

Protecting, maintaining and improving the health of all Minnesotans

MINNESOTA EARLY HEARING DETECTION AND INTERVENTION (EHDI) PROGRAM

EHDI Goals, Indicators and Benchmarks

The measures described in this document are based on the National Goals, Program Objectives, and Performance Measures for the Early Hearing Detection and Intervention Tracking and Surveillance System from the CDC. They are intended to be used to evaluate progress toward goals accepted by the Minnesota Newborn Hearing Screening Advisory Committee. Indicators are to be assessed annually for children reported to the Newborn Screening Program between January and December of each calendar year. Results are reported in the EHDI Annual Report.

Approved: May 2010, August 2010, November 2010, November 2013

GOAL 1. ALL NEWBORNS WILL BE SCREENED FOR HEARING LOSS.

1.1 Indicator: Number and percent of infants screened for hearing loss

Numerator	Denominator
Infants born in MN and reported to	Infants born in MN minus:
the MN Newborn Screening	a) infants who died before hearing screening
Program as screened for hearing	was completed &
loss	b) infants whose parent(s) declined newborn
	hearing screening

1.2 Indicator: Number and percent of infants with reported birthweight >1800grams who were screened for hearing loss before 1 month of age.

Numerator	Denominator
Infants born in MN and reported as	Infants born in MN minus:
screened for hearing loss before 30	a) infants with reported birthweight <=1800 g,
days of age minus infants with	b) infants who died before hearing screening was
reported birthweight <=1800g	completed &
	c) infants whose parent(s) declined newborn hearing
	screening

1.3 Indicator: Number and percent of infants with reported birthweight <=1800 grams who were screened for hearing loss before 4 months of age.

Numerator	Denominator
Infants born in MN with reported	Infants born in MN with reported birthweight
birthweight <=1800 g who were	<=1800 g minus:
reported as screened for hearing loss	a) infants who died before hearing screening
before 4 months of age	was completed &
	b) infants whose parent(s) declined newborn
	hearing screening

1.4 Indicator: Number and percent of infants who do not pass the first reported newborn hearing screen (i.e. the first newborn hearing screening result reported to MDH is a REFER in one or both ears)

Numerator	Denominator
Infants with a REFER in one or both ears on the first	Infants with reported newborn
newborn hearing screening result reported to MDH	hearing screening results

GOAL 2. ALL INFANTS WHO DO NOT PASS NEWBORN HEARING SCREENING WILL HAVE A DIAGNOSTIC AUDIOLOGIC EVALUATION BEFORE 3 MONTHS OF AGE

2.1 Indicator: Number and percent of infants with reported birthweight >1800 grams who had a reported REFER result on initial hearing screening and were rescreened within one month of age.

Nume	rator	Denominator
Infants	s with reported birthweight >1800 g who	Infants with reported birthweight
a)	had a reported REFER result in one or both	>1800 g who had a reported REFER
	ears on initial hearing screening &	result in one or both ears on initial
b)	were rescreened within 1 month of age	hearing screening

2.2 Indicator: Number and percent of infants with reported birthweight >1800 grams who had a reported REFER result on hearing rescreening and received a comprehensive audiological evaluation by 3 months of age.

Numerator	Denominator
Infants with reported birthweight >1800 g who	Infants with reported birthweight
a) had a reported REFER result in one or both	>1800 g who had a reported REFER
ears on hearing rescreening &	result in one or both ears on hearing
b) had a documented audiological evaluation	rescreening
by 3 months of age.	

<u>2.3 Indicator:</u> Number and percent of infants with a reported REFER result on newborn hearing screening who were lost to follow-up.

Numerator	Denominator
Infants with a reported REFER result in one or both	Infants with a reported REFER
ears on initial newborn hearing screening who	result in one or both ears on
a) are in "closed" status &	initial newborn hearing
b) have been assigned one of the following action	screening
codes:	
i. NBNOAUDIO	
ii. NBNOSHOW	
iii. NBNORESC	
iv. NBHRAUDDC	
v. NBNOFINAN	

2.4 Indicator: Number and percent of infants with reported birthweight >1800grams and a reported REFER result on initial newborn hearing screening who were lost to follow-up.

