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Competency-Based Practice in Developmental Services: Advocacy, Leadership, and Person-Centered Support

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Abstract

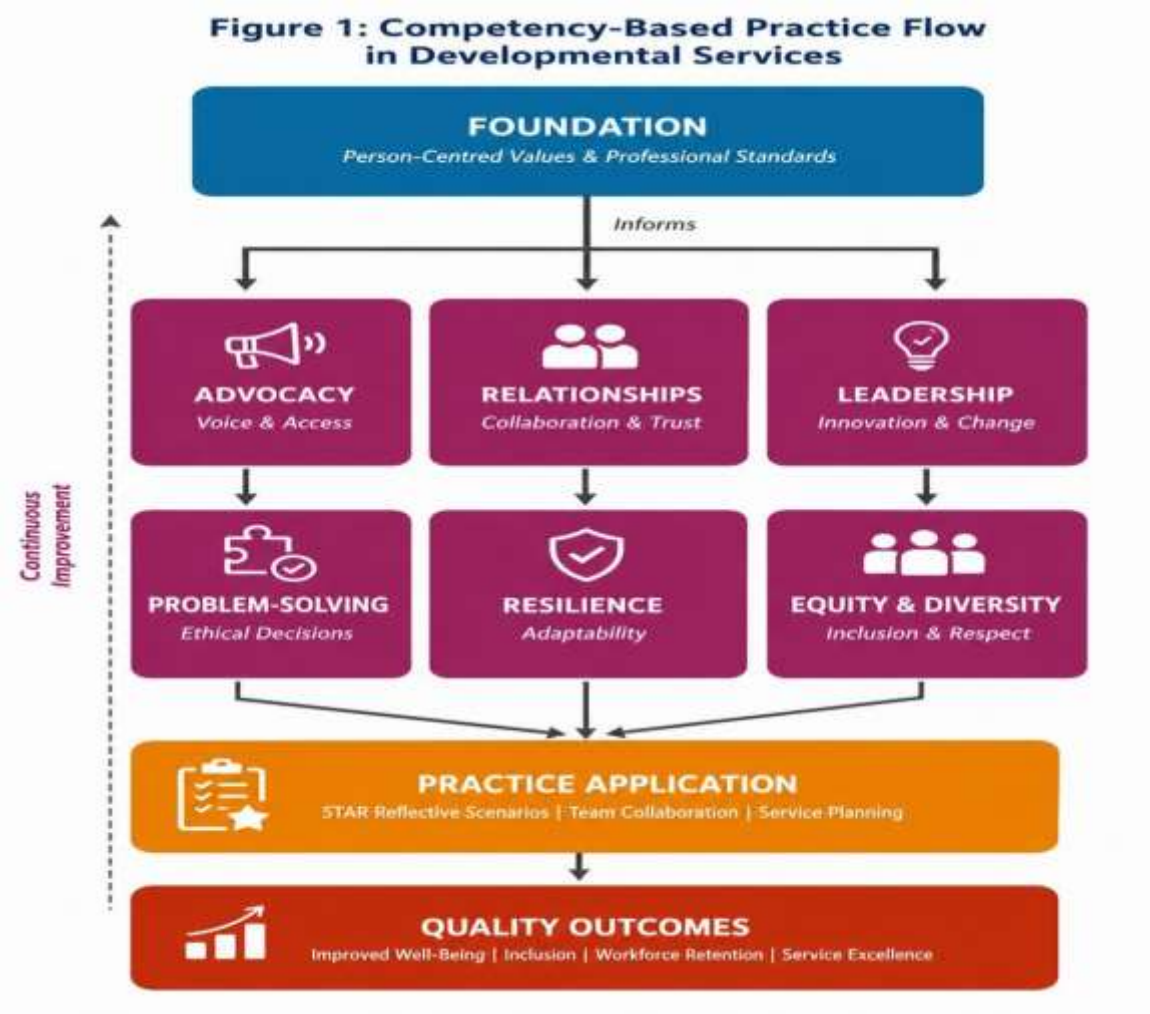
Competency-based practice has emerged as a foundational approach to ensuring quality, person-centered support in developmental services. This paper examines core professional competencies required for effective practice, with emphasis on advocacy, leadership, professional relationships, problem-solving, resilience, and equity. Drawing on empirical research and consensus frameworks developed between 2012 and 2023, the analysis identifies six key competency domains. The paper explores application of the STAR (Situation, Task, Action, Result) reflective framework as a tool for professional development. Evidence indicates that competency-based training programs grounded in person-centered principles improve service quality and client outcomes. The discussion highlights implications for workforce development, emphasizing standardized competency frameworks, interprofessional training, and ongoing professional learning. This paper contributes to literature on professional standards and offers guidance for educators, administrators, and policymakers.

