<u>NCHAM</u> Integrating Text4baby Into EHDI Programs to Improve Maternal and Infant Health <u>Wednesday, October 26, 2016</u> <u>1:15 p.m. Eastern Time</u>

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>> So for those who have joined us, we have a number of you who are conscientious participants, and we like to see that of course. You can adjust the volumes to your liking. As a participant today, you don't need to worry about being mic'd. You will have an opportunity to communicate with our presenters through a text field that will be displaying once our presenters have completed a formal portion of the presentation. So for now, just settle in and get the volume adjusted to your liking and we'll be set to go.

And so that you have an opportunity to do that, we'll do a quick audio check with everybody just to make sure you are in fact receiving an audio signal today. Today's webinar is brought to you by the National Center for Hearing Assessment and Management at Utah State University, which serves as a national resource center on early hearing detection and intervention. Thanks for giving your feedback that you are in fact receiving the audio transmission.

All right. Thanks for that reassurance. It's always good to know that our audio signal is coming through. So we'll be starting at the bottom of the hour in about 11 minutes from now. So we have a few minutes to just wait until we get started. I'm going to mute my phone now and I invite our other presenters to do the same. And we'll check back in, in another five minutes.

(Standing by)

>> If you have just joined today's webinar, we'll be starting at the bottom of the hour. Today's webinar is brought to you by the National Center for Hearing Assessment and Management at Utah State University. And our topic today is integrating Text4Baby into EHDI programs. You can adjust the volume settings on your headphone or speaker

settings on your computer. You don't have to worry about being Miked today. You can communicate through a text field once the presenters have completed their portion of the presentation. So for now, just get the volume to your liking. We'll be starting at the bottom of the hour, which is in about seven minutes. And just to make sure you're actually receiving this audio transmission, go ahead and give us your feedback that in fact you are. Once again, this webinar is being brought to you by the National Center for Hearing Assessment and Management, also known as NCHAM, at Utah State University. It serves as a resource center on Early Hearing Detection & Intervention. Thank you for your feedback. It's always reassuring to know that our audio signal is coming through to those of you who signed on. That's what we needed to know. And once again, we'll be starting at the bottom of the hour. Since people are signing on a fairly rapid pace right now, I want to give everybody a chance to get their volume settings to where they like them. And once again, you have reached today's webinar that's brought to you by the National Center for Hearing Assessment and Management at Utah State University. Today's webinar is entitled Integrating Text4Baby into EHDI Programs.

For those of you who have signed on earlier, we appreciate that. And I want to let you know you don't have to worry about being mic'd today yourself. So for now, just get the volume settings on your computer speaker or headset volume settings adjusted to your liking and we'll get ready to go. We'll be getting started at the bottom of the hour. To make sure that everybody has established or maintained their audio signal, I am going to start a music track right now that is going to be playing. And it will start in about five seconds from now. So it might be a slightly different volume from my voice. So be ready to adjust your volume settings just in case it's a little bit louder than you were expecting. So in about three seconds I'll be turning that on.

(Music)

And for our presenters, if your speakers are turned off, you will not be hearing that music, so don't worry. It will only be coming through your speakers. And your speakers should be turned off, otherwise you'll get a reverb.

(Music)

(Silence)

(Standing by)

>> PHONE: Audio recording for this meeting has begun.

(No audio, standing by)

>> We're having an audio problem here. So let's see. It sounds like I'm coming through okay. Kathy, I'm not hearing you --

Now I am.

>> Kathy: I thought you were going to start off with some instructions for the audience.

>> You know what, I did that, but it apparently didn't get conveyed. I'll start over. I want to welcome everyone to today's webinar brought to you by NCHAM and Utah State University. It's entitled Integrating Text4Baby into the EHDI programs. I want to let everybody know that you'll have an opportunity to raise questions or make comments. Once our presenters have wrapped up their formal presentation, I'll be revealing a text field through which you can communicate your questions. But until then, let's hear from our presenters on this topic on integrating Text4Baby into EHDI programs. Kathy?

