

The Period of **PURPLE** Crying®
Hospital Participation
Agreement

Purpose of this Agreement is as follows: To clearly identify the collaborative relationship and define the individual roles and responsibilities of the Oklahoma State Department of Health (OSDH) and the _____ Hospital in facilitating the implementation of the *Period of PURPLE Crying®* (PURPLE) program in your hospital.

The Terms of this Agreement are as follows:

The OSDH agrees to:

1. Provide DVD and educational materials needed to successfully implement the *Period of PURPLE Crying* educational program.
2. Work with the hospital to secure a password and username for on-line training curriculum to be used for continuing training for those delivering the program.
3. Work with the hospital to receive updated training materials for your hospital/organization's nurses/educators to ensure that new staff members and existing staff members feel confident authorizing the program to parents. The training materials include the following:
 - A. "Nurse Talking Points" - quick, convenient statements to use when presenting the *Period of PURPLE Crying®* materials to parents of new infants
 - B. A 3-minute and 5-minute nurse's/educator's script - also for presenting the *Period of PURPLE Crying®* materials to parents of new infants
 - C. 10-minute script to use when presenting the *Period of PURPLE Crying®* materials to parents of new infants (recommended in a class situation)
 - D. 20-minute nurse/educator training PowerPoint presentation
 - E. Question and Answer (Q&A) document for parents' questions
 - F. Question and Answer (Q&A) document for professionals' questions
4. Provide consultation, technical assistance and support to hospitals resolve issues as implementation occurs.

The Hospital agrees to:

1. Assign a specific contact person within the hospital that will be responsible for providing oversight of program implementation.
2. Assure participating staff have completed appropriate training provided by the National Center for Shaken Baby Syndrome (NCSBS) before educating mothers and/or family members.
3. Distribute the *PURPLE* video and booklet (always as a package) to families of new infants for whom your organization serves, in the languages provided on the DVD.
4. Protect the fidelity of *The Period of PURPLE Crying®* by following the implementation protocol and avoiding the use of conflicting programs or materials in conjunction with the *PURPLE* materials.
5. Use the essence of, or the actual scripts of your choice: Nurse Talking Points, 3-, 5- or 10-minute script when presenting the program to parents of new infants.
6. Show the *PURPLE* video to the parents of new infants, both mother and father, before being discharged from the hospital whenever possible.
7. Refer patients to local service providers as indicated using form provided by the OSDH.
8. Allow staff offering *PURPLE* program to participate in a follow up survey regarding the program.

The person designated as the point of contact is _____. He/She can be reached at _____.

Hospital Administrator/Hospital

Date

OSDH Maternal and Child Health Chief

Date