium 1 / Workshop A / Workshop B – CHOOSE 1

8:00am – 12:00pm central

Clinical Symposium 1: Autonomy VS Safety-Navigating Relationships, Dating and Sexual Health for Youth with Developmental Disabilities

Gayatri Mahajan, MD, University of California Davis; Marie Clark, MD, MPH, Texas Children's; Caitlin Middleton, PhD; Lindsey DeVries, PhD, Children's Hospital Colorado ; Christine Dub, PhD, BCBA, Maine Health; Nina Kuei, MD, Akron Children's Hospital; Sarah Schlegel, MD, Connecticut Children's

Description

This symposium will provide guidance on supporting healthy relationship skills, navigating family and caregiver concerns, and integrating developmentally appropriate sexual and reproductive health counseling into transition-related practice. We hope to equip clinicians with tools to promote healthy sexuality while maintaining safety, dignity, and self-determination for youth with developmental disabilities. Interactive case-based learning and role play will be used to discuss and elaborate on these concepts. A toolkit with relevant resources will be provided for all participants.

Target audience

Developmental-behavioral pediatricians, advanced practice providers, psychologists, general pediatricians, social workers and trainees who support transition-age youth either in developmental-behavioral pediatrics practice, general pediatric practice, or in specialized outpatient clinics.

Learning Objectives:

1. Identify the unique challenges experienced by disabled youth with regard to relationships, sexuality, autonomy, and safety for disabled youth and the barriers to care in this population.
2. Apply evidence-based strategies for supporting healthy relationships, consent education, gender affirming care and sexual health while balancing autonomy and safety in disabled youth.
3. Adapt practical tools and resources to their own practice to support developmentally appropriate relationship education, sexual health counseling, and safety planning for disabled youth.

Keywords: Sexuality, Disability, Sexual health education

9:00am – 12:00pm central

Workshop A: How to Pay for Stuff Insurance Won't: Accessing Funding for Clinic Needs Outside of Clinic-Generated Revenue

Paul Dressler, Vanderbilt University; Karen Ratliff-Schaub, MD, Prisma Health; Melissa Armstrong-Brine, PhD, Metro Health; William Barbaresi, MD, Boston Children's Hospital; Desmond Kelly, MD, Prisma Health; Shon Cowan Baker, PhD, Ochsner Medical

Description

Starting a new practice and figuring out how to afford a sensory safe space? Trying to hire support staff but your medical center says it is not in the budget? Hoping to add a new clinical service but reimbursement is going to be much lower than the costs of running the service? Please join us for an interactive, collaborative workshop exploring ways to fund clinics, staff and programs outside of clinic-generated revenue. Experts who have tapped into entrepreneurial skills as well as representative from the donor side will go over how to identify needs to be funded, find sources of funding, making effective pitches to funders and sustaining those funds. Participants will then develop their own pitch to funders to take home to their practice.

Target audience
The target audience would be all levels from early trainee to later career. All providers are faced with funding challenges and knowing how to tap into sources for funding clinical needs it important at any stage of career. Background is any professional (MDs, Psychologists, administrators, and advocates) who works in a clinic setting, including academic, hospital-based and private clinic settings. This can be helpful for established clinics but also helpful for anyone thinking about starting their own practice and needs help with funding.

Learning Objectives

1. Identify specific items or positions that could be funded outside of clinic-revenue
2. Find local potential sources of funding for their clinical practice
3. Develop a pitch to funders advocating their funding needs
4. Develop plan to track data showing impact of what was funded
5. Continue relationships with funders to help sustain funding

Workshop Domains: Advocacy, Clinical

Keywords: Clinical Support, Funding, Advocacy

Workshop B: We Love Messy!: Practical Tips for Pediatric Feeding Disorders Based on Four Years of Experience in an FQHC Interdisciplinary Feeding Clinic

Emily Whitgob; Tina Nguyen, OTR/L; Stephanie Pagatpatan, CCC-SLP; Laura Seidel, OTR/L, IFECMHS; Talia Lester, MD, Santa Clara Valley Healthcare

Description
Have you ever felt overwhelmed when a caregiver starts listing their child's limited list of foods? Feeding disorders are a common concern for patients with developmental disabilities. In this interdisciplinary, interactive workshop, you will learn strategies to address feeding concerns. Presenters will share their process of creating a dedicated feeding clinic within their Developmental Behavioral Pediatrics program at a Federally Qualified Health Center.

Target audience
DBP and general pediatrics clinicians who see children with feeding disorders. Physicians, advanced practice providers, psychologists, SLPS, OTs, and trainees in these fields.