>> Kathy: Thanks, Will. Welcome everyone. This is an exciting opportunity to talk about integrating Text4Baby into state EHDI programs. I saw the poll in the beginning. It looks like we have a nice blend of EHDI programs, a few parents, and some early childhood coordinators.

And most are either not familiar or a little bit familiar with Text4Baby. So we're going to hopefully meet your goals today.

My name is Kathy Watters, and I'm very excited to be here today. Newborn screening and followup is very dear to my heart. About 25 years ago when I was the Title V director in Colorado, I was credited with starting the process of implementing newborn hearing screening and followup there with some other people. I'm excited to be here today and continuing this important work.

I wanted to let you know also that from 2011-2016, I worked at the Maternal And Child Health Bureau, so I had the ability to work with newborn screening there. And I've been at Voxiva incorporated for almost 10 months. And my charge here is to integrate this digital communication technology into state systems.

I am joined today by one of my favorite colleagues, Erin Bonzon. Do you want to introduce yourself?

>> Hi everyone. I'm very familiar with Title V and your state programming and look forward to telling you all more about Text4Baby today.

>> KATHY WATTERS: Thanks Erin. Our agenda today will be to give you an overview of Text4Baby. We're going to look at the messages a bit. Erin will talk about outreach partners and how to become an outreach partner. She'll talk a little bit about impact and analytics of Text4Baby. And then we'll wrap up with thinking about how we can enroll through EHDI programs, enroll in Text4Baby and next steps.

Our objectives for today are that we help you to understand better the Text4Baby program. It's a fairly complicated program and I want to give you some details. To identify enrollment and benefits to women and infants, to understand the potential benefits to EHDI programs, and to brainstorm ideas for us working together in the future.

I wanted to start with in our overview of Text4Baby just about the program structure. Text4Baby is managed and led by two partner organizations. Zero to Three, a non-profit organization that has a tremendous expertise in early childhood development. And Voxiva is a company that specializes in digital health communication technology. We have very complementary roles in both of those organizations. Zero to Three is responsible for public outreach, educational content, and translation, support of community-based partners. And Voxiva is responsible for product and technology development, for mass enrollment processes that I'll talk about a little bit later, and integration with health plans, MCOs, HMOs, and health systems.

The Text4Baby product, for those who don't know, Text4Baby was created in 2010 and is the largest free mobile health initiative in the nation to provide information and improve the health of women and infants. So again, largest free and another unique aspect of this product is that it provides a mobile app, as well as text messages. And you'll see on this diagram that we also have a website and we have a lot of partners that have provided, and universities, that have provided different types of evaluation for us. And Erin will talk a little bit about those evaluations and the impact of Text4Baby a few slides from now.

A lot of people call me and ask about other digital communication services. And there are many apps out there, but not many that have had this long of a run that provides both the app and text messages.

Here's just a little bit more about the Text4Baby app. It's just undergone some really nice developments. And you can actually while you're listening to this presentation, you can even go into the app store on your phone and download the free Text4Baby app. And you'll be asked, you can have a pretend pregnant and a pretend baby. They'll ask you to plug in your due date and plug in your baby's birthday. There will be information that is timed to that date. Go ahead and try that if you haven't already experienced the Text4Baby app. It has a lot of nice features in terms of tracking immunizations and tracking appointments and plugging in reminders. The vaccination tracker is a new feature that people really like, especially in that first year. It's really hard to keep track of everything. Schedule immunizations and other doctor's appointments are really nice. And then there's an article library that's new on the Text4Baby app, as well. So I wanted to talk a little bit about the text messages just in general. But I wanted to digress just a little bit. Many of you have heard about medical home, team approach to care, and I really believe that Text4Baby messages really help women who are pregnant or have new babies to be empowered, to be a part of that medical home team approach to care

by giving them information and empowering them. And no matter what the income level, educational level, social stressors that women might be experiencing, these text messages can be very empowering. They are private. They're non-judgmental and they seem to be just a great tool to engage women and teach them about the kinds of things that they need to know, but also give them topics that they can talk to their health professionals about.