Keywords: *Advocacy, Leadership, Workforce, Learning, Support*

1. Introduction

Developmental services encompass supports designed to enhance quality of life, independence, and community participation of individuals with intellectual and developmental disabilities. Over recent decades, the field has transformed from institutional models toward person-centered, community-based approaches that prioritize individual choice, dignity, and self-determination (Bigby & Beadle-Brown, 2018; Mansell & Beadle-Brown, 2012). This paradigm shift has necessitated changes in knowledge, skills, and attitudes required of professionals and direct support workers. Competency-based practice has emerged as a critical framework for defining, teaching, and assessing capabilities necessary to provide high-quality, ethical support (Havercamp et al., 2021; Wong et al., 2022). Competency-based approaches offer several advantages. First, they provide explicit, measurable standards that clarify expectations and facilitate accountability (Hoge et al., 2016). Second, they enable targeted workforce development by identifying skill gaps and tailoring training (Rahman et al., 2018). Third, competency frameworks support continuous quality improvement by establishing benchmarks for evaluation (Tichá et al., 2019). Fourth, they promote equity and consistency by ensuring all practitioners possess a common foundation of essential skills (Wong et al., 2022). Despite broad consensus on value of competency-based practice, challenges remain. The developmental services workforce is characterized by high turnover, limited training requirements, and variability in job roles (Tichá et al., 2019). Many direct support professionals enter with minimal preparation and inadequate ongoing development (Hoge et al., 2016). Furthermore, contemporary practice demands not only technical skills but also cultural humility, ethical reasoning, advocacy, and adaptive problem-solving, requiring multifaceted competency frameworks beyond narrow task-based training (Havercamp et al., 2021; Wong et al., 2022). The purpose of this paper is to synthesize current evidence on competency-based practice in developmental services, with attention to six core competency domains: advocacy, building professional relationships, leadership and innovation, problem-solving and decision-making, resilience and professional adaptability, and equity and respect for diversity. The paper examines application of the STAR reflective framework as a tool for professional growth. By integrating findings from empirical studies, systematic reviews, and consensus-building initiatives, this analysis provides a comprehensive overview of competencies required for effective practice and identifies implications for workforce development, training, and policy.

Figure 1. Competency-Based Practice Flow in Developmental Services. This figure illustrates the hierarchical relationship among foundational person-centered values, six core competency domains, practice application through reflective and collaborative methods, and quality outcomes including improved well-being, inclusion, workforce retention, and service excellence.



2. Competency-Based Practice in Developmental Services

Competency-based practice refers to an approach to professional education and training that emphasizes demonstration of specific knowledge, skills, and attitudes required for effective practice (Havercamp et al., 2021). In developmental services, competency-based frameworks articulate capabilities necessary to support individuals with intellectual and developmental disabilities in ways that honor their rights, preferences, and goals. These frameworks are grounded

in person-centered support principles, which prioritize individualized planning, meaningful choice, community inclusion, and cultivation of valued relationships and roles (Bigby & Beadle-Brown, 2018; Mansell & Beadle-Brown, 2012). Person-centered support principles have been codified in various policy and practice documents, including principles of self-determination, which emphasize autonomy, choice-making, goal-setting, and problem-solving (Shogren et al., 2016). Competency frameworks operationalize these principles by specifying behaviors and practices that enable professionals to translate values into action. For example, a competency in person-centered planning might include ability to facilitate conversations that elicit individual preferences, to identify barriers to goal attainment, and to coordinate supports that align with the person's vision (Wong et al., 2022). Recent efforts to define competencies for developmental services have employed diverse methodologies, including literature reviews, expert consensus processes, and community-based participatory research. Havercamp and colleagues (2021) conducted a national consensus study involving stakeholders from multiple disciplines to identify disability competencies for health care education. The resulting framework comprises six overarching competencies and 49 sub-competencies, emphasizing person-centered care, awareness of physical and attitudinal barriers, effective communication, and collaborative practice. Similarly, Wong and colleagues (2022) conducted a systematic review of service-delivery competencies in home and community-based services, identifying seven domains that recurred across 43 studies: culturally informed practice, cultivating connections, promoting rights and choice, supporting health and well-being, facilitating community participation, professional development, and organizational leadership.