Learning Objectives:
Upon completion of this workshop participants will be able to:

1. Demonstrate strategies from at least three feeding therapy modalities
2. Describe how a feeding clinic could fit into a pediatrics clinic
3. Explain how social and family contexts affect feeding

Workshop Domains: Advocacy, Clinical

Keywords: Feeding, FQHC, Interdisciplinary

Saturday, October 24 - Afternoon Sessions
Clinical Symposium 2 / Clinical Symposium 3 / Workshop C / Workshop D – CHOOSE 1

12:30pm – 4:30pm central

Clinical Symposium 2: Adolescent Psychosis in Genetic Developmental Delay

Mary Hames, BioLogic Pharma Solutions; Audrey Thurm, PhD, Harvard Medical School; Jin Lee, PhD, CureNDD; Lauren Beach, PhD, Northwestern University; Jonathan Santoro, MD, Children's Hospital Los Angeles

Description

Adolescent-onset psychosis is increasingly recognized as a neurodevelopmental outcome rather than an isolated psychiatric condition. For clinicians in developmental-behavioral pediatrics, this presents both a diagnostic challenge and an opportunity for earlier identification in children with known developmental delay and genetic syndromes. This symposium will synthesize emerging evidence demonstrating that genetically defined neurodevelopmental disorders (NDDs) provide clinically actionable models for understanding psychosis risk. While 22q11.2 deletion syndrome remains the most established genetic risk factor, newer data highlight additional syndromes including Prader–Willi syndrome, Phelan–McDermid syndrome, and Coffin-Lowry syndrome as conditions in which adolescent psychosis or neuropsychiatric decompensation may occur. Through case-based discussion, participants will learn to recognize early warning signs of psychosis in youth with developmental delay, including deviations from baseline functioning, regression, and emerging behavioral or cognitive changes. The session will emphasize practical differentiation of psychosis from overlapping conditions such as autism-related behaviors, anxiety, trauma responses, and catatonia. Treatment considerations will be reviewed with a focus on syndrome-specific adaptations. Presenters will discuss when standard antipsychotic approaches are appropriate, when mood stabilizers or catatonia-directed therapies should be prioritized, and how underlying genetic mechanisms may influence both response and risk. Particular attention will be given to the risk of regression in certain syndromes and to sex-specific presentation differences, especially in X-linked conditions.

Target audience

The target audience for this session includes developmental-behavioral pediatric clinicians across training and career stages, including fellows, early-career providers, and experienced clinicians in both academic and community-based practice settings. The audience also includes interdisciplinary professionals (e.g., psychologists, nurse practitioners, and therapists) involved in the care of children with neurodevelopmental disorders.

Learning Objectives:

1. Describe the neurodevelopmental model of adolescent psychosis and explain how early developmental differences contribute to later psychosis risk.
2. Identify key clinical features and early warning signs of psychosis in adolescents with developmental delay, including deviations from baseline functioning and atypical presentations.
3. Differentiate psychosis from overlapping neurodevelopmental, behavioral, and medical conditions (e.g., autism-related behaviors, anxiety, catatonia, neurologic disorders).
4. Compare psychosis risk and clinical presentation across selected genetically defined syndromes (e.g., 22q11.2 deletion syndrome, Prader–Willi syndrome, Phelan–McDermid syndrome, and Coffin–Lowry syndrome), including recognition of sex-specific differences where relevant.
5. Apply syndrome-informed approaches to initial evaluation, management, and referral, including awareness of treatment considerations and risk of regression in specific conditions.

Keywords: Neurodevelopmental Disorders, Adolescent Psychosis, Rare Genetic Syndromes

Clinical Symposium 3: From Clinic to Caregiver: Practical Implementation of RUBI Parent Behavior Management Training in DBP

Dawn Greathouse; Sabrina Long, LISW-S, Nationwide Children's Hospital; Kimberly Burkhart, PhD, UH Rainbow Babies & Children's Hospital; Deanna Swain, PhD, Children's Hospital Colorado; Evan Weber, MD; Cy Nadler, PhD, Children's Mercy Kansas City

Description

This clinical symposium provides a practical introduction to the RUBI (Research Units in Behavioral Intervention) behavioral parent training program for children with autism and related developmental conditions. The session reviews the RUBI curriculum and demonstrates how its evidence-based strategies

can be adapted for real-world DBP practice and training. Attendees will learn how to implement RUBI in abbreviated and virtual formats, facilitate groups to scale access, and incorporate into clinical training to boost competencies with key behavioral approaches critical for time-limited medical visits in DBP and primary care. Finally, attendees will engage in live practice applying the RUBI model in case-based discussions.

Target audience

Designed for developmental-behavioral pediatricians, pediatricians, advanced nurse practitioners, psychologists, social workers, and other interdisciplinary clinicians

Learning Objectives:

1. Describe the structure and core components of the RUBI parent training curriculum
2. Identify strategies for adapting and integrating RUBI to support a variety of clinical and training needs in DBP
3. Apply key behavioral principles from RUBI within time-limited medical visits

Keywords: Behavior Intervention, DBP Practice, RUBI Parent Training

1:00pm – 4:00pm central

Workshop C: Leveling Up Your Collaboration with Schools: A Primer and Practical Skills Workshop on Supporting Patients through Multi-Tiered Systems of Supports