So again, it's just an education program, but to me it goes beyond that. It's very empowering, especially for those that are the most disenfranchised. (Phone ringing)

The tailor text messages. There are three per week. The content is again timed to the baby's due date. It's available in English and in Spanish. It links to resources in addition to web content. So again, a nice, rich, educational program.

In the pregnancy realm, there are areas of preventive health, prenatal care, preparing for birth and parenting, and here is where the hearing, screening, and follow-up information falls in. The reminders for diagnostics and questions to ask the healthcare provider. It also provides wellness and nutrition information in baby's growth and development. And in the new mom realm, information is provided on post partum care. And this, we really know that post-partum care is very important and it gets overlooked many times, but post-partum care is very important for many different reasons. Preventive health for baby and mom. Reminders about diagnostics and why you need to get in and talk to your doctor about your baby's hearing test results. Nutrition, breastfeeding, and wellness, baby's development and milestones and parenting tips are all the messages that are sent out to moms are in these categorical areas.

So now I'm going to hand it over to Erin to go through some more details about the Text4Baby messages. Erin?

>> Erin Bonzon: Thanks, Kathy. I'm sure everyone wants to know what those messages look like. So Text4Baby, we work with experts from a number of federal agencies and maternal and child health experts and other subject matter experts to make sure our messages and our content is not only 100% medically accurate, but is also in the most plain language possible so that it resonates with our users and we also work hard to make sure that the timing of these messages is as effective as possible.

So here what you see on this slide are some examples of our messages that a mom received while she's pregnant. They're within character limit. They may include links for additional information. If she wants extra info, she can find more information there. For our pregnancy messaging, we have messages around prenatal care, nutrition and wellness, and vaccines.

And then once the mom has the baby, she will communicate with the service to let us know that she's had the baby, and then she starts getting new baby messages. And these, everything from post-partum care to baby's health and development, nutrition and

wellness, and again vaccines.

And I'm sure everyone is interested here on this call today about the hearing messages. So again, I've put them up on this slide for you all to take a look at. And there is messages that happen in the pregnancy period as well as the new baby period at weeks three and 14 of new baby. Reminding moms about the hearing test and followup. I'll leave that slide up for just a minute.

I know you're probably interested in seeing these.

Okay. And Text4Baby is not just one way communication with mom. It's not just we send out a text message and mom reads it, we interact with moms by asking simple questions. So a mom's answer would prompt a more tailored educational message back. We remind mom about the importance of a prenatal visit, and we're able to identify moms at risk for a subsequent pre-term birth. These topics on the slide are just topics that we ask mom about and gather more information.

So to walk you through one example of this interactive messaging, this message identifies the health insurance status of Text4Baby participants, and connects uninsured moms to coverage information. So the question that gets sent what type of health insurance do they have, if they answer none, then we'll tell them how to apply. Then a week later we'll ask if they were able to apply for free or low-cost health insurance, which is Medicaid. We have recently updated this set of interactive messages, and now we're asking mom about their insurance coverage after they deliver baby, as well.

And again, this is another example of our interactive messaging with asking moms about their prenatal visit early on in pregnancy. They'll get this message approximately three days after they sign up for Text4Baby.

Speaking of appointment reminders, Text4Baby offers a free appointment reminder service. I think of this as a personal assistant in your pocket. We have found that these reminders improve appointment adherence. All a participant does is set the word remind or in Spanish, and they're given a reminder for their appointments. They're prenatal appointments or WIC appointments or really anything. It's a great feature of the service.

And Kathy wanted me to talk a little bit about outreach with you all. That is what makes Text4Baby so successful is our outreach and our partnerships across the country. We have recently enrolled, since the program inception, we have enrolled over 1 million moms in the service. And we couldn't have done this without our outreach partners in all states and territories. We have over 1400 outreach partners. And these outreach partners are responsible for 80% and more of enrollment. So they're the ones, you know, that they see in clinic or that they interact with in the community, in the programming that they deliver and they are the ones promoting Text4Baby and encouraging moms to sign up.