Rahman and colleagues (2018) employed community-based participatory research methods to develop core competency trainings for direct support providers in a developmental disability program. The participatory approach ensured that training content reflected lived experiences and priorities of individuals with disabilities, family members, and frontline staff. The resulting curriculum addressed seven core competencies, including person-centered care, communication skills, and ethical practice. Evaluation data indicated that participants demonstrated increased knowledge and confidence in applying competencies to real-world scenarios (Rahman et al., 2018). Hoge and colleagues (2016) described development and implementation of a statewide core

competencies initiative for direct care workers in Alaska. The initiative involved collaboration among multiple state agencies and service sectors to establish cross-sector competencies applicable to diverse roles and settings. Key components included standardized competency definitions, assessment tools, and train-the-trainer strategies to facilitate widespread adoption. Challenges identified included need to adapt competencies to specific demands of different job roles, limited funding for training, and variability in organizational capacity to support competency-based practice (Hoge et al., 2016).

Professional expectations in developmental services extend beyond technical skills to encompass ethical reasoning, cultural humility, and commitment to social justice. Competency frameworks increasingly recognize that effective practice requires knowledge of disability-related issues and ability to navigate complex interpersonal dynamics, advocate for systemic change, and engage in continuous self-reflection and learning (Havercamp et al., 2021; Wong et al., 2022).

3. Key Professional Competencies

3.1 Advocacy

Advocacy is a foundational competency in developmental services, encompassing efforts to amplify voices of individuals with disabilities, promote access to resources, and challenge systemic barriers to inclusion and equity (Weber et al., 2019). Effective advocacy requires practitioners to understand legal, policy, and social contexts that shape lives of people with disabilities, to recognize and address power imbalances in service relationships, and to support individuals in exercising rights and making informed decisions (Schuh et al., 2015). Weber and colleagues (2019) described an interprofessional training program designed to foster disability advocates and future leaders. The curriculum integrated Maternal and Child Health leadership competencies with experiential learning opportunities, mentorship, and partnerships with individuals with lived experience of disability. Participants engaged in policy analysis, community organizing, and advocacy projects, developing skills in coalition-building, public speaking, and strategic communication. Evaluation data indicated that the program successfully prepared trainees to assume leadership roles in disability advocacy and policy (Weber et al., 2019). Schuh and colleagues (2015) evaluated outcomes of family and consumer leadership education programs,

finding that training in advocacy and leadership skills produced measurable positive changes in disability policy and practice. Participants reported increased confidence in advocating for themselves and family members, greater engagement in policy processes, and enhanced ability to influence decision-making at organizational and systems levels (Schuh et al., 2015).

Advocacy competencies also include ability to recognize and respond to violations of rights, to navigate complex service systems on behalf of individuals with disabilities, and to collaborate with legal and policy advocates when necessary (Turnbull et al., 2015). Practitioners must be skilled in person-centered communication, active listening, and facilitation of self-advocacy, supporting individuals to articulate preferences and to participate in decisions about their own lives (Wong et al., 2022).

3.2 Building Professional Relationships

Quality of professional relationships is a critical determinant of service effectiveness and client satisfaction in developmental services (Bigby & Beadle-Brown, 2018). Building professional relationships encompasses competencies in collaboration with families, interdisciplinary teams, and community stakeholders, as well as skills in communication, trust-building, and conflict resolution (Wong et al., 2022). Person-centered practice is inherently relational, requiring practitioners to engage authentically with individuals and families, to honor diverse perspectives, and to cultivate partnerships grounded in mutual respect and shared goals (Turnbull et al., 2015). Wong and colleagues (2022) identified cultivating connections as one of the most frequently cited competency domains in their systematic review of home and community-based services. This domain includes ability to establish rapport, to communicate effectively across differences in language and culture, and to coordinate supports among multiple providers and systems. Effective relationship-building requires emotional intelligence, empathy, and capacity to navigate complex interpersonal dynamics (Wong et al., 2022).