Numerator	Denominator
Infants with reported birthweight >1800 g who	Infants with reported birthweight
a) had a reported REFER result on initial	>1800 g who had a reported
newborn hearing screening &	REFER result on initial newborn
b) are in "closed" status &	hearing screening
c) have been assigned one of the following	
action codes	
i. NBNOAUDIO	
ii. NBNOSHOW	
iii. NBNORESC	
iv. NBHRAUDDC	
v. NBNOFINAN	

2.5 Indicator: Number and percent of infants with reported birthweight <=1800 grams and a reported REFER result on newborn hearing screening who were lost to follow-up.

Numerator	Denominator
Infants with reported birthweight <= 1800 grams who	Infants with reported
a) had a reported REFER result on initial newborn	birthweight <=1800 grams
hearing screening &	who had a reported REFER
b) are in "closed" status &	result on initial newborn
c) have been assigned one of the following action	hearing screening
codes	
i. NBNOAUDIO	
ii. NBNOSHOW	
iii. NBNORESC	
iv. NBHRAUDDC	
v. NBNOFINAN	

<u>2.6 Indicator:</u> Number and percent of infants with a reported REFER result on newborn hearing screening who were lost to documentation.

Numerator	Denominator
Infants with a reported REFER result on	Infants with a reported REFER result on
initial newborn hearing screening who	initial newborn hearing screening
a) are in "closed" status &	
b) have been assigned one of the	
following action codes	
i. NBHRPCPUN	
ii. PCPNOCO	
iii. NBDXPRO	
iv. NBNODXEXP	
v. NBHRLPHDP	

2.7 Indicator: Number and percent of infants with reported birthweight >1800 grams and a REFER result on newborn hearing screening who were lost to documentation.

Numerator	Denominator
Infants with reported birthweight >1800 g who	Infants with reported birthweight
a) had a reported REFER result on initial	>1800 g who had a reported as
newborn hearing screening &	REFER result on initial newborn
b) are in "closed" status &	hearing screening
c) have been assigned one of the following	
action codes	
i. PCPUN	
ii. PCPNOCO	
iii. NBDXPRO	
iv. NBNODXEXP	
v. NBHRLPHDP	

2.8 Indicator: Number and percent of infants with reported birthweight <=1800grams and with a REFER result on newborn hearing screening who were lost to documentation.

Numerator	Denominator
Infants with reported birthweight <= 1800 g who	All infants with reported birthweight
a) had a reported REFER result on initial	<=1800 g who had a reported REFER
newborn hearing screening &	result on initial newborn hearing
b) are in "closed" status &	screening
c) have been assigned one of the following	
action codes	
i. PCPUN	
ii. PCPNOCO	
iii. NBDXPRO	
iv. NBNODXEXP	
v. NBHRLPHDP	

GOAL 3. ALL INFANTS & CHILDREN WITH HEARING LOSS WILL RECEIVE TIMELY AND APPROPRIATE EARLY INTERVENTION SERVICES (MEDICAL, AUDIOLOGIC, AND DEVELOPMENTAL).

MEDICAL SERVICES

<u>3.1 Indicator:</u> Number and percent of infants with <u>congenital</u> permanent confirmed hearing loss (PCHL) who received ENT/ORL evaluation by **4 months of age**.

Numerator	Denominator
Infants reported with congenital PCHL who	Infants reported with congenital PCHL
had an ENT/ORL evaluation by 4 months of	minus those
age	a.) whose parent(s) declined ENT/ORL
	evaluation and
	b.) who were initially diagnosed with a
	transient hearing loss

<u>3.2 Indicator:</u> Number and percent of infants with <u>congenital</u> permanent confirmed hearing loss (PCHL) who received a genetics evaluation by **1 year of age**.

Numerator	Denominator
Infants with congenital PCHL who had a	Infants reported with congenital PCHL
genetics evaluation by 1 year of age	minus those
	a) whose parent(s) declined genetics
	evaluation
	b) who were initially diagnosed with a
	transient hearing loss

<u>3.3 Indicator:</u> Number and percent of infants with <u>congenital</u> permanent confirmed hearing loss (PCHL) who received an evaluation by an ophthalmologist with experience with pediatric patients by **6 months of age**.

