Coordinating Referrals for Intervention and Family Support

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About North Carolina



2008 Data

•*Population 9,227,016

• *Live Births = 132,106

• Children Identified with Hearing Loss = 210

*2008 data NC State Center for Health Statistics – Selected Vital Statistics Volume 1

EHDI in North Carolina

- 1999 Legislative Mandate
 - Newborn Hearing Screening
 - All birthing facilities must screen for hearing loss
 - Physicians should insure screening for hearing loss by 30 days of age
 - Reporting Requirements
 - Screening results: birth to 6 months of age
 - Diagnostic/Amplification results: birth to 1 year of age
- Multiple intervention/support options

NC Services for Children Who Are Deaf or Hard of Hearing and Their Families

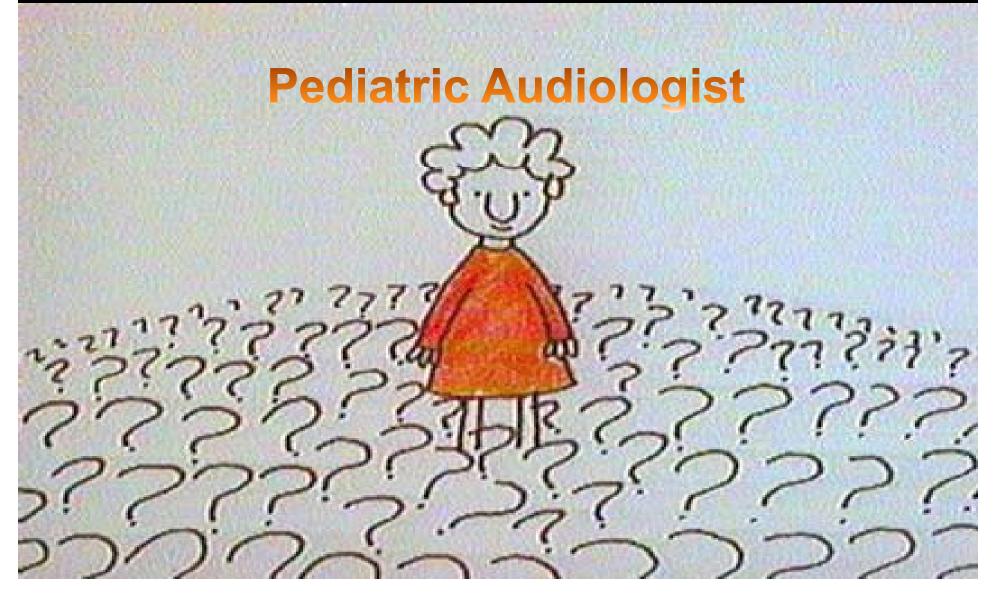
• **BEGINNINGS**

• Early Intervention Program for Children Who Are Deaf or Hard of Hearing

 Part C-Children's Developmental Services Agencies

- Child Health Audiology Consultants
 - Child Health Speech Consultants
 - 115 Local Education Agencies

All of these services....who does what?....when?....how?

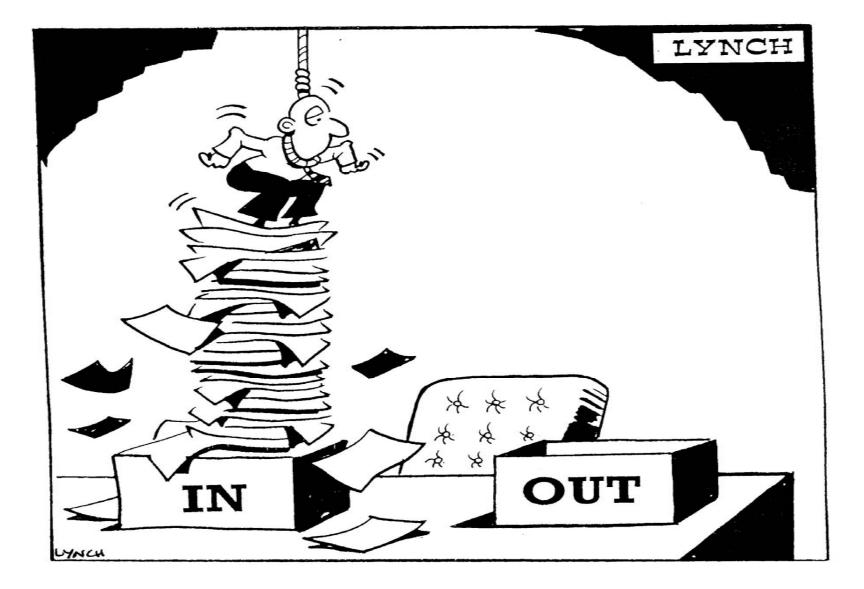


Two Goals at the Forefront

Move children and families from diagnosis to intervention as quickly as possible.