Collaboration with families is a cornerstone of person-centered practice, particularly in services for children and youth with developmental disabilities. Turnbull and colleagues (2015) articulated principles of family-professional partnerships, emphasizing importance of trust, respect, equality, and open communication. Competencies in family collaboration include ability to recognize and value family expertise, to engage families as equal partners in planning and decision-making, and

to provide information and support in ways that are accessible and culturally responsive (Turnbull et al., 2015). Interdisciplinary collaboration is essential in developmental services, where individuals often receive supports from multiple professionals across health, education, employment, and social service sectors. Competencies in team collaboration include ability to communicate effectively with colleagues from diverse disciplines, to integrate perspectives and expertise in service planning, and to coordinate care in ways that minimize fragmentation (Havercamp et al., 2021).

3.3 Leadership and Innovation

Leadership and innovation are increasingly recognized as essential competencies for professionals in developmental services, reflecting need to adapt to changing policy environments, emerging evidence, and evolving expectations for person-centered support (Weber et al., 2019). Leadership competencies include ability to inspire and motivate others, to facilitate organizational change, to advocate for resources and policy reforms, and to model ethical and person-centered practice (Schuh et al., 2015). Innovation competencies encompass openness to new ideas, willingness to experiment with novel approaches, and capacity to evaluate and refine practices based on feedback and outcomes (Bigby & Beadle-Brown, 2018). Weber and colleagues (2019) emphasized importance of preparing future leaders through interprofessional training that integrates didactic instruction, experiential learning, and mentorship. Leadership development programs that incorporate lived experience perspectives, policy engagement, and community-based projects have been shown to enhance participants' capacity to drive systemic change and to advocate for disability rights (Weber et al., 2019). Schuh and colleagues (2015) similarly found that leadership education for family members and consumers produced positive changes in policy and practice, highlighting value of cultivating leadership competencies among diverse stakeholders.

Innovation in developmental services often involves adoption of evidence-based practices, integration of new technologies, and redesign of service delivery models to better align with person-centered principles (Bigby & Beadle-Brown, 2018). Competencies in innovation include ability to critically appraise research evidence, to pilot and evaluate new interventions, and to engage stakeholders in co-design processes that ensure innovations are responsive to needs and preferences of individuals with disabilities (Mansell & Beadle-Brown, 2012).

3.4 Problem-Solving and Decision-Making

Problem-solving and decision-making are core competencies that enable practitioners to address complex and often unpredictable challenges that arise in developmental services (Call, 2015). Effective problem-solving requires ability to assess situations accurately, to generate and evaluate alternative solutions, to make decisions that balance competing values and priorities, and to implement and monitor interventions (Brennan, 2017). Ethical decision-making is particularly important in developmental services, where practitioners frequently encounter dilemmas involving rights, risks, autonomy, and duty of care (Ollerton, 2016). Call (2015) examined personal practical theories of educators working with students with disabilities, finding that practitioners' beliefs and values shaped their approaches to planning and decision-making. Common themes included care, safety, advocacy, mentoring, reflection, and problem-solving. The study highlighted importance of reflective practice in helping practitioners to examine underlying assumptions and to make more deliberate and ethically grounded decisions (Call, 2015). Brennan (2017) demonstrated that training methods informed by social cognitive theory, including mastery modeling, behavioral rehearsal, and videotaped self-reflection, produced significant improvements in interviewing and problem-solving skills among students learning clinical practice. Participants who engaged in structured skill-building exercises showed enhanced proficiency in assessing complex situations, generating appropriate interventions, and evaluating outcomes. The study also found that training increased participants' self-efficacy, suggesting that competency development in problem-solving can enhance practitioners' confidence and effectiveness (Brennan, 2017).

Ollerton (2016) used scenario-based reflection to explore ethical tensions in disability services, including dilemmas related to respectful relationships, balancing rights and risks, and navigating power dynamics. The analysis underscored value of reflective practice in helping practitioners to negotiate meaning, to challenge ableist assumptions, and to make decisions that honor dignity and autonomy of individuals with disabilities (Ollerton, 2016).