Robert Keder, Connecticut Children's; Anna Hickey, PhD, SIU School of Medicine; Samuel Whitley, SSP, NASP, Springfield Public School District 186; Erin Babbit, PsyD, ABPP-CN, Rainbow Babies & Children's Hospital/Case Western University; Irene Loe, MD, Stanford Medicine Children's Health; Jonathan Junqua, DO, UC Davis Health/UC Davis; Javier Mota, MD, Northwell Health; Ludwig Erik von Hahn, MD, Tufts Medical Center

Description

This workshop will present the concept of Multi-Tiered Systems of Support (MTSS) as practiced in the school setting. The school setting is where the majority of academic learning, behavioral regulation, and social functioning are mastered; therefore, the DBP professional should have a well-developed understanding of both data collection and the delivery of services in school settings. MTSS is an evidence-based, tiered system of supports that describes the spectrum of services and supports offered to students in the public-school setting. A wide range of services can be offered within general education, in the form of differentiated instruction and grouping through a Responsiveness to Intervention (RTI) model in addition to the more familiar services of formal special education. Likewise, Positive Behavioral Interventions and Supports (PBIS) is a system of services and supports to address behavior challenges in school settings. Each has its own benchmarking tools and assessments.

Target audience

This workshop is designed for DBP clinicians (physician, psychologist, APP, social work) at all levels of training who desire to improve their ability to clinically support children and families by partnering with schools using the framework of Multi-Tiered Systems of Supports and data collection.

Learning Objectives:

1. Describe the structure and purpose of Multi-Tiered System of Supports (MTSS), Response to Intervention (RTI), and Positive Behavioral Interventions and Supports (PBIS) and correctly identify Tier 1, Tier 2, and Tier 3 supports in at least two case examples.
2. Interpret common school-based progress-monitoring and benchmarking data (universal screening, progress monitoring graphs, intervention response data) and use these data to determine an appropriate next-step clinical recommendation in at least one case-based scenario.
3. Use an MTSS framework to generate at least three specific, school-aligned recommendations (academic and/or behavioral) for a child presented in a clinical case for promotion of equitable outcomes.
4. Write clinical documentation that includes MTSS-aligned language (including tiered supports, progress monitoring, school collaboration) that is appropriate for communication with schools and families.
5. Identify best practices for collaborating with schools and key stakeholders to advocate for equitable clinical and educational outcomes.

Workshop Domains: **Advocacy, Clinical, Ethics**

Keywords: Multi-Tiered System of Supports (MTSS), Partnering with schools, Health equity

Workshop D: From Intention to Implementation: Quality Improvement Strategies for Mental Health & Suicide Screening in Youth with Neurodevelopmental Disabilities

Katherine Steingass, MD; Elizabeth Barnhardt, DO; Camille Wilson, PhD; Rebecca Lyren, PhD; Amber Moore, MPH; Melissa Miller, BA; Kyle Hendrix, MD; Jesse Lewis, MD, Nationwide Children's Hospital

Description

Youth with neurodevelopmental disabilities experience significantly higher rates of mental health symptoms and suicidal ideation than their neurotypical peers, yet they face persistent disparities in screening, identification, and access to care. Standardized mental health and suicide screening tools are often not validated for this population, and busy clinical environments may unintentionally overlook symptoms due to diagnostic overshadowing or uncertainty about who "owns" mental health screening when patients are followed in multiple specialty clinics. This workshop will provide clinicians with practical, developmentally informed strategies to implement mental health and suicide screening in interdisciplinary specialty settings. Drawing from our experience integrating mental health and suicide risk screening into clinics serving youth with spina bifida and Williams syndrome, we will demonstrate how quality improvement (QI) methods can identify care gaps, increase screening rates, and improve follow-through on positive screens. Participants will engage in hands-on activities using real-world scenarios to practice selecting appropriate screening tools, adapting administration for diverse developmental profiles, and applying QI tools to design and evaluate screening workflows. Attendees will leave with actionable strategies to implement or refine screening processes in their own clinical settings, ultimately improving early identification and mental health outcomes for youth with neurodevelopmental disabilities.

Target audience

This workshop is designed for clinicians across disciplines—including developmental-behavioral pediatrics, psychology, speech-language pathology, advanced practice nursing, general pediatrics, and social work—at all stages of training and career development. Many clinicians report uncertainty about how to identify mental health concerns in youth with neurodevelopmental disabilities, how to adapt screening tools appropriately, and how to implement screening workflows within complex clinical environments.

Learning Objectives:

1. Identify common mental health needs in youth with neurodevelopmental disabilities.
2. Describe individual, family, and system-level barriers and facilitators to effective mental health and suicide screening.
3. Select appropriate, evidence-based screening tools and adapt administration to match developmental and communication profiles.
4. Implement developmentally appropriate strategies to address screening barriers while maintaining tool validity.
5. Apply QI methodology to design, implement, and evaluate mental health and suicide screening workflows in interdisciplinary specialty clinics.

Workshop Domains: Clinical

Keywords: mental health, neurodevelopmental disabilities, quality improvement

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