Partnership has its benefits. And outreach partners have access to materials, which can be cobranded with your agency's information. They have access to a data portal to track enrollment efforts and opportunities to learn from each other. We have a great tool kit that highlights best practices, lessons learned, and effective outreach strategies. I encourage you all to visit the website there or get in touch with me. We would love to have you on board as an outreach partner.

And surveillance. A lot of our partners are using Text4Baby as a surveillance tool, especially at the state health department level. As I mentioned, we have launched multiple interactive modules for messages on specific health topics. The goal there is to try to improve engagement and in some areas affect behavior in key areas. We have included questions that are modeled off of established surveillance instruments in the field such as PRAMS. This slide provides an overview of the data we have collected to date that could be used for surveillance. Response rates range from 25-50% depending on timing and topic.

And finally, to close this portion out and, you know, everyone asks about impact and efficacy, what do we know about Text4Baby. We will have some good data from both internal and external sources that we are reaching our target population and that the program is well received. In terms of knowledge and behavior change, we know from two separate studies that we are having an impact on knowledge of specific health topics. We know that Text4Baby moms are more likely to believe that they are prepared to be new moms. And in terms of behavior change, we have some more work to do here. But we have some good data that suggests that we're making an impact, related to flu vaccines and post partum alcohol consumption.

For those who would like more information, the heading there, that's clickable, and you'll be able to see the a more comprehensive summary of our evidence to date.

Kathy, turning it back to you.

>> KATHY WATTERS: Great. Thanks Erin. The impact of Text4Baby is very exciting. The interactive modules and looking at health behavior change is really, really exciting. Again, unique to Text4Baby. We have lots of developments to do, lots more to study, as more and more people get enrolled. But we really see Text4Baby as making a big impact because it is an easy, popular way to engage pregnant women and new moms. So thanks for that Erin.

So how do women get enrolled in Text4Baby? There's basically four different ways. And you can try this out yourself. The self-enrollment is very simple. You would type in 511411 and text the word "baby" or "bebe" for Spanish. And a message would pop up and it would say welcome to Text4Baby, what is your due date or your baby's birth date? And then once you plug that in, then you'll start getting those three educational messages per week. Another way to enroll in Text4Baby is to go download the app from the Apple store. It's a free app and you can type in your phone number and your text messages will also be coordinated with your app enrollment.

Another way to enroll is through partner enrollment that Erin just talked about. Zero to Three does an excellent job in their outreach and enrollment and helps communities, programs, clinics, helps all our partners, which is the big success of Text4Baby with materials and how to enroll. And there are many campaigns that we have seen. And working with Zero to Three has been very successful for states and communities

The final means of enrollment is through text invitations. And this is a development that just really happened at the end of 2015. Voxiva works a lot with covered entities like providers, hospitals, but mostly managed care organizations. And some state Medicaid agencies. And those covered entities who have personal health information with people. More and more we've been setting up business associate agreements and data use agreements under HIPAA laws to send a secure file of names, not names, a secure files of phone numbers to Voxiva. And we will send out text invitations to sign up for Text4Baby. So it will say depending on who we're working with and what part of the state, or if it's through a managed care organization or not, it might say hey, you know, your managed care organization is now working with Text4Baby. It's a free service to you, provides health information, sign up now.

And we have found and AMCIP's Innovation Station has a writeup from the state of Oklahoma, who has been very successful in sending broadcast invitation to moms across Oklahoma. I think at this point Oklahoma is close to enrolling 15% of pregnant women and new moms across the state of Oklahoma. So to read the details of how a state went through sending Voxiva files of phone numbers and broadcasting these invitations to them, you can learn more by going to the Innovation Station site.

And I can answer questions after the call about that. And some of our other work with Medicaid and managed care.

