

Nominations 2008

2008 Antonia Brancia Award for EDHI Excellence

Carlos Duran

The Delaware Newborn Hearing Screening Program (DNHSP) would like to nominate Dr. Carlos Duran for the Antonia Brancia Maxon Award for EHDI Excellence for 2008. Dr. Duran is the driving force behind the DNHSP. As AAP Chapter Champion for Delaware, Dr. Duran initiated our EHDI program and has been a dedicated leader since its onset. His goal was to screen all newborns born within Delaware (including those who live in other states) and ensure that those identified or considered at-risk received further diagnostic testing. At this point, Delaware is screening 95% of all newborns. The Delaware Infant Hearing Assessment Intervention Program (DIHAIP), for which Dr. Duran is the chair, has determined that DNHSP is responsible for ensuring that 100% of newborns be screened before discharge. His recommendations and others' on DIHAIP are crucial to helping DNHSP achieve that goal. As a result DIHAIP's work, Delaware passed a law stating that all birthing facilities must screen newborns before discharge.

His passion has helped physicians diagnose newborns with hearing loss at an earlier age and crucial interventions have begun much earlier than in the past. Because of Dr. Duran and the DIHAIP committee, DHNSP used federal grant money to purchase screening units for birthing facilities throughout our state. He was one of the experts in assuring the facilities received proper instrumentation. This included the Amish community where screenings are provided through a local nurse midwife. In addition, he is continually reviewing assessment tools and procedures to assure their accuracy. Dr. Duran also participated in establishing regionalized neonatal care which made collaboration on hearing more efficient. His dedication and consistency in improving hearing screening for infants is commendable.

Throughout his duration as chair of DIHAIP, Dr. Duran has promoted that public awareness is vital to educating the medical community as well as the public regarding the importance of early intervention for hearing loss in children. His efforts in promoting this awareness have included newspapers and television interviews and educational seminars to physicians throughout the state and to members of professional organizations. He also helped to orchestrate the production of the Newborn Screening Practitioner manual that is in every pediatrician's office and also provided to every family having a child who is deaf or hard of hearing.

Due to his expressed need for a family support network within Delaware, there will be a free conference provided to families of children with hearing loss focusing on family support. At the conference, the keynote speaker is a representative of a national family support network who has a child with hearing loss. She will be addressing the steps that are necessary for families to start a local chapter. DHNSP will orchestrate the coordination between families to start up the local chapter. Dr. Duran's goal is to improve the family support network in the state to close the gap in meeting the needs of English and non-English communicating families in Delaware. Through the work of Dr. Duran, Delaware is now considered to be at the forefront among other states in regards to the EHDI program we have established. He is extremely passionate and dedicated to the hearing program and without his participation and well respected guidance, Delaware would not have the strong hearing program that it has today. For all that he has done, DNHSP and the citizens of Delaware are extremely grateful to have Dr. Duran as an advocate for hearing screening and services. We strongly recommend Dr. Carlos Duran for the Antonia Brancia Maxon award for EHDI Excellence.

Judith Gravel

It is a privilege for me to nominate Dr. Judy Gravel for the Antonia Brancia Maxon Award for EHDI Excellence, in recognition of her outstanding contributions in research, teaching, clinical practice, and professional service related to the identification and management of hearing loss in children. Judy has been involved in hearing and speech science for nearly 40 years. Her bachelor's degree in communication disorders in 1970 was followed by a master's in audiology in 1971, both from the University of Massachusetts at Amherst. She completed her Ph.D. at Vanderbilt in 1985 and went on to a distinguished academic career that has included faculty appointments at Columbia University, Albert Einstein College of Medicine, City University of New York, and the University of Pennsylvania. She now serves as Director of the Center for Childhood Communication at Children's Hospital of Philadelphia where she also holds the William P. Potsic Chair in Pediatric Otolaryngology and Childhood Communication. One component of EHDI excellence involves contributions to the professional literature. Judy's publication record is remarkable in scope and influence. Her CV includes over 75 articles in respected peer-reviewed journals, leading textbooks, monographs, and conference proceedings. Her research is always timely and well focused, consistently aimed at achieving a better understanding hearing loss in children and how best to provide pediatric assessment and management. More importantly, it has contributed substantially to the refinement of behavioral and electrophysiologic assessment procedures used to identify and manage hearing loss in children. Judy is always on the leading edge of clinical research, studying and interpreting new methods and then communicating her findings in ways that are timely and relevant to colleagues. It is impossible to pick up an article or book chapter on pediatric audiology without seeing multiple references to her work. Judy is among the world's leading authorities on pediatric audiology; her publications reflect the highest professional and scientific standards. Furthermore, she is an exceptional communicator whose manuscripts are executed with clarity and purpose. It is not surprising that her work has had an enormous impact on both clinical practice and public policy.

