



Iowa Department of Public Health
Promoting and Protecting the Health of Iowans

Iowa Department of Public Health projects that enhanced:

- Early Hearing Detection & Intervention
- 1st Five
- Project Launch
- EA Professional Development: Screening and Assessment Tools
- Title V Service Coordination

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Funded by
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Agency	Project Title	Description	Funding Amount	Project Results
IDPH	EHDI Program Evaluation	<p>1 FTE hired to complete the following:</p> <ol style="list-style-type: none"> 1. Submit data for the CDC Hearing Screening and Follow-up Survey. 2. EHDI/IMS Data Match. 3. System level evaluation with input from parents, stakeholders, and partners of Iowa's EHDI System. 4. Submitted competitive application to CDC for iEHDI Grant. 	<p>See below for total *note: FTE hired by IDPH</p>	<ol style="list-style-type: none"> 1. A data analysis was completed that compared the data that was submitted to the CDC for 2008 and 2009. Although aggregate data, the survey shows how every state is doing in meeting the 1-3-6 goals, reducing the number of infants lost to follow up or documentation, and estimate the number of infants being diagnosed with a permanent hearing loss. When comparing the data submitted in Iowa's 2008 and 2009 CDC EHDI surveys, Iowa has shown great improvements in many areas. Summary of the report can be found at: http://www.idph.state.ia.us/iaehdi/common/pdf/news_fall11.pdf 2. A data match was completed between the EHDI program and the Department of Education's IMS hearing module data for infants born in 2009. This match allowed the EHDI program to identify the percentage of infants diagnosed with a hearing loss and enrolled in Early ACCESS and identify the completeness of data shared with the EHDI program. A report was submitted to Julie Curry on June 27, 2011. 3. A parent survey was written and distributed to parents of children born in a hospital or at home to assess their knowledge of newborn hearing screening and gather information about their experience with the newborn hearing screening and follow up process. In addition, the survey was mailed to parents of children with normal hearing and those diagnosed with a hearing loss. A preliminary report was provided to the EHDI Advisory Committee on October 6, 2011. 4. In July 2010 a proposal was submitted to CDC for the Individual Early Hearing Detection and Intervention (iEHDI) Database Project. Iowa's application was funded and the

				EHDI program continues to work on this project.
IDPH	EHDI Quarterly Reports	2 part-time interns were hired to complete and distribute Hospital Progress Reports	See below for total *note: interns were hired through contract with U of I.	EHDI staff worked with a small workgroup of hospital nursing staff to develop a hospital progress report that began being distributed to each birthing facility quarterly starting in 2011. The purpose of these reports is to improve data entry errors made by hospital staff, improve the quality of the EHDI data and provide hearing outcomes data to the front line hospital staff.
IDPH	EHDI Short-Term Follow-Up Coordinator	1 FTE hired to complete short term follow up to assure that children who miss or do not pass their newborn hearing screen get a rescreen by 1 month of age, diagnostic testing by 3 months of age and referral to Early ACCESS by 6 months of age.	See below for total *note: FTE hired by IDPH	January 1, 2011 The Iowa Department of Public Health (IDPH) EHDI program began focusing on short term follow up. In January IDPH began piloting new short term follow up processes; IDPH begins follow up 2-4 weeks following birth and makes phone calls directly to families and primary care providers. Approximately 250-300 phone calls are made each month. This new process has decreased the EHDI lost to follow up rate.
IDPH	1 st Five Intern	1 FTE hired to assist 1 st Five State Coordinator	Total for ALL personnel = \$106,010.24 *note: hired by IDPH	In December 2010 intern started with 1 st Five to assist the 1 st Five State Coordinator. Intern assisted with developing tools for 1 st Five sites, coordinating trainings and medical consultation. Intern also led the work of the ACE Study Workgroup. The ACE questions are going to be implemented in the state BRFS.
IDPH	Early Detection and Intervention Screening Equipment	Purchase two AABR Vivosonic Aurix™ Hearing Screening systems for the loaner bank and deliver a hearing screening system to Trinity Regional, Fort Dodge and Ottumwa Regional Health Center.	\$38,000.00	Two Vivosonic Aurix™ Hearing Screening systems were purchased for the University of Iowa loaner bank. The hearing screening systems have been delivered and training has been provided to Trinity Regional, Fort Dodge and Ottumwa Regional Health Center. U of I will provide technical assistance, as needed, to Trinity Regional, Fort Dodge and Ottumwa Regional Health Center on equipment, EHDI protocols, eSP reporting and follow up for children who do not pass their newborn hearing screen or outpatient hearing rescreen. U of I will also monitor miss/refer and follow up rates in eSP to evaluate performance and compliance by Trinity Regional and Ottumwa Regional with JCIH recommendations and EHDI protocols. The hearing system includes the following: Aurix link, laptop computer, sound stimulator, cart, card accessories, system carrying case and label printer.