Numerator	Denominator
Infants with congenital PCHL who had a	Infants reported with congenital PCHL
pediatric ophthalmology evaluation by 6	minus those
months of age	a) whose parent(s) declined
	ophthalmology evaluation
	b) who were initially diagnosed with a
	transient hearing loss

AUDIOLOGIC SERVICES

3.4 <u>Indicator:</u> Number and percent of infants with bilateral permanent confirmed hearing loss (PCHL) whose parent(s) chose personal amplification and who were fitted within 1 month of PCHL diagnosis

Numerator	Denominator
Infants/children with bilateral PCHL who	Infants/children with bilateral PCHL
were fitted within one month of PCHL	who were fitted with personal
diagnosis	amplification
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EARLY INTERVENTION SERVICES

<u>3.5 Indicator:</u> Number and percent of infants/children diagnosed before 3 years of age with permanent confirmed heaing loss (PCHL) who were reported to be enrolled in Part C Early Intervention services.

Numerator	Denominator
Infants/children diagnosed before 3 years of age with reported PCHL who	Infants/children diagnosed before 3 years of age with reported PCHL minus
were enrolled in Part C Early	a) infants/children who were not eligible for
Intervention services.	Part C Early Intervention services & b) infants/children whose parent(s) declined
	Part C Early Intervention services

<u>3.6 Indicator:</u> Number and percent of infants with a reported <u>congenital</u> permanent confirmed hearing loss (PCHL) who were reported as enrolled in Part C Early Intervention services who were enrolled before 6 months of age.

Numerator	Denominator
Infants with a reported congenital PCHL	Infants with a reported congenital PCHL
who were reported as enrolled in Part C	who were reported as enrolled in Part C
Early Intervention services (initial IFSP	Early Intervention services minus those who
date) before 6 months of age	were initially diagnosed with a transient
	hearing loss

<u>3.7 Indicator:</u> Number and percent of infants/children diagnosed before 3 years of age with a reported permanent confirmed hearing loss (PCHL) who were reported to be enrolled in the Deaf Mentor Family Program or Deaf and Hard of Hearing Adult Role Model Program.

Numerator	Denominator
Infants/children diagnosed before 3 years of age with a reported PCHL who were reported to be enrolled in the Deaf Mentor Family Program or Deaf and Hard of Hearing Adult Role Model Program.	Infants/children diagnosed before 3 years of age with a reported PCHL

<u>3.8 Indicator:</u> Number and percent of infants/children diagnosed before 3 years of age with a reported permanent confirmed hearing loss (PCHL) who were reported to be receiving private speech therapy.

Numerator	Denominator
Infants/children diagnosed before 3 years of age with a reported PCHL who were reported to be receiving private speech therapy	Infants/children diagnosed before 3 years of age with a reported PCHL

<u>3.9 Indicator:</u> Number and percent of infants/children with a reported permanent confirmed hearing loss diagnosed before 3 years of age who were reported to be enrolled in Part C Early Intervention services within two months of initial hearing loss diagnosis.

Numerator	Denominator
Infants/children diagnosed before 3 years of	Infants/children diagnosed before 3
age with a reported PCHL who were enrolled	years of age with a reported PCHL
in Part C Early Intervention services (initial	who were reported as enrolled in Part
IFSP date) within two months of initial	C Early Intervention services
hearing loss diagnosis	

<u>3.10 Indicator:</u> Number and percent of families of infants/children ages 0-10 years with reported permanent confirmed hearing loss who received direct family-to-family support (i.e. phone call or personal contact) within one month of their child's initial hearing loss diagnosis.

Numerator	Denominator
Infants/children ages 0-10 years with a	Infants/young children ages 0-10
reported PCHL whose families were directly	years with a reported PCHL minus
contacted by MN Hands and Voices (family-	children whose parent(s) declined
to-family support organization) within one	family-to-family support contact
month of initial hearing loss diagnosis	

<u>3.11 Indicator</u> Number and percent of families of infants/children ages 0-6 years newly identified with permanent confirmed hearing loss (PCHL) who requested a mentor from the Deaf Mentor Family Program and began the SKI-HI curriculum with a mentor within 30 days of their request

Numerator	Denominator
Infants/children ages 0-6 newly identified	Infants/young children ages 0-6 years
with PCHL whose families began the SKI-	newly identified with PCHL whose
HI curriculum with a mentor within 30 days	parent(s) requested a mentor from the
of requesting a mentor.	Deaf Mentor program.

GOAL 4. ALL INFANTS AND CHILDREN WITH LATE ONSET, PROGRESSIVE, OR ACQUIRED HEARING LOSS WILL BE IDENTIFIED AT THE EARLIEST POSSIBLE TIME.

