AACPDM

75TH ANNUAL MEETING

QUEBEC CITY CONVENTION CENTRE QUEBEC

OCTOBER 6-9, 2021

Mini Symposia Scoring

Preference will be given to symposia that include international, multi-center presenters. Each Mini-Symposia will be matched with a Free Paper Session based on topic. There is a maximum of 2 Mini-Symposia presentations per speaker. Mini Symposia not accepted for presentation at the 2021 Annual Meeting may be considered for a webinar.

Meets Submission Criteria	
MINI SYMPOSIA CRITERIA	
✓ Appropriate number of presenters (No more than 6 additional presenters listed) ✓ Course format is appropriate with clearly written, measurable objectives ✓ Author gives evidence of planned, interactive elements	**SCORE (Maximum of 4 points)**
Quality of Presenters	
MINI SYMPOSIA CRITERIA	
✓ Authors have a strong track record in the topic and or field ✓ Presenters have strong conference presentation skills Indicate n/a if you cannot confidently judge the authors' presentation skills.	**SCORE (Maximum of 2 points)**
Significance	
MINI SYMPOSIA CRITERIA	
✓ Topic will be an update/research summary on a theme which is of high interest to the AACPDM audience	**SCORE (Maximum of 3 points)**
Evidence-Based	
MINI SYMPOSIA CRITERIA	
✓ Proposed session includes current content, based on best available evidence and the course appears to be of high quality **NOTE: Please flag the submission in the notes section if it has a clear commercial bias OR if the presentation plans to promote use of a proven ineffective intervention/technique**	**SCORE (Maximum of 4 points)**
TOTAL SCORE	

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Demonstration Poster Scoring

ABSTRACTS ARE BLINDED

The purpose of a Demonstration Poster is to showcase emerging ideas, generate discussion regarding service delivery models, highlight novel techniques and technologies; and/or advocacy efforts pertaining to the care of people with childhood-onset disabilities. Demonstration Posters can be used to highlight an upcoming funded clinical study (i.e., study protocol), but research with results must be submitted as a Scientific Presentation.

The following criteria are to be used to judge Demonstration Poster abstracts:

- Relevance to AACPDM meeting attendees and members
- Innovation
- Potential to impact childhood-onset disability
- Freedom of commercial bias
- Safety
- Appropriateness of submission for a demonstration poster

If the poster is not free of commercial bias or promote an unsafe practice, or clearly should have been submitted as a scientific presentation, please indicate this in the notes section.

The abstract should be structured as follows:

- Background/Objectives
- Description
- Significance

Demonstration Posters will only be graded as "Accept", "Not Accept" or "Not Accept due to commercial bias, unsafe practice, or inappropriate for a demonstration poster".

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AACPDM Annual Meeting 2021 Scientific Presentation Score Form

METHOD: *Identify the study design^*

LEVEL OF EVIDENCE	QUANTITATIVE RESEARCH AND BASIC SCIENCE STUDY					SINGLE CASE DESIGN	QUALITATIVE RESEARCH	CASE SERIES AND CASE STUDY	SCORE	YOUR SCORE
	INTERVENTION	*PROGNOSIS*	*DIAGNOSIS*	*PREVALENCE*	*BASIC SCIENCE*			*INTERVENTION*		
1	Systematic review of RCTs Large RCT	Systematic review using formal criteria	Systematic review using formal criteria	Mandatory national registry	Meets all criteria: 1. Hypothesis-driven 2. Appropriate design (controls, power) 3. Appropriate analysis 4. Detailed results 5. Supported conclusions	Randomized controlled (RCT), alternating treatment design (ATD), and concurrent or concurrent multiple baseline design (MBD);	1.Clearly identified research design, 2. evidence of congruence between research question, data collection, analysis and non-methodology selected. 3. evidence of rich descriptions of lived experience. 4. Clear clinical implications		4	
2	Smaller RCT	Prospective and retrospective cohort study or control arm of RCT	Cross sectional study with consecutive sample	Random sample census or survey, or systematic review of random sample census or survey	Meets 4 of the 5 criteria listed above	Non-randomized, controlled, concurrent MBD	Meets 3 of 4 criteria		3	
3	Cohort studies with concurrent control group	Case-Control Study	Cross sectional study with non-consecutive sample with consistently applied reference standard (guideline on who should be included) and blinding	Non-random sample census or survey, or systematic review of non-random sample census or survey or non-mandatory registry study or non-mandatory registry study	Meets 3 of the 5 criteria listed above	Non-randomized, non-concurrent, controlled MBD	Meets 2 of 4 critiera		2	
4	Case series	Cross-Sectional Study	Cross sectional study with non-consecutive sample without consistently applied reference standard (guideline on who should be included) and blinding	Ecological study	Meets 2 of the 5 criteria listed above	Non-randomized, controlled SSRDs with at least three phases (ABA, ABAB, BAB, etc.)	Meets 1 of 4 criteria	Case series with baseline and follow-up data and historical control (published results with different intervention or without the intervention, healthy norm data, or percentile calculation).	1	
5	Case Study					Non-randomized, controlled AB SSRD	Meets none of the above criteria	Case series with data at only one time or a case series without a historical control group. OR A case study with either baseline or follow-up data and historical control (published results with different intervention or without the intervention, healthy norm data, or percentile calculation) A case study with b	0	

METHODOLOGICAL QUALITY: *Identify the study quality and limitations REGARDLESS of study design.*

HIGH QUALITY	See the Equator network for recommended reporting guidelines http://www.equator-network.org/reporting-guidelines/	2
LOWER QUALITY		1
MAJOR FLAW		0

CONTRIBUTION TO THE FIELD: *Identify likely contribution to the field*

Yes	Adds new and important information to evidence base	1
No	Does not add anything new to evidence base	0

INTEREST TO AUDIENCE: *Identify likely interest to the AACPDM audience*

HIGH	1
LOW	0

EXTERNAL VALIDITY: Ability to be generalized to other contexts. For qualitative, is there adequate description of the participants?