3.5 Resilience and Professional Adaptability

Resilience and professional adaptability are essential competencies for managing demands and stresses inherent in developmental services work (Arya, 2021). Practitioners in this field often face challenging working conditions, including high caseloads, limited resources, emotional demands,

and exposure to trauma and crisis situations (Tichá et al., 2019). Resilience competencies include ability to cope with stress, to maintain well-being and professional effectiveness under pressure, and to recover from setbacks and adversity (Kourkoutas et al., 2017). Adaptability competencies encompass flexibility, openness to change, and capacity to adjust practices in response to new information, feedback, and evolving circumstances (Brennan, 2017). Arya (2021) described the PRISM framework (Promoting Resilience, Independence, and Self-Management) as a structured approach to fostering resilience among individuals with intellectual disabilities. While the framework is primarily oriented toward service users, its principles, including use of structured tools, protocols, and empowerment strategies, have implications for workforce development. Building resilience among practitioners requires organizational supports, including access to supervision, peer support, professional development opportunities, and workplace policies that promote work-life balance and self-care (Arya, 2021). Kourkoutas and colleagues (2017) evaluated a resilience-based program for teachers working in inclusive education settings during a period of economic austerity in Greece. The program emphasized reflective practice, peer collaboration, and development of adaptive coping strategies. Qualitative data indicated that participants experienced reduced professional stress, enhanced reflective capacity, and improved confidence in managing challenges of inclusive teaching (Kourkoutas et al., 2017).

Brennan (2017) found that training methods incorporating mastery experiences, feedback, and self-reflection enhanced not only specific skills but also participants' self-efficacy and adaptive capacity. The study suggested that competency development programs that build confidence and provide opportunities for supported practice can enhance practitioners' resilience and ability to navigate complex and unpredictable situations (Brennan, 2017).

3.6 Equity and Respect for Diversity

Equity and respect for diversity are foundational competencies that underpin all aspects of person-centered practice in developmental services (Havercamp et al., 2021). These competencies encompass awareness of how social, cultural, and structural factors shape experiences of disability; recognition of intersecting identities and ways in which race, ethnicity, language, gender, sexual orientation, and socioeconomic status influence access to services and quality of support; and commitment to inclusive and anti-oppressive practice (Wong et al., 2022). Wong and colleagues

(2022) identified culturally informed practice as one of the most frequently cited competency domains in their systematic review, reflecting widespread recognition of importance of cultural humility and responsiveness in service delivery. Culturally informed practice includes ability to communicate effectively across linguistic and cultural differences, to recognize and address biases and stereotypes, and to adapt supports to align with values, beliefs, and preferences of individuals and families from diverse backgrounds (Wong et al., 2022). Havercamp and colleagues (2021) emphasized importance of disability competencies that address attitudinal and communication barriers in health care. The consensus framework developed through their study includes sub-competencies related to recognizing implicit bias, understanding social determinants of health, and advocating for equitable access to services. The framework calls for education and training that prepare professionals to work effectively with individuals with disabilities from diverse communities and to address systemic inequities that contribute to disparities in health and well-being (Havercamp et al., 2021).

Equity competencies also include ability to recognize and challenge ableism, to advocate for policy and practice changes that promote inclusion and accessibility, and to engage in ongoing self-reflection about one's own biases and assumptions (Ollerton, 2016). Practitioners must be skilled in creating environments that are welcoming and affirming for individuals with disabilities from all backgrounds, and in collaborating with community organizations and cultural brokers to ensure that services are accessible and culturally appropriate (Turnbull et al., 2015).