So now we've come to the best part of the webinar today and that is to stop and see if you have any questions about the Text4Baby program. It is exciting. And it's complicated. It has lots of different aspects to it compared to other programs. And if we could answer any questions at this point, we would love to. And with hopefully a little more information now about Text4Baby, we wanted to brainstorm with you through the chatbox, through the question and answer box how are you using Text4Baby already if you're an EHDI program employee, if you work in a hospital, if you're an early childhood provider. We want to kind of stop and start to brainstorm.

>> WILLIAM EISERMAN: Great. This is Will from NCHAM. I've revealed the Q&A box on the left there where you can type in your question or comment. And our presenters are graciously offering to do their best to respond. The first is I've tried to get into the app and it won't accept my e-mail. I've tried both personal and work e-mail. Do you have any advice about that?

>> KATHY WATTERS: I think it asks for your phone number, correct Erin?

>> WILLIAM EISERMAN: I think you may be muted.

>> Erin Bonzon: It's been a while. I have the app on my phone, but I don't recall the registration process.

>> KATHY WATTERS: I think it asks for your phone number. Why don't you try that.

>> WILLIAM EISERMAN: Anna is responding saying it asked for an e-mail.

>> Erin Bonzon: Maybe Kathy you can follow up with her if you grab her contact info. It was recently updated so maybe there is a little glitch in there.

>> KATHY WATTERS: Will, they can see our names, e-mails, and phone numbers. Ann, please follow up with me after the call and we'll see if we can't troubleshoot.

>> WILLIAM EISERMAN: You'll see on the left our presenters' e-mails and phone numbers are over there and they're offering to take questions after today's webinar is completed, as well.

The next question is we don't currently use Text4Baby, but I'm wondering if there is any CMV information in it. That's cytomeglovirus.

>> KATHY WATTERS: I don't believe there is any cytomeglovirus information. NCHAM and I had a conversation, and before we started at Voxiva, there was communication with Voxiva and Zero to Three about information that they would like to see included in Text4Baby. And we're always interested in getting feedback and information from the experts in the field about annually I guess there is a review of all the messages to keep up to date. But to my knowledge there is nothing about cytomeglovirus. However, we do want women to get in for their prenatal visits and we want new moms to get in for their doctor visits and make sure they ask questions about their health and their risks and, you know, that would be the angle on addressing and receiving information about CMV.

>> WILLIAM EISERMAN: So we have another question. If another public health program is using Text4Baby, does EHDI need to enroll as another partner to get EHDI messages to parents?

>> KATHY WATTERS: Erin, you want to answer that?

>> WILLIAM EISERMAN: Erin, I think you may be muted.

>> ERIN: So enrolling as an outreach partner is very simple. I apologize if I made it sound complicated. It's simply agreeing to promote Text4Baby and to utilize the free promotional materials and the technical assistance and resources that Zero to Three

has to offer. So if Text4Baby is being implemented, say for example at the WIC clinic, it can also be implemented through the health department or through the EHDI program or any venue that touches moms and babies is appropriate to promote Text4Baby and promote its use with the moms that you interact with.

We have, you know, in any given state, we have hundreds of partners that we consider outreach partners. So they are working to promote and implement Text4Baby within the moms and families that they serve. Did that answer the question? Or is there more clarification needed?

>> WILLIAM EISERMAN: It sounded good to me. We have another question. Janet DeGeorges is thanking you for the question and is saying does Text4Baby have any model for parent-to-parent support and could this be used for those purposes?

>> KATHY WATTERS: Hi Janet. It's been a long time. Thanks for your question. No. That's a really good question. And it would be a really great feature of Text4Baby to connect parents with other parents. I will be talking in a few minutes about some of the other products that we're trying to build at Voxiva. Building upon Text4Baby, this free service that we really want people to experience the benefits of text messaging, particularly in pregnancy and in infancy. But there's so much more that that technology can do. And Voxiva is really trying to work hard to develop products that are more interactive that can build upon these educational messages. As you can imagine, everything we want to do, everything that supports our programs probably can't be worked into one program, but we can have a good foundational program of information, one that engages women, one that helps them engage better in their healthcare. And then we're working on other products that are more interactive and can actually send text messages back and forth and are not as much one way and filling out these interactive surveys. But once we get to that point where we can be more interactive and act kind of more as like care managers or care coordinators, that's when we have, that's when I think the world opens up to connecting women to more and more services in their communities, including parent and family-to-family kinds of services. But right now it's not involved in this text messaging program.