Presentations to professional colleagues is another component of EHDI excellence. Judy is a gifted lecturer who is always in demand as an invited speaker. Her national and international stature is clearly evidenced by the number of keynote addresses, symposia, and invited presentations listed in her curriculum vitae. I have attended many of her presentations and have always found them engaging, clinically relevant, and thought provoking. She is equally comfortable presenting her research to a group of hearing scientists or delivering grand rounds to an audience of experienced clinicians. She is one of those rare individuals held in high esteem by both groups and, as a result, has been a major force in bringing a stronger scientific base to the clinical practice of pediatric audiology. Over the years Judy has made innumerable contributions to EHDI-related professional and scientific organizations at the state, national, and international levels. She always has a keen sense for what is timely and important. Moreover, she combines creativity and problem solving ability with a positive attitude and a steadfast determination to see a project through to successful completion. It is not surprising that Judy has, for over two decades, participated in nearly every important pediatric audiology task force and working group. I had the privilege of serving with her

from 2000-2005 as a member of the Joint Committee on Infant Hearing which she chaired from 2003-2005. Even though I had known her for years I was continuously impressed by how skillfully she facilitated the communication of this diverse, multi-disciplinary group of opinioned individuals. She is truly a master of consensus building, able to achieve cooperation and compromise without sacrificing her ideals or core principles. The recently published JCIH 2007 Position Statement bears the influence of her wisdom and leadership. The confidence and respect of colleagues is clearly reflected by Judy's many honors and awards as well as the numerous committee chairs and editorial appointments she has held. She has been a member of four editorial boards and has served as an editorial reviewer for 16 scientific journals. In 1995 she was herself honored (with Stapells and Martin) for an article in *Ear and Hearing* that received the Editor's Award for Outstanding Research in Audiology and Hearing Science. Other awards include a Distinguished Achievement Award given by the New York State Speech-Language-Hearing Association, an organization that would later nominate her for the Louis M. DiCarlo Award for Outstanding Clinical Achievement. As a faculty member Judy made vital contributions at each of the institutions she served, particularly in the education of graduate students and the mentoring of clinicians and junior colleagues. Whenever I interact with her I am impressed by her warmth as well as her modesty and humility. She has a remarkable way of putting people at ease and bringing out the best in everyone. Those who have worked with Judy in any capacity know her to be a person of exceptional honesty, civility, and personal integrity.

In summary, Dr. Judy Gravel is an outstanding nominee for the Antonia Maxon Award and, in my opinion, an ideal first recipient. Toni Maxon and Judy shared many of the same personal qualities as well as a similar passion for delivering our very best to the children and families we serve. Judy has distinguished herself as one of the world's preeminent pediatric audiologists whose publications and presentations have been vital to the translation of basic science to clinical practice. She is also tireless in her service to the profession with pivotal contributions that span three decades. Moreover, Judy is a scholar, a scientist, and a master clinician whose career has exemplified the highest standards of professionalism and ethical conduct. Like Toni Maxon, she is a cherished colleague and friend to many, whose leadership and dedication have been truly inspiring. I am proud to convey my full and enthusiastic support for her nomination as first recipient of the Antonia Brancia Maxon Award for EHDI Excellence. I cannot imagine a more deserving recipient.

Mary Hartnett

Please accept our nomination of Mary Hartnett for the Antonia Brancia Maxon Award for EHDI Excellence. Just as Antonia Brancia Maxon, Mary has been a tireless advocate for EHDI. For over six years, Mary Hartnett has been the Executive Director for the Minnesota Commission Serving Deaf and Hard of Hearing People (MCDHH) advocating for equal opportunities for deaf, hard of hearing and deafblind children and adults. With Mary Hartnett's leadership, five EHDI related bills passed during the 2007 legislative session proving to be a historic year for Minnesota EHDI policy. The lives of Minnesota children who have hearing loss and their families will be dramatically improved for the better.