HIGH	1
LOW	0

Analysis: *Identify accuracy, relevance, and importance of statistics or qualitative analysis*

HIGH QUALITY- Most rigourous analysis for the study design and research question. For example, an intervention sutdy may report *effect measures (differences or ratio such as difference in scores and odds ratio) with analytic methodology (tests which yield p-values) For qualitative research, there is evidence of rigour in the analysis processes, which are well described.*	2
LOWER QUALITY- Using just descriptive analysis (e.g., means, percentages, etc.) without analytic methodology when higher level analysis would have been more appropriate for the question and study design. For qualitative research, analysis methods are not rigourous or well described	1
MAJOR FLAW- Incorrect analysis techniques were used.	0
	TOTAL

^ The designs written here are examples and the list is not exhaustive eg measurement development and etiological studies. If the design is not written here please attempt to score 1-4, if you are unsure make a note in the comments section.

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SCIENTIFIC PRESENTATION SCORECARD DEFINITIONS

Type of Research

Intervention Studies: Investigating the results of interventions—Does this intervention help? What are the harms?

Prognosis Studies: Investigating the effect of patient characteristic on the outcome of a disease—What is the natural history of the condition? What will happen if we do not add a therapy?

Diagnostic Studies: Investigating a diagnostic test—Is this diagnostic or monitoring test accurate? Is this test worthwhile?

Prevalence Studies: Investigating the proportion of people with disease/problem during a designated time period—How common is the disease/problem?

Basic Science Studies: Involving laboratory studies with cell cultures, animal studies or physiological experiments

Research Designs

Systematic Review (SR): Following a systematic process for selecting, assessing and extracting data from peer-reviewed publications about a specific health problem.

Randomized Control Trial (RCT): Allocating subjects randomly into separate groups, usually called exposed and unexposed groups, to receive or not receive an intervention. The results are assessed by statistical comparison of outcomes in the exposed and unexposed groups. This design minimizes the effects of confounding variables due to the nature of randomized assignment; deals with selection bias by assigning exposure after study enrollment; deals with measurement error by blinding assessors and, if feasible, participants.

Prospective Cohort Study: Categorizing subjects into two or more groups ***based on their status of exposure*** such as intervention or patient characteristics. In prospective cohort studies the investigators conceive and design the study, recruit subjects, and collect baseline exposure data on all subjects, ***before*** any of the subjects have developed the outcomes of interest. The subjects are then followed into the future in order to record the development of any of the outcomes of interest.

Retrospective Cohort Study: Categorizing subjects into two or more groups ***based on their status of exposure*** such as intervention or patient characteristics. Investigators initiate the study **after** all of the outcomes have already occurred. Therefore, both exposure status and outcome are ascertained retrospectively.

Case-Control Study: Categorizing subjects into two or more groups ***based on their status of outcome:*** with the outcome (cases) and without the outcome (controls). The investigators examine the frequency of the exposure or, if the exposure is continuous, the level of the exposure in each group to investigate the relationship of the exposure and the outcome.

Cross-sectional Study: A study in which exposure and disease are determined at the same point in time in a given population.

Case Series: A group or series of case reports involving patients who were given similar treatment. Reports of case series usually contain detailed information about the individual patients. This includes demographic information (for example, age, gender, ethnic origin) and information on diagnosis, treatment, response to treatment, and follow-up after treatment.

Case Study: a case report involving one or more patients who were given a particular treatment. A report of case contains detailed information about individual patients. This includes demographic information (for example, age, gender, ethnic origin) and information on diagnosis, treatment, response to treatment, and follow-up after treatment.

Ecological study: The unit of analysis is not individuals but groups of people. Both exposure and outcomes are measured for groups and are summarized to make inferences about a population (e.g. prevalence, incidence rates, etc.). An example of a question for an ecological study is: "What is the prevalence of cerebral palsy among infants born pre-term?"

Qualitative Research: There are many qualitative methodologies used in health research including, but not limited to, grounded theory, focused ethnography, phenomenology and interpretive description. The purpose of qualitative research is to gain insight into the lived experience of a phenomenon from the perspective of individuals who have experienced it. Data collection methods often involve interviews (either individual or focus groups), observation, or participant-observation.

Single Case (Subject) Design: Single Case design is used to determine whether a causal relationship exists between a manipulated variable (independent variable) and the outcome (dependent variable). Typically, single case studies involve repeated measurements across phases to monitor how individuals respond to changing conditions. Participants are used as their own controls.

Subject Selection

Consecutive sample: Including all subjects meeting the inclusion criteria

Non-consecutive sample (convenience sample): Not including all subjects meeting the inclusion criteria

Random sample: Randomly selecting subjects in a population—selecting in such away that each subject had equal opportunity to be selected.

Purposive sampling: The sample is selected by researchers based on individuals they think would be appropriate for the study. Purposive sampling is frequently used in qualitative research.