WORK STATEMENT

I. BACKGROUND

The Department is administering a statewide Universal Newborn Hearing Screening and Intervention (UNHSI) program in accordance with the Pennsylvania Infant Hearing Education, Assessment, Reporting and Referral Act (11 P.S. §§ 876-1-876-9). Under this Act, the Department has the power and duty to establish a program, a component of which is a system to screen all newborns in this Commonwealth for hearing loss before leaving a hospital, to screen all newborns who are not born in a hospital within the first 30 days of life and to provide information and instruction to the parents of all newborns and infants on the merits of having the hearing screening performed and of receiving follow-up care. The purpose of the Act is consistent with the Healthy People 2010 objective on universal newborn hearing screening. During the first four years of operation, the UNHSI program has fulfilled initial program objectives in implementing universal newborn hearing screening, comprehensive follow-up and linkage to treatment and Early Intervention services.

II. SPECIFIC TASKS

A. The Contractor, under the direction of the Department, shall develop and implement education and outreach tools to inform Part C, Early Intervention providers (local service coordinators, provider staff, and selected early child care staff) on topics necessary to build their professional skills.

I. The Contractor shall develop and present training workshops to Part C, Early Intervention providers and others that focus on the importance of timely linkage to Early Intervention services consistent with the unique needs of each child, family preferences for treatment, and the utilization of local resources to meet the needs of the family as a whole. The Contractor shall utilize in-house staff to coordinate and facilitate the training workshops. Presenters at the training workshops shall include Contractor professional staff and subject matter experts/consultants. Subject matter experts/consultants who are not located within the Commonwealth are permitted to travel from out-of-state locations to the training workshop locations. The Contractor shall place emphasis in the training workshops on developing an understanding of all the different communication modes and options available so that choices can be explained to families in an unbiased manner. Each training workshop shall include a training evaluation which is to be completed by attendees at the end of the training session. The Contractor shall submit this evaluation to the Department for written approval prior to the start of training. The training workshops shall take the form of six regional meetings (one in each Department Health District). The
Contractor shall videotape at least one of the training workshops and make the video available on their website for later web streaming.

2. The Contractor shall update and increase the number of loaned resource material kits available to Part C, Early Intervention service coordinators, teachers, and others working with infants and toddlers identified with hearing loss. In each year of funding, the Contractor shall update existing kits and add to the number and diverse topics of these kits. Short term loan kits include: books, videos, and assorted curricula available on loan for six weeks or more.

3. The Contractor shall expand the scope of initial training efforts to include Early Intervention provider staff and selected early child care staff, with emphasis to include specific intervention strategies and curricula including: cochlear implantation, post-surgical habilitation, and strategies for success in coping with hearing loss. The Contractor shall open all training workshops to parents. The training workshops shall take the form of six regional meetings (one in each Department Health District). The Contractor shall videotape at least one of these training workshops and make the video available on their website for later web streaming.

4. The Contractor shall continue Early Intervention staff training as described above and include topics on supporting infants with mild and moderate hearing loss. The Contractor’s collaboration efforts with the Pennsylvania Chapter American Academy of Pediatrics shall emphasize understanding the role and practice of audiology and new amplification technologies in relation to Early Intervention service.

5. The Contractor shall complete the development of a web-based/multimedia training course that encompasses the topics covered in the live training workshops. The Contractor shall use both in-house staff and subcontractors to design, develop and post this training course on the Contractor’s website.

6. Acting through its 24 Community-Based Early Intervention consultants, the Contractor shall provide on-site follow-up support to service coordinators and providers through locally developed technical assistance plans. The Contractor shall conduct on-site follow-up activities in each of the three years following the professional development training workshops. The Contractor shall provide documentation of follow-up and monitoring efforts, in conjunction with the Contractor’s efforts connected to the PA Department of Public Welfare’s annual compliance monitoring of all local Early Intervention provider agencies. The Contractor shall address deficits identified during local monitoring and shall provide on-site technical assistance.

B. The Contractor, under the direction of the Department, shall provide support and appropriate information to families of young children with confirmed hearing loss.
1. The Contractor shall design and distribute a satisfaction survey for families of children with hearing loss enrolled in Early Intervention services. The Contractor shall submit the survey form to the Department for written approval before distribution to families. The Contractor shall design the survey form in conjunction with Department program staff and the other state/federally funded parent education programs in Pennsylvania. The Contractor shall use the completed surveys to assess whether parents were informed about the full range of communication options and linked with appropriate services and support.

2. The Contractor shall use the results of the family survey to prepare a parent resource guide that provides information on communication modalities, Early Intervention services, and family support options available.

3. The Contractor shall publish and distribute the parent resource guide. The Contractor shall use both in-house staff and subcontractors to design, develop and distribute the parent resource guide. The Contractor shall submit the parent resource guide to the Department for written approval before printing and distribution. The Contractor shall distribute the parent resource guide to pediatric and audiology practices in collaboration with the Pennsylvania Chapter American Academy of Pediatrics and the Pennsylvania Academy of Audiology.

4. The Contractor shall review and update the parent guide content and make a second distribution of the guide.

5. The Contractor shall conduct Summer Institutes on Hearing Loss in Infants/Toddlers for parents and Early Intervention staff. The Contractor shall provide 15 scholarships for parents to attend this Summer Institute in the first and second year of the Contract.