4. Application of the STAR Reflective Framework

The STAR reflective framework, comprising Situation, Task, Action, and Result, is a structured approach to professional reflection that supports competency development and continuous learning (Brennan, 2017). The framework provides a systematic method for practitioners to analyze their experiences, to identify competencies they applied in specific situations, and to evaluate effectiveness of their actions. By engaging in STAR reflection, practitioners can deepen understanding of their own practice, recognize patterns and areas for growth, and develop more deliberate and evidence-informed approaches to future challenges (Kourkoutas et al., 2017). The Situation component involves describing context of a practice scenario, including relevant background information, individuals involved, and challenges or issues that arose. This step

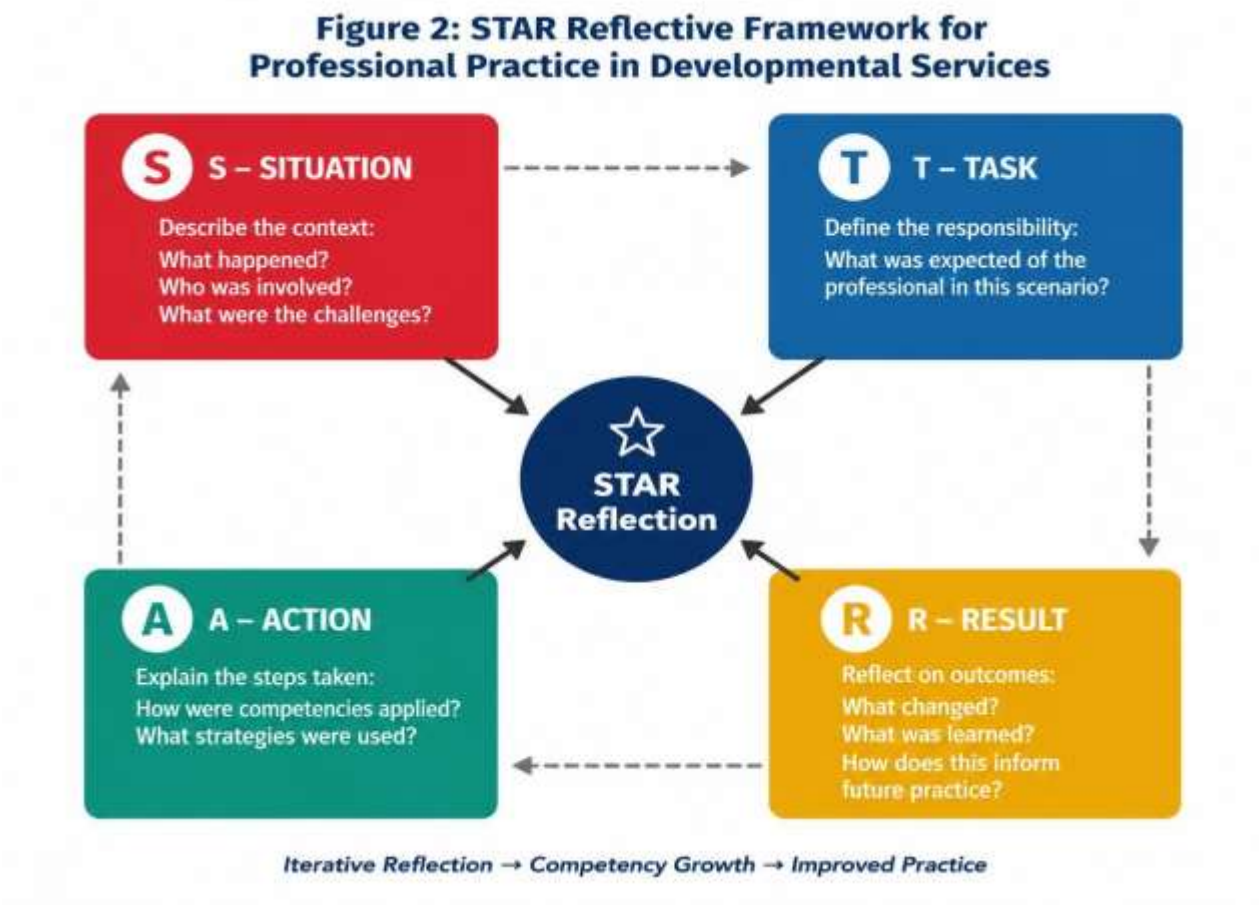
encourages practitioners to attend to complexity and particularity of real-world situations, recognizing that effective practice requires careful assessment and contextual understanding (Call, 2015). For example, a practitioner might describe a situation in which a client expressed dissatisfaction with their current living arrangement and requested support to explore alternative housing options.

