

**Colorado EHDI Alliance**  
**Diagnostics/Identification and Entry into Intervention Task Force**

**Meeting Notes**  
 March 3, 2022

Attendees	
Name	Role/Agency
Heather Abraham	Facilitator/Notetaker
Arlene Stredler Brown	Facilitator/Notetaker
Jessie Cooney	Denver Public Schools: ToDHH; CO AG Bell Board Member
Riley Corcoran	AuD Student @ CU-Boulder; LEND Trainee; Extern at CHCO
Jami Fries	Executive Director, CO H&V; Parent
Sandra Gabbard	Audiologist, Marion Downs Center; LEND Coordinator at JFK Partners
Leanne Glenn	CDPHE; Newborn Hearing Screening Coordinator
Jamie Koch	AuD Student @ CU-Boulder; LEND Trainee and Extern at the Marion Downs Center
Ashley Renslow	CSDB; Early Education Coordinator
Allison Sedey	CU-Boulder: Director of ODDACE Project; CSDB: Assessment Coordinator
Emily Small	CO-Hear Coordinator; Colorado Springs and SE counties
Dawn O'Brien-Taylor	Audiologist, CHCO-Colorado Springs
Sara Robinson	SLP, CHCO-Colorado Springs; Adult who is HH (with Ascent Program)

## Meeting Agenda

### Outcomes:

- Increase awareness about 2020 CDC data
- Increase awareness of UHL activities

### Agenda:

1. Announcements
2. 2020 CDC Data
3. UHL Update

Agenda Item	Discussion	Action/Decision
<b>Announcements</b>	<p>Emily Small: Emily's family is relocating to Washington, DC. Her CO-Hear position has been posted by CSDB.</p> <p>Jami Fries: Email addresses at H&amp;V have changed. The new format for all emails is: first name.co-hv.org</p> <p>Ashley Renslow: The next EHDI-funded workshop will be held in person in Colorado Springs. The presenter is Jessica Dallman along with two other presenters. You can reach out to a CO-Hear Coordinator or Ashley Renslow for information about this workshop.</p> <p>Ashley Renslow: The newest CO-Hear Coordinator is Elaine Kim McCarty. She will cover Adams County. Kelly Doolittle will be the CO-Hear Coordinator for the northern counties.</p>	
<b>Review of 2020 CDC Data</b>	<p>A summary of the 2020 data were shared with task force members and included some analyses that list percentages along with number counts. Hopefully, this makes the data more meaningful to those reviewing it. The data are being shared with these meeting minutes.</p> <p>These topics, related to the 2020 data, were discussed by task force members:</p> <ul style="list-style-type: none"> <li>• Leanne and Arlene both noted that the HIDS database was only launched on October 6, 2020. Therefore, all HIDS' users needed to enter data for more than 10 months in arrears. This may have had an impact on the completeness of the data that was reported to the CDC.</li> </ul>	

- Leanne reported that staff shortages at facilities may also have influenced data entry.
- There are 76 children in early intervention who were not reported in the CDC data. This is due to a requirement that a child must first be entered as “not passing” the hearing screening in order to be followed in subsequent fields (e.g., identification, early intervention).
  - Allison commented that this limitation is “not ideal”. However, data on 109 children still provides us with useful information about our system.
  - Facilities receive “worklists” and an audiologist can “break the glass” to enter data in arrears. This is a time consuming process.
- Leanne indicated that Bill Vertrees was analyzing “saturation data;” this means that CDPHE can identify which facilities are entering data and which are not. Leanne will contact facilities to address any data entry issues.
- Jami Fries indicated that some families have postponed a rescreen due to COVID and are only now coming in for the rescreen.
  - Arlene responded that this is reported as a national trend.
- Sandy Gabbard emphasized the importance of maintaining data beyond a child’s third birthday in order to track late-identified children.
  - Leanne stated that children who are older than three are archived in the HIDS system. Their data can be requested through a written procedure.
  - Sandy shared that each HeadStart agency is required to report screening data within 45 days.
  - Arlene identified a seeming discrepancy in that HRSA is requiring each state to have a plan for continuous screening of children to age 5. It would be helpful if CDPHE could support this effort by tracking children beyond the age of three.
- Sara Robinson highlighted the fact that a large percentage of children have slight, mild, and moderate degrees of hearing difference. This leads to the need to share all communication options with a focus on listening and spoken language for many. Arlene mentioned that several Alliance members expressed a desire to align resources with the demographic characteristics of the children being served.
  - Jami Fries stated that H&V would like to make sure they have accurate information for the slight, mild and moderate population of families. They will be hosting a support group for these families. She also indicated that the Ascent Program could fill this need as well.
- Allison Sedey has concerns with the diagnosis of “slight” since many audiologists only test to 20dB for the birth to three population. *Note: The issue of identification of the “slight” category will be brought to the Screening Task Force.*

	<ul style="list-style-type: none"> <li>● We do not yet have a shared understanding of the definitions for “referred to Part C” and “enrolled in Part C”. A group has met, and will continue to meet, to discuss this. These entities are meeting: CU-Boulder/CSDB, Part C, and COEHDI. Ashley Renslow asked to participate in future meetings.</li> <li>● There is a desire for data-sharing agreements among agencies in the State. Arlene reported that this may need to be a long-range goal.</li> <li>● Jami Fries asked if we can compare Colorado’s data to other states and whether or not other states have similar issues tracking children, particularly due to COVID. <ul style="list-style-type: none"> <li>○ Bill Vertrees was working with Ashley Renslow to identify which families were/were not referred to H&amp;V and if CO-Hear referrals were noted.</li> <li>○ Emily Small reported that it is not clear as to who enters the information about referral to H&amp;V. Is it the audiologist? The CO-Hear Coordinator? Some families self-refer.</li> <li>○ Jami Fries reminded us that Hands &amp; Voices staff do not have access to the HIDS system to monitor who is being referred.</li> </ul> </li> </ul>	
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Next Meeting(s)		
DATE	TIME	FUTURE AGENDA ITEMS
April 12, 2022	4:00-5:00 PM	Update on UHL activities

**A note about accommodations:** Beginning February 1, 2021, all Alliance meeting and task force meeting accommodations (e.g., American Sign Language interpreters, Cued Language Transliterators, and/or Spanish translators) must be requested at least 72 business hours or 3 business days in advance. Requests may be made by contacting the Alliance or your task force facilitator. We will also enable Zoom's Live Transcription feature for all meetings.