These include:

1. Newborn Hearing Screening Mandate (\$20 increase in the bloodspot fee; approximately \$1.3 million/yr). Newborn hearing screening and reporting were added to Minnesota's newborn screening panel. Results must be reported to the Minnesota Department of Health (MDH) and outcomes measured to increase effectiveness and to ensure culturally appropriate services for children hearing loss and their families.

2. Parent Guides for Families with Hearing Loss – \$199,000 (two years) for trained parent guides to meet with parents and provide them with family support, unbiased information about language, medical and educational choices.

3. Hearing Aid Loaner Bank – (\$140,000/2 yrs & ongoing)- for the cost of an audiologist/director.

4. Deaf and Hard of Hearing Mentors (\$80,000/2 yrs & ongoing) - to teach sign language in the home to families of children with hearing loss.

5. Statewide Education EHDI Coordinator (\$80,000/2 yrs & ongoing) - To identify, support, and promote culturally appropriate and evidence-based early intervention practices for infants with hearing loss, and provide training, outreach, and use of technology to increase consistency in statewide service provision.

The long-term cost savings for the State of Minnesota combined with measurable results are nothing short of outstanding. Minnesota families are not the only ones to benefit.

Chatter across national list serves reference Minnesota's work as the one to follow:

- “It is the best legislation passed to date for newborn hearing and families” and “Minnesota has allocated funds for a variety of programs for people with hearing loss.
- Thought you would like to see what they have done – ideas for your own states...”

Mary spent many sleepless nights carefully researching and crafting legislation; preparing testimony; mobilizing collaborators and volunteers; and lobbying at the Capitol. Her commitment to this community is unprecedented.

Minnesota House Minority Leader Marty Seifert sums it up best by saying “Mary is a tenacious advocate who believes in the right cause with passion. There is no way that these initiatives would have passed without her direct involvement in moving them forward”.

The MN EHDI community would like the opportunity to demonstrate our profound appreciation for all that she has personally sacrificed for the greater good of the community. On behalf of many members of MN's EHDI community, please strongly consider her candidacy as the recipient of the Antonia Brancia Maxon Award for EHDI Excellence.

Nancy Hatfield

Nancy Hatfield, Ph.D., is the creative catalyst for effective Early Hearing Detection and Intervention (EHDI) programs in Washington State. In order to increase the number of early intervention providers who could serve children who are deaf or hard of hearing, Nancy's idea was to elevate the skills of early intervention providers by specifically raising their knowledge of working with these children and families. Her passion has been the driving force for successfully building and implementing the training statewide.

Nancy has:

- Developed an accessible and inclusive Early Intervention (EI) training model for Washington.
- Expanded the training program by 8-10 counties per year, to a total of 33 counties, including the Washington State Migrant Council and Tribal Health and Head Start. (There are 39 counties total.)
- Recruited specialists in several areas of the state to help create county flow charts of services, establish local EHDI task forces, distribute curriculum, and coordinate EI efforts across geographical and philosophical barriers.
- Developed content and lead:

- o a meeting with WA EHDI stakeholders to review the SKI-HI curriculum as the core for training and to identify additional topics and resources to augment the curriculum;

- o the "Pack Forest Institute", 4+ day in-depth training for pilot counties, including SKI-HI topics and involving volunteer families of children with hearing loss to hold model "home visits" for trainees; and

- o a 3 ½ day culminating statewide EHDI Summit with all the EI providers, agencies, public health staff, and hearing loss specialists across the state to update research and review the EHDI model.

- Built sustainability and capacity by conducting follow-up video-conferences on topics of interest, and identifying and leading a group of regional "coaches" who help to further train county EI providers.

Nancy is also involved in several EHDDI-related activities.

- Nancy actively served on the committee writing the Department of Health's *Best Practices Guidelines in Early Intervention for Children with Hearing Loss*.
- Provides training opportunities about EI for children with hearing loss at the annual Washington Infant and Early Childhood Conference.
- Plans and runs the birth to three strand at the annual Spring Family Weekend for families of children who deaf/HH.
- In fall of 2007, Nancy conducted 15 meetings to train staff at 7 regional service centers (RSC) for deaf/HH, funded by the Office of Deaf and Hard of Hearing Services. The RSC staffs were educated about EHDI and IDEA – Part C activities in their area so staff could provide appropriate referrals and support. RSC staff then met with EI providers in their counties to brainstorm collaborative ways to provide follow up and intervention. Nancy Hatfield works tirelessly to develop countless connections to see that infants/toddlers with hearing loss do not fall through the cracks. With her quiet, expert

leadership, the skills of service providers have been enhanced and the quality of service to children and families has increased.

