**Colorado EHDI**

**Screening Task Force**

**Meeting Notes**

May 10, 2022

|  |
| --- |
| **Attendees** |
| **Name** | **Role** |
| Heather Abraham | Notetaker |
| Jody Berg | CDHS, EI Colorado Evaluation Manager |
| Arlene Stredler Brown | Facilitator |
| Lisa Cannon | CDE Consultant for Educational Audiologists and Educational Audiologist for Denver Public Schools |
| Stacy Claycomb | Audiologist, UCHealth |
| Katie Cue | Outreach and Consultative Services Manager and Deaf Specialist; CCDHHDB |
| Maureen Cunningham | Pediatrician, Children's Hospital Colorado |
| Deb Draus | Educational Audiologist; Littleton Public Schools |
| Jami Fries | Executive Director; Colorado Hands & Voices |
| Brenda Elliott | Parent; Hands & Voices |
| Leanne Glenn | Newborn Hearing Screening Coordinator; CDPHE |
| Hannah Glick | Audiologist and Lecturer, CU-Boulder; Contract audiologist with COEHDI |
| Brian Herrmann | Pediatric ENT: CHCO |
| Dawn O’Brien-Taylor | Pediatric Audiologist in CS |
| Ashley Renslow | CSDB; Early Education Coordinator with Outreach Department |
| Dana Ryan | Teacher of the Deaf and Early Interventionist for the Resource Exchange (CS) |
| Laura Samstad | CDHS, Part C Child Find Coordinator |
| Kristin Sommerfeldt | Audiologist & Clinical Asst Professor; University of Colorado-Boulder |
| Dee Woodard | CO-Hear Coordinator; Western Slope Region & San Luis Valley |
| William Eiserman (invited guest) | NCHAM & EHDI’s National Technical Resource Center  |
| Terry Foust (invited guest) | Audiologist and SLP with NCHAM & EHDI’s National Technical Resource Center |

|  |
| --- |
| **Agenda Overview** |
| **Agenda:*** Announcements
* OAE Screening for Child Find
 |

|  |
| --- |
| **Agenda/Actions/Decisions** |
| **Agenda Items** |  | **Action/Decision** |
| **Announcements** | Jamie Fries: Hands & Voices is creating guidelines and procedures for the distribution of the six OAE units that were donated by Children’s Hospital of Colorado. A contract will be created and sent to this task force’s members for input. Jami is available to discuss specifics and to answer any questions. A big thank you to Hands & Voices for stepping in to support this effort! | n/a |
| **OAE Screening for Child Find** | Christy Scott asked to have a discussion about OAE screening for Child Find at a Screening Task Force meeting. Two guest speakers, William Eisermann and Terry Foust, both from NCHAM’s National Technical Resource Center, provided a brief history of the importance of follow-up screening to ensure that children are identified with hearing differences up until three years of age. This continuous screening would be in addition to newborn screening, Christy Scott provided an overview of the transfer of Child Find responsibilities from the Colorado Department of Education (CDE) to the Department of Early Childhood (DEC). As of May 1, 2022, the administrative units for school districts no longer take new referrals for children birth to 3 years of age who require an evaluation to determine eligibility for Part C. Early Intervention Colorado, which is now responsible for Child Find for children birth - three years, is creating an infrastructure to evaluate children. Hearing and vision screenings are both part of all Child Find evaluations. Early Intervention Colorado (EI Colorado; aka, Part C) has recently reviewed applications for entities that applied to conduct these evaluations. The evaluation process will be different in different areas of the state. EI Colorado is providing OAE equipment to most evaluation teams for the hearing screening. Christy explained that virtual evaluations will continue to be offered to determine eligibility for Part C. (They were offered during the pandemic.) Colorado is investigating ways to complete the hearing screening when a virtual evaluation is conducted. Christy is soliciting feedback from the Screening Task Force members to determine if there are viable alternatives to utilizing OAE to complete a hearing screening. For instance, during COVID, EI Colorado and CDE released guidance regarding ways to conduct a hearing screening during a virtual evaluation. Might this process be used during a virtual evaluation going forward? There would continue to be the intent for additional follow up on these children. Questions for this task force: * Is there guidance identifying next steps after a child does not pass an OAE screening?
* Are there viable alternatives for conducting a hearing screening other than using OAEs?