Develop a system for tracking children and families throughout their journey from screen → rescreen → diagnosis → intervention...and beyond

Now what?



Collaboration

Eliminate/reduce duplication of effort

Reduce paperwork

Communicate regularly about children, families and services

Capitalize on the expertise of each agency

Question #1: How can we reduce paperwork and duplication?

- Pediatric audiologists have difficulty keeping up with the particular rules/regulations/changes of each intervention service
- Each service/agency has its own "referral package" some lengthy and time-consuming
 - Parents easily confused by similar, yet different, services available
- Each agency is best able to describe their own services to families
 - Reducing the number of home visits to initiate services



Oh no!! Everyone wants something different!

Communication is Key

Quarterly face-to-face meetings BEGINNINGS' Bi-Weekly Logs Hearing Link **ONE Referral Form for All!**

Permission for Referral

Last Name

First Name

M.I.

Date of Birth

North Carolina has several agencies that assist children with diagnosed hearing loss and their families. Each individual agency can best explain the details of the services they offer and answer questions for you as you make informed choices about accepting or declining services for your child. You have the right to accept or decline any of the services at any time. The signed Permission for Referral must be on file in order for these agencies to contact your family.

The agencies you accept will contact you to tell you more about their services. Please indicate below if you accept or decline the <u>referral</u> to each agency:

Child's Age - Birth to 3 years

BEGINNINGS for Parents of Children Who are Deaf/Hard of Hearing
Infant Toddler Program-Children's Developmental Services Agency
Early Intervention for Children Who are Deaf/Hard of Hearing

Child's Age - 3 years through 21 years

Beginnings for Parents of Children Who are Deaf/Hard of Hearing

Department of Public Instruction (Public Schools)

		DECLINE
		DECLINE
ACCEPT	or	DECLINE

ACCEPT	or	DECLINE
ACCEPT	or	DECLINE

I hereby authorize _________to release audiological evaluation results and contact (Audiologist/Audiology Facility) information to the North Carolina Division of Public Health for the purpose of completing referrals to the agencies accepted above. I further authorize ________to release audiological results upon (Audiologist/Audiology Facility) request to the agencies accepted above for the purpose of assisting the agency to understand my child's hearing loss.

I understand the terms of this release, the need for the information, and that there are statutes and regulations protecting the confidentiality of the information. I acknowledge that this consent is voluntary and is valid until such request is fulfilled. I further understand that I may revoke my consent by giving written notice to the agency with authority to release the information, except to the extent that action based on this consent has already been taken.

Witness	Patient, Parent, or Legally Appointed Representative
	Date Signed
Language Spoken in Home:	Mother's (Parent's or Guardian's) Printed Name
Phone:	Address
Alternate Phone:	City, State, Zip

FAX a copy of the completed form AND audiological report to: Marcia Fort, AuD North Carolina Division of Public Health (919) 870-4881

Revised 10/09

Hearing Link Goals

Web-based, real-time reporting of results

Tracking children through screen-rescreendiagnosis-service system

Move children and families into services as quickly as possible following diagnosis - simultaneous referrals to all services/agencies (including children over age 3)

Reduce/eliminate duplication of information

Include intervention providers

Hearing Link Data - Uses

• Reporting

- Up-to-date demographic information shared between all service providers
- Pediatric audiologists can monitor status of child in EHDI process; enhance counseling if family could benefit from service, but not enrolled
 - Identify service gaps

"Hearing Link has brought North Carolina's Early Intervention services for children who are deaf or hard of hearing into a more seamless system of referral....Parents have given prior consent for early intervention services when we receive the Hearing Link information. This allows our teachers to contact the families immediately and get started."

Ruth Anne Everett, Director Early Intervention Program for Children Who Are Deaf or Hard of Hearing

"The Hearing Link Referral system is a great way to keep the referring audiologist informed about the babies that need further testing. By knowing the date, time and location of the referral, we now have the information needed to track our babies more efficiently and to decrease the number of babies that are lost to follow-up."

Shawn Vansteen Audiologist/Newborn Hearing Screening Coordinator Wake Med Hospital Raleigh "This process seems to be working well. The CDSA staff are very grateful for the audiology information, reports, etc. It has been very helpful to be given this referral information through one "single portal", in order to better ensure those children and families are linked with our program."

Stephen Vater Quality Improvement Unit DHHS/DPH - Early Intervention (Part C) Branch

Question #2: How can we capitalize on the expertise of each professional?

- Family Support BEGINNINGS Parent Educators
- Education Early Intervention for Children Who Are Deaf or Hard of Hearing Teachers

• Service Coordination/Part C – Children's Developmental Services Agency Service Coordinators

• Audiology Support – Regional Audiology Consultants

Professionals Working Together Joint Home Visits

- Communicate back-and-forth
- Meet together with parents
- Transition planning
- Work as a team

Permission Form available @ www.ncnewbornhearing.org

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