No one in Washington State has been more instrumental in contributing to the effective implementation of EHDI programs than Nancy Hatfield.

Background Information on Nancy Hatfield, PhD.

Nancy Hatfield coordinates early childhood grants and projects related to hearing and vision at

Washington Sensory Disability Services (WSDS), co-directs the deaf-blind project, as well as functioning as administrative director of WSDS staff and grants based at Puget Sound ESD. Nancy holds a B.A. in Speech Pathology/ Audiology and a M.S. and Ph.D. in Education and Human Development.

Nancy's prior work experience includes early intervention services for families with infants and toddlers who are deaf, hard of hearing, and deaf-blind. She wrote grants for and directed Project

SIT-UPS (Sensory Impairment Training to Upgrade Professionals' Skills) and the Shared Reading

Video Outreach Project, an innovative program to develop literacy skills to children who are deaf/HH through the use of interactive video conferencing with a deaf adult.

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Hearts for Hearing

It is a privilege to recommend Hearts for Hearing of Oklahoma as a recipient of the Antonia Bracia Maxon Award. Hearts for Hearing is a progressive team of experienced hearing health professionals who believe that every child with hearing loss deserves the opportunity to listen and talk. As otologists, we have a collaborative partnership with the Hearts for Hearing team providing state of the art family centered services to babies with hearing loss and their families. Through the efforts of Hearts for Hearing, significant gains have been made to lower the average age of diagnosis, to fit amplification, and to begin early intervention services for children born in Oklahoma with hearing loss. This is in great part due to the creative service delivery model and the collaborative partnership Hearts for Hearing continues to establish.

Hearts for Hearing secured a legislated state appropriation through significant advocacy efforts to address the public health issue of childhood hearing loss. Through these efforts, elected Oklahoma officials, legislators, and policymakers continue to be aware of the importance of the Oklahoma EHDI program and the follow-up care necessary to address childhood hearing loss to maximize outcomes. With this annual legislated funding, Hearts for Hearing provides the initial set of state of the art digital hearing aids and FM system at no cost to any baby born with hearing loss in Oklahoma who does not otherwise have means to pay. Additionally, with the state appropriation monies, families who have chosen spoken language outcomes can qualify for scholarships for Hearts for Hearing intervention services such as audiological services, individual listening and spoken language therapy, parent-child classes, and oral deaf preschool tuition. As a result, Hearts for Hearing routinely fits hearing aids for babies at two to three weeks of age and intervention begins immediately. Hearts for Hearing has established a collaborative partnership with the state of Oklahoma Early Intervention Program to provide sedated and unsedated electrophysiological testing to follow-up to Universal Newborn Hearing Screenings as well as hearing evaluations of children already in an early intervention program. Hearts for Hearing audiologists have written best practice audiological protocols that have been adopted by the state EHDI program. Additionally through this collaborative partnership, Hearts for Hearing speech-language pathologists provide listening and spoken language early intervention therapy to over 80 babies/toddlers and their families qualifying for state early intervention services. The innovative service delivery model established by Hearts for Hearing delivers state of the art family centered comprehensive services to children with hearing loss that others around the world strive to emulate. The Hearts for Hearing multidisciplinary team humbly shares insights gained from their work with other professionals who travel to Hearts for Hearing as well as through many international lectures and publications to further excellence in EHDI programs.

The passion of the Hearts for Hearing team combined with their vision and pioneering spirit makes this nonprofit organization an excellent consideration for the Antonia Branca Maxon Award for EDHI Excellence. Thank you for your consideration.

Betty R. Vohr

Dr. Betty Vohr has been a pioneer and visionary in promoting effective Early Hearing Detection and Intervention (EHDI) programs for all newborns, infants, and young children. As a fellow colleague and close friend of Antonia “Toni” Brancia Maxon, Dr. Vohr is well deserving of this Award for EHDI Excellence in remembrance and honor of Antonia’s career achievements.

Dr. Vohr is presently Professor of Pediatrics, at Brown University School of Medicine and Director of the Neonatal Follow-up Clinic for Women and Infants' Hospital of Rhode Island.