6. The Contractor shall develop an on-line accessible database in collaboration with the Pennsylvania Chapter American Academy of Pediatrics and the Pennsylvania Academy of Audiology that shall provide information about pediatric audiologists and physicians available to act as local resources. The Contractor shall identify this information by region and local area. The Contractor shall maintain and update this database, and shall make it available to parents and Part C, Early Intervention providers.

III. TIMELINES

A. By the end of year one the Contractor shall:

1. Develop and present training workshops to Part C, Early Intervention providers and others with emphasis on developing an understanding of all
the different communication modes and options available. The Contractor shall videotape at least one training workshop for later web streaming.

2. Develop tools to evaluate Contractor delivered training.

3. Commence monitoring the Part C, Early Intervention caseload that is contained in the Department of Public Welfare Early Intervention Reporting System (EIRS).

4. Design and distribute a satisfaction survey for families of children with hearing loss enrolled in Early Intervention services.

5. Prepare, produce and distribute a parent resource guide.

B. By the end of year two the Contractor shall:

1. Expand the scope of training efforts to include Early Intervention provider staff and selected early child care staff, with training emphasis to include specific intervention strategies and curricula.

2. Commence observation of service coordinator encounters and interactions with infants with hearing loss and their families.

3. Gather and evaluate different samples of Individualized Family Service Plans (IFSPs) from participants in Contractor provided training.

4. Develop an on-line accessible database that Early Intervention staff and parents shall access to identify pediatric audiologists and physicians available to act as local resources.

5. Conduct Summer Institutes on Hearing Loss in Infants/Toddlers for parents and Early Intervention staff and provide 15 scholarships for parents to attend the Summer Institute in years one and two of the Contract.

C. By the end of year three the Contractor shall:

1. Continue Early Intervention staff training and include topics on supporting infants with mild and moderate hearing loss.

2. Complete the development of a web-based/multimedia short course that encompasses the training topics covered in the live training programs.

3. Gather and evaluate different samples of IFSPs from participants in Contractor provided training.
4. Develop a summative evaluation of the overall effectiveness of professional training and development efforts during the three-year period.

5. Issue a report covering the three years of monitoring of the caseload that is contained in the Department of Public Welfare EIRS system.

6. Review and update the parent guide content and make a second distribution of the guide.

D. By the end of each year the Contractor shall:

1. Update and increase the number of loaned resource material kits available to Part C, Early Intervention service coordinators, teachers, and others working with infants and toddlers identified with hearing loss.

2. Provide on site follow-up support to service coordinators and providers through locally developed technical assistance plans.

IV. PROGRAM EVALUATION

A. The Contractor, under the direction of the Department, shall evaluate the outcomes of trainings provided to Early Intervention staff and others.

1. In year one, the Contractor, under direction of the Department, shall develop tools to evaluate Contractor delivered training through the observation of service coordinator repertoires and an analysis of the quality of Early Intervention IFSPs. Based on this evaluation, in year two the Contractor shall refine future trainings.

2. In year two, the Contractor shall commence observation and evaluation of a sample of service coordinator encounters and interactions with infants with hearing loss and their families. The Contractor shall review IFSPs to determine that children referred after audiological diagnostic evaluations receive needed services. In years two and three, the Contractor shall gather and evaluate two different samples of IFSPs from participants in the training workshops.

3. In year three, the Contractor shall continue evaluation activities described in sections one and two above.

B. The Contractor, under the direction of the Department, shall evaluate the progress of children enrolled in Part C, Early Intervention services.

1. By the end of year one, the Contractor shall commence monitoring the Part C, Early Intervention caseload that is contained in the Department of Public Welfare EIRS system and identified as having hearing loss or deafness. The Contractor shall document the number of children entering the Early Intervention System,
their age of referral, geographic distribution of referrals, the number of children exiting the system/or no longer in need of services, and the intervention stay times utilizing the statewide EIRS. The Contractor shall select a ten percent representative sample from the EIRS system and shall provide more detailed information and analysis from this sample including, but not limited to, whether these children passed newborn hearing screening, the children’s use of amplification and/or cochlear implants, their ages at diagnoses of hearing loss, types and severities of hearing loss, hearing status of their parents, presence/absence of multiple disabilities and the communication mode(s) chosen by their families.

2. In years two and three, the Contractor shall continue to monitor the EIRS data and implement a sampling process for caseload monitoring for infants with deafness or hearing loss in the EIRS system.

V. REPORTING REQUIREMENTS

A. Quarterly Reporting: The Contractor shall submit written quarterly status reports to the Department’s Newborn Hearing Screening Program Manager. The reports are due 45 calendar days after the end of each quarter. The reports shall provide a running summary of program activities for each task completed to-date with the current quarter’s report appearing below the prior quarter’s report.

B. Annual Reporting: The Contractor shall provide a written annual report to the Department’s Newborn Hearing Screening Program Manager. This report is due 45 calendar days after the end of each annual Contract period. The Contractor shall provide this report in a narrative format and shall include, at a minimum, the following information.

1. Summary of all trainings provided, including information on who presented at each session and a description of each presenter’s qualifications and background; a summary of information provided and a listing and description of materials distributed at each training session; a summary of participant information including how many attendees were at each training broken down by their professional background.

2. Information on how many scholarships were provided for the summer institutes.

3. Information on how many short-term loan kits were updated and what new information was added to the kits.

4. Information on how many Family Resource guides were printed and how many were distributed.
5. Description of activities related to the evaluation of referral data on infants identified with hearing loss through the Universal Newborn Hearing Screening and Intervention program and referred to Part C, Early Intervention services.