**Follow-up when a child does not pass (DNP) an initial OAE screening:** William shared some historical data related to hearing screening. * Referral on an initial screening: ~25% DNP (in one or both ears)
* Rescreen two weeks later: ~8% DNP
* Receive a middle ear consultation
* Screen again: ~1% DNP
* Refer the 1% for audiologic evaluation

The concern we have is identifying children with hearing differences for whom no one is expressing concerns about hearing ability. Historically, without screening all children using an electrophysiologic measure (e.g., OAE, AABR), many children with hearing differences are missed (or misdiagnosed). \William commended EI Colorado for providing OAE equipment to evaluation sites, and for planning to utilize OAE screening throughout the state. **Alternatives to OAE or AABR Screening:** William and Terry stated that there is no way to ensure that a hearing screening is accomplished without an OAE or AABR. Several members of the task force commented in the chat that they do not see a replacement for an OAE or AABR screening. It would be better to state that a hearing screening was not done rather than assume it was completed using an alternative (e.g., interview with parents about hearing concerns). A parent checklist is only a resource for determining *risk factors for hearing loss*; a checklist is not a hearing screening. Historically, use of questionnaires miss approximately half of the children who have a hearing loss. Leanne Glenn raised another concern about assessing risk factors (versus conducting an electrophysiologic hearing screening). Someone could use a questionnaire to enter data into the HIDS system stating that a child passed the hearing screen without an official screening having been conducted. There has also been an historical issue with children being misdiagnosed on the autism spectrum when they actually have a hearing difference.Pediatricians can conduct a hearing screening, however, most pediatricians in Colorado do not have the equipment to do so. IDEA has a requirement for a hearing screening for two groups of children: * Children whose only Part C-eligible condition is hearing loss: These children will be missed if they do not receive a hearing screening.
* Children eligible for Part C due to other conditions/disabilities: Without a hearing screening, hearing loss may not be detected nor treated.

There may be a need for training about the hearing screening component of an evaluation. Education of those conducting the evaluations can emphasize the importance of conducting an electrophysiologic hearing screening for each child.EI Colorado is trying to determine a process to efficiently enroll children with risk factors into Part C while determining avenues for a hearing screening. The preference is not to postpone the evaluation of the child when an electrophysiologic screening can not be completed. OSEP guidance indicates that special family circumstances can justify extending the evaluation process. OSEP indicated that the “exceptional family circumstance” can be utilized when waiting for an electrophysiologic hearing screening; a medical process still needs to be completed before the evaluation can be considered complete. A concern was shared about proceeding with the evaluation without the hearing screening in that additional diagnostics could be ordered unnecessarily. In addition, an inaccurate diagnosis could be made. William asked a question about the true need to conduct evaluations virtually and what resources might exist in the community where the child lives that would provide access to an electrophysiologic hearing screening. Jody Berg stated that rural communities have identified ways to ensure OAE screening by partnering with other agencies in their communities. EI Colorado is analyzing these situations and would like to amplify the system for specific communities. However, it was mentioned that metro area providers have also indicated a need for resources for an electrophysiologic hearing screening. EI Colorado is willing to “think outside the box” to ensure that all children have their hearing screened. Recommendations/positions going forward: * William shared that there are resources for OAE screening on kidshearing.org. More information is available at: learntoscreen.org.
* Christy indicated that EI Colorado will not consider an evaluation to be complete, nor will they stop the evaluation process, until an appropriate hearing screening has been conducted.
* Christy indicated that a goal is to continue to have educational audiologists involved in hearing screening.
 | Arlene to ask William Eiserman if we can distribute his slide that shows a recommended hearing screening protocol.  |

|  |
| --- |
| **Next Meeting** |
| **DATE** | **TIME** | **AGENDA ITEMS** |
| June 14, 2022 | 11:00-12:00 | Virtual Site Visit Themes |

*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 your task force facilitator****. We will also enable Zoom's Live Transcription feature for all meetings.*