4.1 Indicator: Number and percent of infants and children identified with late onset, progressive, or acquired hearing loss. This number may also include infants with a false negative screen (i.e. those who passed hearing screening, but had a congenital hearing loss).

Numerator	Denominator
Infants/children with a reported PCHL who	Infants/children with a reported PCHL
were born after 9/1/2007 and had an initial	who were born after 9/1/2007
PASS result for both ears on newborn	(implementation of mandate) and whose
hearing screening (late onset)	hearing loss onset is known (congenital
	or late onset)

GOAL 5. ALL INFANTS WITH HEARING LOSS WILL HAVE A MEDICAL HOME AS DEFINED BY THE AMERICAN ACADEMY OF PEDIATRICS.

<u>5.1 Indicator:</u> Number and percent of infants/children who had a primary care provider at the time of diagnosis.

Numerator	Denominator
Infants/children with a reported PCHL whose	Infants/children with a reported
primary care provider was confirmed	PCHL

GOAL 6. MINNESOTA WILL HAVE A COMPLETE EHDI TRACKING AND SURVEILLANCE SYSTEM THAT WILL MINIMIZE LOSS TO FOLLOW-UP.

<u>6.1 Indicator:</u> Documentation of number and percent of newborn hearing screening records matched with vital records.

Numerator	Denominator
Infants whose newborn screening record	Officially registered MN births minus
contains a state file number (indicating	infants whose parent(s) declined newborn
an officially registered birth that was	hearing screening.
matched to a newborn screening record).	

<u>6.2 Indicator:</u> Number of audiology reports received by MDH within 10 days of appointment.

Numerator	Denominator
Audiology reports received by MDH	Audiology reports received by MDH
<=10 days from appointment (ENTRY	(ENTRY TYPE = AUDIO)
TYPE = AUDIO)	

<u>**6.3 Indicator:**</u> Number and percent of infants who had incomplete or unreported hearing screening.

Numer	rator	Denoi	minator
Infants	born in MN who had incomplete or	Infant	s born in MN minus
unrepo	orted hearing screening results minus	a)	infants who died before hearing
a)	infants who died before hearing		screening was completed &
	screening was completed &	b)	infants whose parent(s) declined
b)	infants whose parent(s) declined		newborn hearing screening
	newborn hearing screening		

6.4 Indicator: Number and percent of requested follow-up reports received from audiologists identified as caring for infants/children with permanent confirmed hearing loss (PCHL).

Numerator	Denominator
Number of requested follow-up reports received	Total number of follow-up reports
from audiologists identified as caring for an	requested from audiologists
infant/child with PCHL.	identified as caring for an
	infant/child with PCHL

6.5 Indicator: Number and percent of requested follow-up reports received from primary care providers identified as caring for infants/children with permanent confirmed hearing loss (PCHL).

Numerator	Denominator
Number of requested follow-up reports received	Number of follow-up reports
from PCPs identified as caring for an	requested from PCPs identified as
infant/child with PCHL	caring for an infant/child with PCHL

GOAL 7. MINNESOTA WILL HAVE A COMPREHENSIVE SYSTEM THAT MONITORS AND EVALUATES THE PROGRESS TOWARDS THE EHDI GOALS AND OBJECTIVES.

7.1 Indicator: Minnesota state agencies (led by MN Departments of Education and Health) will develop and implement a system to determine and communicate the number and percent of infants/children ages 0-3 with a reported permanent confirmed hearing loss (congenital, late, or unknown onset) who achieve communication development commensurate with their cognitive abilities at 3 years of age.

GLOSSARY

CDC

Centers for Disease Control and Prevention

Congenital Onset

- a. Any child with a permanent confirmed hearing loss who had an officially reported REFER result for at least one ear on Newborn Hearing Screening.
- b. Any child born with atresia.
- c. Any child born with a risk factor for hearing loss whose initial hearing evaluation is diagnostic. Risk factors are defined in Appendix 2 of the JCIH Year 2007 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs.

Decline

In order to formally decline Newborn Hearing Screening, parents must complete a 'Parental Refusal of Newborn Screening' form and return it to MDH. The form can be found at http://www.health.state.mn.us/newbornscreening/docs/parental_refusal.pdf.