The Task component involves identifying professional responsibilities and expectations relevant to the situation. This step clarifies competencies that are called upon and goals that the practitioner is seeking to achieve. In the housing example, the task might include facilitating a person-centered planning conversation, assessing client's preferences and support needs, and coordinating with housing providers and funding agencies to identify viable options (Wong et al., 2022). The Action component involves detailing specific steps the practitioner took to address the situation and fulfill the task. This step encourages practitioners to articulate their decision-making process, strategies they employed, and competencies they drew upon. In the housing scenario, actions might include conducting conversations with the client to explore their vision for their living situation, researching available housing options, arranging site visits, and facilitating meetings with potential housemates and support staff (Brennan, 2017). The Result component involves reflecting on outcomes of actions taken, including both intended and unintended consequences. This step encourages practitioners to evaluate effectiveness of their practice, to identify what worked well and what could be improved, and to consider implications for future practice. In the housing example, the practitioner might reflect on whether the client was satisfied with the new living arrangement, whether the transition was smooth, and what lessons were learned about facilitating housing transitions (Ollerton, 2016).

The STAR framework offers several benefits for professional growth and competency development. First, it provides a structured method for reflection that can be used consistently across diverse practice situations, facilitating development of reflective habits and skills (Kourkoutas et al., 2017). Second, it encourages practitioners to make explicit the competencies they are applying, supporting self-awareness and intentional skill development (Brennan, 2017). Third, it generates concrete examples of practice that can be used in supervision, peer consultation, and professional development activities, providing a basis for feedback and collaborative learning

(Call, 2015). Fourth, it supports integration of theory and practice by prompting practitioners to connect their actions to underlying principles, values, and evidence (Ollerton, 2016).

Figure 2. STAR Reflective Framework Process for Professional Development. This figure illustrates the cyclical process of STAR reflection, in which practitioners describe the Situation, define the Task, explain the Action taken, and reflect on the Result. The iterative application of this framework supports competency growth and improved practice over time.



Examples from practice scenarios illustrate application of the STAR framework across different competency domains. In an advocacy scenario, a practitioner might describe a situation in which a client was denied access to a community program due to discriminatory policies. The task would involve advocating for client's rights and challenging the exclusionary policy. Actions might include researching relevant disability rights laws, meeting with program administrators to present the case for inclusion, and connecting the client with legal advocacy resources. Results might

include the program revising its policies and the client gaining access, with the practitioner reflecting on strategies that were most effective and importance of persistence in advocacy efforts (Weber et al., 2019; Schuh et al., 2015). In a relationship-building scenario, a practitioner might describe a situation in which a family expressed frustration with lack of communication from the service team. The task would involve rebuilding trust and establishing more effective communication practices. Actions might include scheduling a family meeting to listen to concerns, developing a communication plan that specifies frequency and methods of contact, and following through consistently on commitments. Results might include improved family satisfaction and more collaborative planning, with the practitioner reflecting on importance of active listening and accountability in building professional relationships (Turnbull et al., 2015; Wong et al., 2022).

5. Discussion

The evidence reviewed demonstrates that competency-based practice is essential for ensuring quality, person-centered support in developmental services. The six core competency domains, advocacy, building professional relationships, leadership and innovation, problem-solving and decision-making, resilience and adaptability, and equity and diversity, provide a comprehensive framework for defining knowledge, skills, and attitudes required for effective practice. These competencies are grounded in person-centered principles and reflect complexity and relational nature of contemporary developmental services work (Havercamp et al., 2021; Wong et al., 2022). Competency-based training programs that employ participatory development methods, integrate lived experience perspectives, and provide opportunities for experiential learning and reflection have been shown to enhance practitioners' knowledge, confidence, and effectiveness (Rahman et al., 2018; Weber et al., 2019). Use of structured frameworks such as STAR for professional reflection supports ongoing competency development by encouraging practitioners to analyze experiences, identify areas for growth, and refine practice based on feedback (Brennan, 2017; Kourkoutas et al., 2017).