She has a long and illustrious career conducting studies evaluating the neurodevelopmental, behavioral, and growth outcomes of high risk infants since 1974. In February 1990 Betty, along with Toni and other important contributors, established the Rhode Island Hearing Assessment Project (RIHAP) demonstrating for the first time the feasibility of successfully instituting and implementing universal newborn hearing screening on a large scale and dramatically reducing the age of identification for children with hearing loss. Since 1992 she has served as the Chairman of the Rhode Island Department of Health Hearing Advisory Committee. Since 1997 she has served as a Rhode Island representative with the Director of Speech and Hearing Programs in State Health and Welfare Agencies and from 1999 has served on the Rhode Island Department of Health Genetics Screening Advisory Committee.

As part of her national impact, Dr. Vohr has served as the American Academy of Pediatrics (AAP) delegate to the Joint Committee on Infant Hearing (JCIH) since 2000, serving as the Vice Chair from 2003 to 2004 and then as Chair from 2005 until the release of the 2007 JCIH Position Statement. Betty has served on the AAP Task Force on Improving the Effectiveness of Newborn Hearing Screening, Diagnosis and Intervention since 2002. She is a charter member of the U.S. Department of Health and Human Services Constituent Expert Working Group on Infants and Young Children with Hearing Loss.

She has extensively published primarily in the areas of hearing loss, high risk infant followup, and infants of diabetic mothers. At last count, her Curriculum Vitae listed over 140 original publications in peer-review journals, 30 review articles, and 430 national and international invited and accepted presentations. Her research related to EHDI include topics such as:

A multi-state study of the etiology of newborn hearing loss, risk factors for hearing loss, the medical home, referral rates and cost efficiency, the public health implications of EHDI, the impact of family health insurance, mediating factors on maternal stress, and the efficacy of the OAE/ABR protocol.

Dr. Vohr’s seemingly unending drive, boundless enthusiasm, and noteworthy accomplishments have led to improvements of EHDI programs on the local, state, national, and international levels and has significantly contributed to EHDI excellence. She is well deserving of this award.

Randi Winston

The EHDI community in Arizona would like to nominate Randi Winston, Au.D. for the Antonia Brancia Maxon Award for EHDI Excellence. Although Dr. Winston has contributed in innumerable ways to the EHDI programs both in Arizona and in other states, this nomination is specifically intended to acknowledge her leadership, creativity and dedication in the development of the universal newborn hearing screening (UNHS) training curriculum.

Dr. Winston has worked with the EAR Foundation of Arizona for more than ten years to provide technical assistance to hospital based screening programs to establish and maintain UNHS programs incorporating best practices. Through her efforts, Arizona was the only state to obtain voluntary screening of more than 95% of all newborn prior to any legislative efforts by 2003.

One of the variables in the quality of the screening programs, refer rates and loss to follow-up is the quality and consistency of the training provided to screeners. Learning to use the equipment effectively does not necessarily result in an effective screening program. Dr Winston found that the most effective programs were created when the screeners were trained in communicating effectively with parents and the medical home, had a basic understanding about how the screening worked, what the results meant, the importance and use of data, as well as an understanding of their role in the EHDI process.

The idea to create a standardized newborn hearing screening training curriculum occurred to Dr. Winston several years ago. She envisioned a training that would incorporate all of the components that go into not only a successful screening program, but also one which was efficient and incorporated best practices.

Dr. Winston saw that the best curriculum could only be developed with the input from literally hundreds of people in all aspects of EHDI across the country. The project has been a collaborative effort since it was initially presented at the National EHDI conference, March 2006. The process began with sharing the vision with an eager audience who clearly agreed with the need and completed a survey to help determine what should be included in the curriculum. From that momentous start she enlisted the help of the National Center for Hearing Assessment and Management to convene a panel of experts representing audiology, screening, state EHDI programs and nursing. This group worked for more than a year to develop a draft curriculum which was then reviewed by more than 70 individuals nationwide. These reviewers included screeners, coordinators, nurses, audiologists, State EHDI programs and others.

The curriculum is nearly complete and will be presented at the 2008 National EHDI conference. Pending final incorporation of the input from all of the reviewers, the curriculum will be widely available to ensure that training of those important screeners is consistent and provides a strong base for the rest of the EHDI process. We applaud Dr. Winston's efforts and consider her a fitting candidate for an award that carries Toni Maxon's name in honor of her tradition of excellence and dedication to the field.