I did want to add one other thing. And what your question has, an idea that your question has prompted in me. Even though this is text messaging in the hands of moms, and we can do some enrollment that's pretty efficient and effective, this technology does not replace the human contact. So this is a tool for families and providers, for screeners, for primary care providers. It's a tool for them to use to enhance their connection with people, with women, and new moms. So the tool itself can't do everything, but we wanted today brainstorm a little bit about how could the wonderful personnel, the great, great family Hands & Voices leadership, and the great EHDI programs, how can you use Text4Baby to make the lives of women and infants better and to engage moms so that you can give them all the other resources that are not inherent in the tool itself. That was a long answer, but thanks for the question.

>> WILLIAM EISERMAN: We have a question asking for some clarification. Am I understanding this correctly that partners could customize content and that includes the customized responses? So we could maybe have a did your baby past their hearing screening with a customized response. If not, schedule your follow-up now?

>> ERIN: Kathy, do you want to I guess maybe talk about the work that we've been able to do with customization and how that worked with certain states and what that might look like going forward.

>> KATHY WATTERS: Right. Thanks, Erin. Let me try to answer that guestion as simply as possible. We have Zero to Three and Voxiva in the last few years have worked with state health departments' various programs to customize some of the messages in the Text4Baby program with state or county-specific resources. And to send out on a monthly basis some broadcast, ad hoc broadcast messages that might have something like "don't forget about your hearing screening" or, you know, to all Text4Baby users "it's important to follow up on your screening results with your doctor." So we've done some customization. And these ad hoc broadcasts with some states. And that's worked really well. But as I was saying before, that may not even be sufficient to really tackle this lost to followup issue that newborn hearing screening programs have. And that's where I think we need your creativity. How do we use this tool to engage women and to get all the important, you know, additional information out to them. We can consider, you know, with an EHDI program customizing messages and sending out these ad hoc broadcasts. But I think we would love to work with states and EHDI programs to think even beyond that and maybe think down the road about how more interactive technology might even be more effective.

>> WILLIAM EISERMAN: We've got a number of questions coming in. I'll try to help us move through these. The next is I really like the appointment reminder feature. Do you know what percentage of subscribers use this feature?

>> ERIN: I'll take that, but back to the customizable, the customizing of the agency resources and branding, that is something that we can definitely still do and that outreach partners can do.

Okay, back to remind feature, I've been chatting on the side here with our research expert here. That is a complicated question. What we do know is that the remind feature itself, just strictly the remind feature, we implement that had in 2012. So remember the service was launched in 2010. So in 2012 we add that had feature. And what we do know is since then approximately 150,000 reminders have been set up. Now I'm not sure how to get in with that number with unique numbers. I think that's just the number of reminders that have been set up by the user. There was also a study, a data analysis that we did back in 2013. And that brought us in on all reminders sent during a period of time of March of 2013 and September of 2013. And that was 5%. That was just the reminder feature. Now a lot of our interactive modules have the opportunity, too, to set up certain things like visits. We've updated our messaging. So

now participants with respond directly to messages that they receive instead of reminders. It's a lot more user friendly and we expect the usage of this feature to be a lot higher than 5%. Do you want to set up a reminder for your well baby visit. Reply with dates. It's more interactive and user friendly and it's a great tool to use especially if you're seeing moms and interacting with moms, it's a super great feature.

>> WILLIAM EISERMAN: There's a couple of additional customization-related questions. One is what is the cost to partners for customizing information?

>> KATHY WATTERS: Erin, why don't you start with what Zero to Three can do to help with state resources and then I can follow up with what we've done with custom contracts.