The importance of person-centered and collaborative practice cannot be overstated. Person-centered support is fundamentally relational, requiring practitioners to engage authentically with individuals and families, to honor diverse perspectives and preferences, and to cultivate partnerships grounded in mutual respect and shared goals (Bigby & Beadle-Brown, 2018; Turnbull

et al., 2015). Competencies in communication, trust-building, and collaboration are essential for establishing relationships that enable effective support. Similarly, competencies in advocacy and equity are critical for addressing systemic barriers to inclusion and for ensuring that services are accessible and responsive to individuals from diverse backgrounds (Havercamp et al., 2021; Wong et al., 2022). Implications for workforce development and training are significant. The developmental services workforce faces persistent challenges related to recruitment, retention, and professional preparation (Tichá et al., 2019). Competency-based frameworks offer a pathway for addressing these challenges by providing clear standards for practice, facilitating targeted training, and supporting career advancement. However, successful implementation requires investment in infrastructure, including development of standardized curricula, assessment tools, and train-the-trainer programs (Hoge et al., 2016). It also requires organizational cultures that value ongoing learning, reflective practice, and professional development (Bigby & Beadle-Brown, 2018).

Interprofessional education and training have been identified as effective strategies for building collaborative competencies and preparing practitioners to work effectively across disciplinary boundaries (Weber et al., 2019). Programs that bring together professionals from health, education, social services, and other fields provide opportunities for shared learning, development of common understanding, and cultivation of networks that support coordinated care (Havercamp et al., 2021). Leadership development is another critical area for workforce investment. Preparing future leaders through programs that integrate policy engagement, advocacy training, and mentorship can enhance capacity to drive systemic change and advance person-centered, rights-based practice (Weber et al., 2019; Schuh et al., 2015). Leadership programs that include individuals with disabilities and family members as participants ensure that leadership development is grounded in lived experience and that diverse voices shape future direction of the field (Schuh et al., 2015). Challenges and limitations in current evidence base must be acknowledged. While there is broad consensus on importance of competency-based practice, empirical evidence on effectiveness of specific training programs remains limited. Many studies rely on self-report measures of knowledge and confidence, with fewer examining direct impacts on practice behaviors or client outcomes (Rahman et al., 2018; Hoge et al., 2016). Longitudinal research is needed to assess sustained effects of competency training and to identify organizational factors that support or hinder translation of competencies into practice (Tichá et al., 2019).

6. Conclusion

Competency-based practice represents a foundational approach to ensuring quality, person-centered support in developmental services. The six core competency domains examined, advocacy, building professional relationships, leadership and innovation, problem-solving and decision-making, resilience and adaptability, and equity and diversity, provide a comprehensive framework for defining capabilities required for effective practice. These competencies are grounded in person-centered principles and reflect relational, ethical, and contextual nature of contemporary developmental services work. Evidence indicates that competency-based training programs that employ participatory development methods, integrate lived experience perspectives, and provide opportunities for experiential learning and structured reflection enhance practitioners' knowledge, confidence, and effectiveness. The STAR reflective framework offers a valuable tool for ongoing professional development, enabling practitioners to analyze experiences, identify areas for growth, and refine practice based on feedback and outcomes.

The importance of competency development extends beyond individual practitioners to encompass organizational and systemic levels. Successful implementation of competency-based practice requires investment in standardized curricula, assessment tools, and train-the-trainer programs, as well as organizational cultures that value and support ongoing learning and reflective practice. Interprofessional education and leadership development programs are critical strategies for building collaborative competencies and for preparing future leaders to drive systemic change and to advance person-centered, rights-based practice. Recommendations for ongoing professional learning include establishment of competency-based credentialing and career pathways, integration of competency standards into funding and accreditation requirements, and creation of communities of practice that support peer learning. Policymakers, educators, administrators, and practitioners all have roles in advancing competency-based practice and ensuring that the developmental services workforce is equipped with knowledge, skills, and attitudes necessary to provide high-quality, person-centered support.

Future research should focus on evaluating effectiveness of specific training programs, examining relationship between practitioner competencies and client outcomes, and identifying organizational factors that support translation of competencies into practice. Longitudinal studies

are needed to assess sustained effects of competency development and to inform continuous improvement of training strategies. Competency-based practice is essential for advancing quality, equity, and effectiveness of developmental services. By defining clear standards, providing targeted training, and fostering cultures of reflection and continuous learning, the field can ensure that individuals with intellectual and developmental disabilities receive person-centered, rights-based support they deserve.

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