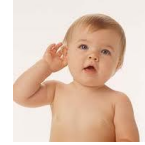


WASHINGTON STATE MEDICAL HOME PARTNERSHIPS PROJECT CHILD HEALTH NOTES – January 2020

Promoting early identification and partnerships between families, primary health care providers & the community.

Contributors: the University of Washington, Center on Human Development & Disability (CHDD) & the Washington State Department of Health (DOH). **Issue authors:** Julie Walker, CHES, MPH; Marcie Rider, AuD, FAAA; Emily Gallagher, MD, MPH; and Karin Neidt, MPH. **Issue editor:** Sophie Lu, MN, ARNP, UW CHDD. **Reviewers:** Lisa Mancl, M.S, CCC-A, Pediatric Audiologist, UW CHDD, & WA EHDDI Learning Community (WSELC) Coordinator and Mindi Outhwaite, RN, BSN, IBCLC, Kitsap Public Health District.

Early Hearing Detection, Diagnosis, and Intervention (EHDDI) Program



The goals of the Washington State Department of Health EHDDI Program are that:

- 1) All infants receive a hearing screen **before one month old**.
- 2) Infants who do not pass two hearing screens have a **diagnostic evaluation before three months old**.
- 3) Infants identified as deaf or hard of hearing **start early intervention (EI) services before six months old**.

Why Screen All Infants' Hearing?

Hearing loss is one of the most common conditions in the pediatric population with 1-3 per 1,000 children born with hearing loss, and an increase in prevalence to 17 per 1,000 children by the age of 18 years who are affected by hearing loss. Children born deaf or hard of hearing are at risk for developmental delays in language and communication skills, social skills, and learning. Outcomes for these children can be maximized by identifying hearing loss during infancy and intervening before six months of age. Since hearing loss is invisible in most children, all children should receive screening and timely follow-up.

Brief Overview of Hearing Loss

Permanent hearing loss is caused by abnormalities in the auditory system. Hearing loss can be present in one or both ears and the degree of hearing loss is a spectrum, varying from mild to profound. The most common type of permanent hearing loss is sensorineural, meaning there is an issue located within the cochlea or inner ear. The most common type of permanent conductive hearing loss is atresia (the ear canal is closed). One of the least common types of permanent hearing loss is neural hearing loss, where the issue is isolated to the auditory neural pathways.

Temporary hearing loss is caused by a blockage in the outer or middle ear. It is typically in the mild to moderate range. The most common cause of temporary conductive hearing loss in children is the presence of fluid in the middle ear.

What is the Role of the Primary Care Provider (PCP)?

The role of the PCP is to ensure that:

- All infants receive a newborn hearing screen.
- Infants who do not pass their initial hearing screen receive a second hearing screen within a few weeks.
 - Families are encouraged to follow-up in a timely manner and have access to a [site for hearing rescreening](#).
- Infants who do not pass two hearing screens are referred for diagnostic testing with a pediatric audiologist.
 - Families have access to accessible [pediatric audiology services](#).
- Infants referred to a pediatric audiologist receive appropriate follow-up testing and referrals based on the audiologist's recommendations.
- Infants identified as **deaf or hard of hearing** are referred, with parent's permission, to EI services (birth to 3 years of age) or to their local school district (ages 3 to 21 years).
 - Infants with temporary or fluctuating hearing loss for six months or more should also be referred for EI services.

How Can I Support Families and Children Who Are Deaf or Hard of Hearing?

- Help families determine their communication goals for their child and use appropriate resources (e.g. hearing technology including hearing aids and cochlear implants, visual communication using sign language) to achieve their goals.
 - Provide families with the [WA EHDDI Resource Notebook](#) (other languages available below).
- Ensure that families and their children are enrolled in Early Intervention/Birth to 3 Services
 - Fax, call, or secure email the Lead Family Resources Coordinator (FRC) in the county in which the child lives. See the [Early Support for Infants and Toddlers \(ESIT\) Contact Directory](#) to locate the child's FRC.
 - Refer through the EHDDI Program
 - Complete the [Resources Referral for Children who are Deaf or Hard of Hearing Form](#) and fax it to the EHDDI Program at 206-364-0074. The EHDDI Program will send an electronic EI referral to the appropriate FRC.
- Ensure that children are receiving educational services that address hearing loss.
 - Refer children who are ages 3 years and older to their local school district for support services.

What Other Resources are Available for Families?

- [Washington State Hands and Voices](#) – Guide By Your Side (GBYS) Program, phone: 425-268-7087
 - Provides unbiased emotional support and resources by trained Parent Guides who are parents of children who are deaf or hard hearing. GBYS services are provided at no cost to families.
- [Center for Deaf and Hard of Hearing Youth \(CDHY\)](#)
 - Offers statewide services for children who are deaf and hard of hearing and their families, teachers of the deaf, school districts, educators serving the deaf, and educational interpreters.

EHDDI EDUCATIONAL MATERIALS FOR FAMILIES

Booklets	<ul style="list-style-type: none"> • Hearing Tests for Children in English, Spanish • Resource Notebook for Families of Children Who are Deaf or Hard of Hearing in English, Spanish, Mandarin, Somali, Russian, Vietnamese
Brochures	<ul style="list-style-type: none"> • Can Your Baby Hear? (English)
Videos	<ul style="list-style-type: none"> • Family Voices about the Importance of Early Hearing Detection • How Newborn Hearing Screening Helps Children

SPECIAL NEEDS INFORMATION AND RESOURCES

Regional:	WithinReach Family Health Hotline	1-800-322-2588, 1-800-833-6388 TTD http://www.parenthelp123.org/ Spanish: http://www.parenthelp123.org/es/
	Infant Hearing Screening Sites	http://www.doh.wa.gov/hearingscreening
	Diagnostic Audiology Clinic for Infants	www.doh.wa.gov/infantaudiology
	List of Lead FRCs at ESIT (birth to 3)	https://www.dcyf.wa.gov/sites/default/files/pdf/ESITContactsDirectory.pdf
	School District Special Education (ages 3 and up)	https://www.k12.wa.us/sites/default/files/public/specialed/pubdocs/specialeddirectory.pdf
	EHDDI Program	www.doh.wa.gov/earlyhearingloss EHDDI2@DOH.WA.GOV 206-418-5613

	Washington Sensory Disabilities Services	https://www.wsdsonline.org/
National:	Hands & Voices™	http://www.handsandvoices.org/
	National Center for Hearing Assessment and Management (NCHAM)	http://infanthearing.org/
	CDC What is Hearing Loss in Children?	https://www.cdc.gov/ncbddd/hearingloss/facts.html
	Pediatrics: Hearing Assessment in Infants and Children: Recommendations Beyond Neonatal Screening	https://pediatrics.aappublications.org/content/124/4/1252#T3
	AAP Program to Enhance the Health & Development of Infants and Children (PEHDIC)	https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/PEHDIC/Pages/Early-Hearing-Detection-and-Intervention.aspx

References

Grindle, C. (2014). [Pediatric hearing loss](#). *Pediatrics in Review*, 35(11), 456-63; quiz 464.

Shearer AE, Hildebrand MS, Smith RJH. Hereditary Hearing Loss and Deafness Overview. 1999 Feb 14 [Updated 2017 Jul 27]. In: Adam MP, Ardinger HH, Pagon RA, et al., editors. GeneReviews® [Internet]. Seattle (WA): University of Washington, Seattle; 1993-2019. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK1434/>