>> ERIN: Becoming a Text4Baby outreach partner is absolutely free and we're here to help support your efforts. If you would liketous come give a talk, give a training, send you free materials to use, that is absolutely free and no cost to do that.

>> WILLIAM EISERMAN: And somebody related to that question has asked how do we find out who else in our state may already be a partner?

>> ERIN: That's a great question and I'm happy to pull that information for you. Whoever asked that question, if you could type your state into the chat box and I can pull a list of partners and follow up with you after today's webinar.

>> KATHY WATTERS: And then I'll answer that other part of that other question. I'm sorry. We do collect that data for who all the partners are. And I think that's really, really important. And I wanted to answer that other, the second part of that question on customization. I think we should start, if you're interested in customization, our premium contracts right now have a setup fee of about \$15-20,000 and then a \$50,000 annual fee to customize the messages, to send out the broadcast and provide some of the data to you. So that's a rough estimate of a custom contract. But before we would enter into that contract, we would really want to have a conversation and make sure that you know who your partners are already, if there is any collaboration across partners, and particularly if your state Medicaid or your managed care organizations are already enrolling women and new moms into Text4Baby. We would want to know that, too. You know, rather than to create a project sort of in isolation. So all of this sort of does work together. And in hopes of meeting your state-specific needs.

>> WILLIAM EISERMAN: It looks like a number of people are interested in knowing about their state partners. We have participants today from Alaska, Louisiana, Michigan at the very least who would like that information. Perhaps we can. And Idaho. And perhaps we could. And Kentucky. Thank you Kathy. Who are interested in getting that information. Perhaps the best thing to do would be for them to reach out to you directly to learn about that. Does that make sense Erin?

>> ERIN: Yes, certainly. If you all can see my contact information in the upper left-hand corner. They can see that, right?

>> WILLIAM EISERMAN: Yes, and I'll be making it even bigger as we get to the end of our session today.

>> ERIN: Yes, happy to pull partners for you.

>> WILLIAM EISERMAN: Are the messages in Text4Baby a customizable to allow for inclusion of additional EHDI-related content. I think you kind of addressed that, but do you have anything more to say about that?

>> KATHY WATTERS: Well there are certain messages that you can plug in state-specific names, programs names, and state-specific resources. So not really changing the content of the message itself, but where we can kind of enhance the messages are through those ad hoc broadcasts.

>> WILLIAM EISERMAN: Aside from Zika, you already addressed CMV, but what about other education regarding prevention such as for fetal alcohol syndrome and other things.

>> ERIN: Yes, we do have messages related to that in our entire Text4Baby message bank. If you would like additional information on messages to send related to any topics such as that, feel free to send me an e-mail, and I can pull all of those messages related to that topic for you.

>> KATHY WATTERS: Somebody messaged me yes about domestic violence. There are so many to take a look at it. It would be good for you to look at the whole bank.

>> Erin: There's over 250 topics.

>> WILLIAM EISERMAN: One of our participants is asking I wonder if there was any discussion around the EHDI terminology used. For instance, the messages use hearing test, when it really is a hearing screen. Is there any consideration to change that? Or is there any reason why "test" was used instead of a "screen"?

>> ERIN: Again, this goes back to my comment about using plain language. We do work with a content council, which is a federal subject matter experts which review on a regular basis. There may have been discussion. I would guess that test more resonates with the moms and it's easier to understand and comprehend.

>> WILLIAM EISERMAN: One of our participants is seeking clarification. Does Text4Baby have pre-prepared EHDI related messages that are sent out in a timely manner? Or do individual EHDI programs send out messages related to followup, rescreening, et cetera?

>> KATHY WATTERS: Well that's exactly why we're on this call today is to brainstorm how we might enhance the work of all the different professionals and families that are involved with EHDI programs and states.

>> ERIN: Kathy, you saw the slide I just put back up, right?