IDPH	EHDI System Enhancements, License and Hosting.	Enhancements to eSP™ (EHDI database) purchased to improve the efficiency, use and functions of database. Purchased annual eSP™ License and OZ Hosting Fee.	\$121,725.00	<p>The following items were purchased and delivered:</p> <ul style="list-style-type: none"> • eSP™ Application License. • OZ Systems to host the Iowa eSP application- includes migration of database from IDPH to OZ Systems, and development of token interface. • Merge at the State Functionality Description: Allows state level users to merge patient data across hospitals at the state entity. Rules have been created in order to accommodate merging across facilities that cannot access each other's data. • De-Duplication Tool Description: This tool provides users a periodic report by which they can view possible duplicate records and reconcile their data for accuracy. This is not a report of duplicates, but rather a report of duplicates created within a configurable timeframe that have not been previously reported. Reports are created on a configurable periodic bases; the report can be run monthly, quarterly, or as configured based on customer feedback. The report includes patient data within a configurable timeframe, for example, 180-day comparison. No user intervention will be required to run the report. Users will be able to download all newly created and previously created reports via eSP™. • Compliance Report with Modifications (Facility Report). • Modified diagnostic report (includes amplification and intervention columns and a new risk factor tab. • Hearing case notes- documents who entered the hearing exam and when they were entered (quality assurance measure for hospitals). • Letters Hide Functionality Description: Hides old versions of the letter that are no longer used in the letters library which ensures database users do not use old letters. • Mother's education and race information- included to meet
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IDPH	1 st Five: Implementation Site	Black Hawk Implementation	\$60,000.00	<p>Purpose of contract with Black Hawk Health Department is to develop effective strategies and relationships with primary care providers, community based agencies, and referral sources to support children's healthy mental development. Overall project goal: increase the percentage of young children who receive appropriate developmental screenings from their primary care providers.</p> <p>1st Five was successful in developing relationships with four practices, these practices are now 1st Five partners and have integrated the CHDR questions into their well-child assessments. Three providers from the one of physician practices have begun piloting the use of the ASQ and ASQ: SE with all well-child checks rather than surveillance.</p>
IDPH	1 st Five: Medical Consultation	Contracted with a Pediatrician and a Family Practice Doctor to provide consultation to 1 st Five participating practices.	\$81,090.36	Pediatrician and Family Practice Doctors working with both 1 st Five Implementation and Sustainability programs to develop relationships, provided trainings, and discuss integrating developmental screenings in physician practices.
IDPH	1 st Five	Expand 1 st Five Activities in current sites.	\$13,056.85	Provided additional funds to existing 1 st Five sites to support sustainability with primary care providers to promote healthy mental development and increase developmental surveillance and screening in practices. Also utilized ARRA funds to provide two MCH agencies funds to provide enhanced care coordination consistent with 1 st Five protocols, and complete care coordination for referrals from primary care providers.
IDPH	Developmental Education Materials	Purchased developmental education materials for Title V MCH Service Coordinators and for Project LAUNCH.	<p>\$1876.40 (HELP)</p> <p>\$2,000.00 (Zero-Three)</p>	<p>HELP.....at Home (0-3) by VORT Corporation in English and Spanish was purchased for Title V MCH Service Coordinators to provide them with parent education materials. HELP...at Home contains 535 reproducible handouts that encourage, support and facilitate developmental skills and provides anticipatory guidance.</p> <p>Zero-Three Behavior Has Meaning Wheels were purchased for Project LAUNCH. The wheels provide information on challenging behaviors and offer 3-step approach to understand and manage behaviors such as biting and tantrums effectively.</p>

IDPH	Developmental Screening and Assessment	Purchased developmental screening tools for Title V Agencies, Maternal, Infant, and Early Childhood Home Visiting Program, HOPES, and 1 st Five. Purchased development assessment tools for Title V MCH agencies.	\$15,646.72 (ASQ) \$5,332.50 (DAYC)	ASQ and ASQ: SE in English and Spanish were provided to the pilot sites implementing home visitation under the Maternal, Infant, and Early Childhood Home Visiting Program. ASQ and ASQ: SE in English and Spanish were also provided to 1 st Five, HOPES and new Title V MCH Grantees. DAYC tools were purchased for new Title V MCH Grantees and additional DAYC scoring sheets were purchased and provided to all Title V MCH Grantees.
IDPH	Reimburse for Service Coordination	Title V agencies were reimbursed for Early ACCESS service coordination activities that were non-reimbursable.	\$4304.00	During October 1, 2010 through July 31, 2011 provided funds to six Title V agencies for service coordination activities that were completed and were not reimbursable by Medicaid.
IDPH	Technology Stipends	Title V agencies were given the opportunity to request up to \$800 per agency to purchase a laptop.	\$3893.63	Five Title V MCH agencies requested funds to purchase Early ACCESS Service Coordinator a laptop- this assists SC being able to complete IFSP on the new online system.
IDPH	DAYC	Provide DAYC trainings to Early ACCESS Providers	\$1900.00 *contract	Two DAYC trainings were held, both in the Des Moines area. Individuals from AEAs, CHSC, and IDPH attended the trainings. Renee Larson and ESCE Teacher from AEA 1 conducted the trainings and 54 individuals were trained.
IDPH	Online Training	Online training for DAYC Tool	No cost to ARRA	IDPH Early ACCESS Liaison worked with ISU Extension office to create an online training on the DAYC Evaluation Tool. No ARRA funds were exchanged as the Bureau of Family Health ended up using Title V dollars to pay for the services. Training was completed and posted online September 29, 2011.
IDPH	2010 Iowa Child and Family Household Health Survey	Early Childhood questions asked in the 2010 Household Health Survey	\$5,000.00 *contract	Funds were given to U of I to include social emotional and certain early childhood questions into the 2010 Survey and for data to be analyzed and report developed. A certain set of questions were asked of families with 0-3 year olds, such as: Any concern regarding child's behavior, learning, any developmental problems, are they enrolled in Early ACCESS. An early childhood specific report from this survey project is scheduled to be completed in the summer of 2012.