EHDI

Early Hearing Detection and Intervention

ENT/ORL

Ear, Nose & Throat/Otolaryngology

Late, Progressive or Acquired Onset

- a) Any child with a permanent confirmed hearing loss who had an officially reported PASS result for both ears on Newborn Hearing Screening.
- b) Any child with permanent confirmed hearing loss whose hearing loss is known to have been acquired after birth (e.g. as a result of infection or injury)

Lost to

Documentation

Infants that have had follow-up of a refer result but for whom documentation is not completed and active follow-up has been suspended. Cases that are closed with the following action codes are considered lost to documentation:

- a. PCPUN
- b. PCPNOCO
- c. NBDXPRO
- d. NBNODXEXP
- e. NBHRLPHDP.

Lost to Follow-Up

Infants with follow-up of refer result that is known NOT to be completed. Cases that are closed with the following action codes are considered lost to follow-up:

- a. NBNOAUDIO
- b. NBNOSHOW
- c. NBNORESC
- d. NBHRAUDDC
- e. NBNOFINAN.

MDH

Minnesota Department of Health

NBDXPRO

MDH Public Health Lab action code indicating that child has been seen by audiology but complete diagnostic data has not been completed and /or reported to MDH and child had >4 appointments and/or is >6 months old. Case has been closed for active follow-up by MDH.

NBHRAUDDC

MDH Public Health Lab action code indicating that audiology process was started, but family stopped attending/making appointments. Case has been closed for active follow-up by MDH Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

NBHRLPHDP

MDH Public Health Lab action code indicating that information received from Local Public Health indicates that child has been seen by audiology, but diagnosis remains incomplete.

NBNOAUDIO

MDH Public Health Lab action code indicating that primary care provider recommended follow-up with audiology but appointment was never made. Case has been closed for active follow-up by MDH Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

NBNODXEXP

MDH Public Health Lab action code indicating that child has multiple, significant medical issues preventing timely hearing follow-up. Case has been closed for active follow-up by MDH.

NBNOFINAN

MDH Public Health Lab action code indicating that family lacks the financial means (insurance) to obtain follow-up testing at this time. Family has been referred to Local Public Health for assistance. Case has been closed for active follow-up by MDH. **NBNORESC**

MDH Public Health Lab action code indicating that primary care provider has decided to monitor hearing and not refer for rescreen and/or diagnostic audiology. Case has been closed for active follow-up by Minnesota Department of Health Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

NBNOSHOW

MDH Public Health Lab action code indicating that family has not shown or has canceled multiple appointments with audiology for follow-up. Case has been closed for active follow-up by MDH Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

Newborn Hearing Screening

Initial Hearing Screening: The hearing screening protocol performed shortly after birth. The MDH Hearing Screening Protocol specifies that for infants who do not pass the initial screen, hospitals should attempt one rescreen before discharge. Only the results of the final screen performed before hospital discharge or according to out-of-hospital birth algorithms are reported to MDH as the initial screening result and used in the calculation of the initial refer rate.

For infants born out-of-hospital, protocols specify that the initial hearing screening should be done 2-3 days after birth and that these results should be reported to MDH.

Outpatient Re-Screening: Performed for infants who do not pass initial hearing screening.

Complete screening protocols can be found at http://www.health.state.mn.us/newbornscreening/hear_hospital.ht ml#documenting

PCHL

Permanent confirmed hearing loss (excludes hearing loss diagnosed as slight, mild, or moderate transient conductive loss only)

PCPNOCO

MDH Public Health Lab action code indicating that primary care provider is known to Minnesota Department of Health but PCP has not responded to multiple contact requests. Case has been closed for active follow-up by MDH Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

PCPUN

MDH Public Health Lab action code indicating that primary care provider is unknown to MDH. Case has been closed for active follow-up by MDH Newborn Screening Program, but case has been referred to Local Public Health for follow-up.

Refer

A 'REFER' result for newborn hearing screening indicates that the child did not pass in one or both ears and that the child may have a hearing loss. Children with a refer result in one or both ears on initial screening should receive a rescreen before 1 month of age and children with another 'REFER' result on rescreen should receive a comprehensive audiological evaluation before 3 months of age. Complete screening protocols are published at http://www.health.state.mn.us/newbornscreening/hear_hospital.ht ml#documenting

Unknown Onset

Any child with a permanent confirmed hearing loss

- a) who does not have officially reported Newborn Hearing Screening results and
- b) whose hearing loss onset cannot be determined based on a known cause of the hearing loss.