>> KATHY WATTERS: Oh, good. Thanks. We do want this tool to be very much a foundational. Have moms get engaged, have them meet their appointments, get as much educational information as possible. But it's really, really important for other families and for the family-to-family situation that we know is so important. And it's really important for all professionals that are involved with moms to support the use of this tool as a way to engage them. For instance, what did you learn? Did you see your hearing messages on Text4Baby? Were there any topics that you didn't understand or that you want to talk about some more? Or did you use your appointment reminder. You know, that kind of thing. So we want it to be, it can't be an end-all, be-all to every single pregnancy and new mom topic. But it can be very foundational in building empowered women to be a part of their healthcare, to access resources and that kind of thing. And we want, you know, to build on these messages and have healthcare providers really support the use of the tool in order to keep these moms engaged.

>> WILLIAM EISERMAN: So another question. You've mention that had Text4Baby is for moms. Is there anything that targets specifically fathers?

>> KATHY WATTERS: Erin, do you want to take that? Because we do know that fathers sign up for Text4Baby, too.

>> Erin: We do. Generally our perspective is this is for families. It's to offer support. But with the pink branding and we are a little mom biased I guess you could say. But we do have some messages in our message bank related to father engagement. Also happy to share those with you if you would like to know exactly what they say. But it's not that we're excluding dads.

We know dads matter and we know dads want to be involved and we encourage that and support that. I would have to dig more deeply to find the numbers of users that identify as fathers. And I'm happy to get that for you, too. But yes. Dads are involved. Wouldn't you say Kathy?

>> KATHY WATTERS: Yes, definitely.

>> WILLIAM EISERMAN: So it looks like that covers the questions that people have brought forward to today. Did you have any other information that you wanted to share before we wrap up for today?

>> KATHY WATTERS: Thanks, Will. I've gone back to the brainstorming slide. We talked a lot about the importance of outreach partners. It would be nice to think about,

you know, how hospital screeners, clerks, nurses, at the level of screening could help enroll moms in Text4Baby. I know there are a lot of different pediatric providers going on with EHDI programs. And I would love to brainstorm with you guys individually about your efforts with pediatric providers and how we could, Zero to Three did such a nice job with outreach, how we could provide some educational information to providers.

We had comments in some of our projects that sometimes pediatric providers, they're unaware of these texting programs, and sometimes they're afraid that they're going to get in the way of their important medical information, too. So it's an area that it would be fun to explore with you all. I know Janet is on the call and a number of families are on the call. I think, you know, families supporting other families to use tools like this because we know that moms that have lots of social stressors tend to be moms that really like to use this texting method of gaining information. And, you know, connecting to those other Text4Baby partners in the state I think is really important to do.

So then next steps before we wrap up. Becoming an outreach partner and contacting Erin. We talked about that. Erin is happy to give you information about the other partners in your state. And I did want to mention I think someone from New York, an EHDI program in New York was inquiring about Text4Baby. And New York has one of our custom contracts and does an amazing job as a partner organization. The Department of Health there. And the EHDI program and the Department of Health that uses Text4Baby didn't know each other. So they're starting to make a connection. And I think it could only enhance the collective impact of getting moms enrolled. And please follow up with me, too, if you have any questions about customization.

One other thing, I just was going to say www.wellpass.com is just some more information about what's coming down the road in terms of more interactive communication to add to what Text4Baby can provide to women and new moms.

And on behalf of both Erin and myself, thank you very much for your great questions, your participation, and hopefully NCHAM and we can follow up to provide anymore information that you need. Will, back to you.

>> WILLIAM EISERMAN: Well, thank you. I have highlighted our presenters' e-mail addresses in red over on the left there. So if you want to follow up with them, you will also see their phone numbers over there, as well. They've invited you to reach out to them with more specific comments or questions if you would like to pursue things further. And particularly for those who are interested in getting state-specific partner information, they have offered that as a resource. So thank you, Erin, and Kathy for your time today. Today's webinar has been recorded and will be posted on infanthearing.org within the next week. So if you would like to review in information again or have somebody that you would like to share this with, that would be a great way to do it.

Thank you both of you. And we appreciate everybody's time today.

>> KATHY WATTERS: Thanks, Will.