

# NTID Health Care Implementation Commission: Role, Structure and Membership, and Charge

(October 1, 2011)

## Background

In June 2010, the National Technical Institute for the Deaf at the Rochester Institute of Technology (NTID/RIT) established the *Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community* to **address the national need for increasing the opportunities for deaf and hard-of-hearing individuals to enter and succeed within a wide array of health care fields**. The Task Force is sponsored by four “founding institutions”: NTID/RIT; Gallaudet University (GU); the National Center on Deaf Health Research at the University of Rochester Medical Center (NCDHR/URMC); and the Rochester General Health System (RGHS).

The Task Force Charge called for producing an Interim Report by June 2011 that would delineate short-term recommendations ready for immediate implementation, and lay the groundwork for a long-term vision and set of recommendations to be set forth in the Task Force’s culminating White Paper, due in March 2012.

Attached find the Task Force’s Interim Report, *“Building Pathways to Health Care Careers for the Deaf and Hard-of-Hearing Community: Interim Report”* (**Attachment I.**) The Interim Report establishes short-term recommendations in five areas: Maximizing Information Dissemination; Enhancing Educational Curricula and Training Programs; Creating Employer Awareness; Promoting Accessibility and Technological Solutions; and Investigating External Funding, Cultivating Governmental Relations, and Creating Programs of Sponsored Research/Policy Development.

The Interim Report’s short-term recommendations were accompanied by the following set of Task Force expectations:

- The founding institutions are the *primary agents* in considering and implementing Interim Report recommendations;
- The founding institutions will collaborate with one another in deciding *which* institutions will assume lead role in implementing *which* short-term recommendation, based on institutional expertise and strategic directions;
- In fully realizing the intended impact of Task Force recommendations, the founding institution assuming lead role in implementing a particular recommendation will collaborate as needed and appropriate with other founding institutions (as well as with other institutions and organizations throughout the country, including those represented on the Task Force); and
- Given resource limitations and ongoing institutional commitments, it is unlikely the founding institutions will be able to implement all submitted Task Force short-term recommendations, even collectively. Founding institutions will communicate formally to the Task Force by October 1, 2011 regarding which recommendations have been selected as ‘top priority’ initiatives for implementation.

On August 22, 2011, an NTID meeting was held to discuss and decide which Interim Report recommendations best fit NTID in terms of institutional expertise and the strategic directions established by *Strategic Decisions 2020*. Participants at this meeting were: Gerry Buckley (President of NTID and Vice President/Dean for RIT), Jim DeCaro (Professor, Office of the President and Director for PEN and CAT), Laurie Brewer (Vice Dean and Associate Vice President for Academic Affairs), Bernard Hurwitz (Executive Assistant for the NTID President), Vince Daniele (Chair, NTID Science and Mathematics Department), Rose Marie Toscano (Professor, Liberal Studies Department and Co-Chair, Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community), and Jeff Porter (external consultant, Task Force on Health Care Careers for the Deaf and Hard-of-Hearing Community).

Based on this meeting, a listing of *NTID Health Care Initiatives* (**Attachment II.**) was developed to delineate those Interim Report

recommendations viewed as most appropriate for NTID to assume a leadership role in implementing. This listing has been communicated to the Task Force as NTID's formal response to the Interim Report recommendations.

In the concluding section of the *NTID Health Care Initiatives*, an NTID Health Care Implementation Commission was put forward as the institutional implementation vehicle.

## **NTID Health Care Implementation Committee**

### Role

Currently, NTID has limited coordinated focus and expertise to implement the *NTID Health Care Initiatives*. In order to assure our leadership in this area and to establish our national presence in health care careers education for deaf and hard-of-hearing individuals, it is critical we have a clearly designed implementation vehicle for realizing these *Initiatives*. The NTID Health Care Implementation Commission serves as this vehicle.

### Structure and Membership

- Reports to the Office of the NTID President
- Co-Chaired by Rose Marie Toscano and Jim DeCaro
- Commission members, appointed by NTID President, include:
  - A representative for NTID curriculum development issues and processes
  - A representative for the ASLIE Medical Interpreting initiative
  - A representative for RIT's Institute on Health Sciences and Technology (IHST)
  - A representative for NTID Department of Educational Design Resources

- A representative for NTID Marketing and Communications
- A representative for NTID Center on Access Technology
- Others to be named as needed

-- In addition, the Commission will hire a medical doctor who is deaf/hard-of-hearing in the role of NTID Health Care Consultant/Clinical Professor. Initial appointment for the first year of service will be on a half-time (.5) basis. Thereafter, changes to this time allotment will be evaluated annually and revised as needed, in consideration of evolving needs.

-- Commission and Commission members will have an initial term of three years (effective Winter Quarter, 2011-2012), with formal assessment at the conclusion of this three-year term regarding the Commission's cumulative effectiveness and future viability.

### Charge

In general, the Commission will:

- Coordinate and ensure timely implementation of approved *NTID Health Care Initiatives* (within the college, between NTID and IHST, between NTID and other founding institutions (**Attachment III General Statement of Collaborations Among Founding Institutions**), and between NTID and local, regional and national partners as required; and
- Serve NTID as the health care information and advising group regarding information dissemination, educational curricula and training programs, employer awareness, accessibility and technological solutions and programs of sponsored research/policy development.

Specifically, as initial tasks, the Commission will:

- Develop a 'Plan of Work' for accomplishing the *NTID Health Care Initiatives*, specifying who will be responsible for what by when;
- Specify how departmental/institutional resources are being re-prioritized/re-allocated in supporting Plan of Work implementation. Where Plan of Work initiatives require additional monies (beyond re-prioritization/re-allocation of existing resources), budget requirements will be submitted to the NTID President for review and consideration;
- Specify for each Plan of Work initiative, as appropriate, its direct tie-in to Strategic Decisions 2020;
- Develop 'Memorandum of Agreements' with respective founding institutions as appropriate (**Attachment III: General Statement of Collaboration Among the Founding Institutions.**) in carrying out collaborative Plan of Work initiatives, specifying respective responsibilities and timelines for completion.

The above set of initial tasks will be completed by the end of Winter Quarter 2011-2012, for review and approval by the NTID President.