



Indiana State Department of Health
Division of Maternal and Child Health - Genomics and Newborn Screening
Early Hearing Detection and Intervention (EHDI Program)

EHDI Staff Highlight : Southwest Regional Audiologist Debbie Force

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Debbie Force graduated from Purdue University with a degree in audiology and speech science in 1974 and from Indiana University with a degree in audiology in 1975. She received her certification in deaf education from Ball State University in 1976. She worked for Bartholomew Special Education Cooperative in Columbus, Indiana, for two years and then was employed as a clinical audiologist at Columbus Regional Hospital for 25 years. She joined Sonic Innovations as a regional training manager and director of training until 2012, when she became director of udiology for Audiology Management Group. Debbie joined EHDI as a regional audiology consultant in the southwest region in 2015. Debbie makes her home with her husband in Columbus. She has three grown children and six grandchildren.



Indiana EHDI Presents at national EHDI conference

Tearing down the silos in Indiana: Highlighting inter-agency connections in our early intervention system

Authors: Stacy Allgeier (EHDI), Bethany Colson (Center for Deaf and Hard of Hearing Education or CDHHE), Cindy Lawrence, (CDHHE) and Lisa Condes (Guide by Your Side or GBYS)

In early March, at the national EHDI conference in Chicago, the Indiana EHDI team presented a session with the Center for Deaf and Hard of Hearing Education (CDHHE) and Indiana First Steps on collaboration for maximizing enrollment into early intervention services for deaf and hard of hearing children.

Indiana has made significant program changes as a result of successful collaboration between our state EDHI and GBYS programs, Indiana’s Center for Deaf and Hard of Hearing Education and Indiana’s state Early Intervention program (First Steps). These collaborative efforts are key to decreasing loss to follow up and most importantly helping to ensure families and children receive appropriate services early in order to improve child outcomes.

The history of EHDI in Indiana and the creation of Indiana’s CDHHE illustrate ways to overcome challenges resulting from interagency collaborations. The biggest challenge has been our ability to share data across systems to better identify the gaps and children who are lost to follow up. Relationships were fostered through MOUs across agencies and systems allowing for data sharing and updated procedures to benefit of the families we serve.

By working together to provide ongoing education to Early Intervention System Points of Entry, support to families and collaborative data management, more families are arriving at services early on in a child’s life. Resources developed as a result of the collaborations were shared for illustrative purposes.

First Steps changes requirements for audiology early intervention providers

In 2018, Indiana First Steps changed the requirements for audiologists to become providers. Audiologists are now exempt from the First Steps credentialing process. They are required to be enrolled with First Steps and sign an agreement to become providers. In addition, for those audiologists who are currently providers, annual re-credentialing is not necessary.

These changes have substantially minimized the barrier for audiologists to become First Steps providers for audiology early intervention providers. Indiana audiologists are required to have the minimum audiology education required for licensure in Indiana and hold a valid Indiana audiology license.

The process to become a First Steps audiology provider can be found in the Indiana First Steps Early Intervention Policy Manual (pg. 4) and the enrollment application is on the Indiana First Steps Matrix website (https://www.in.gov/fssa/files/First_Steps_Policy_Manual_FINAL.pdf) and a checklist from that Manual is included below for easy reference.

- Initial credential checklist Initial credential form with signed attestation statement
- Signed agreement with the Division of Disability and Rehabilitative Services
- Limited criminal history from Indiana State Police (12 months current)
- National Provider Identifier (NPI) (required for all providers)
- Copy of license (licensed providers only)
- Liability insurance certificate (all providers)
- Copy of certification (if applicable)
- Signed supervision agreement (if applicable)
- End of supervision recommendation for DTA (if applicable)

Materials must be emailed, faxed, or mailed to the First Steps Central Reimbursement Office (CRO) at: Indiana First Steps Provider Enrollment c/o CSC P.O. Box 29160 | Shawnee Mission, KS 66201-9160 Email: infsenroll@dx.com | Fax: 913-888-6683 | Phone: 1-866-339-9595 option 2

Attention Newborn Hearing Screeners:

Did you know that on average 10 out of every 500 babies are at risk for developing delayed or late onset hearing loss?

Hospital personnel who perform newborn hearing screenings play a crucial role in gathering and transmitting information about babies that have known risk factors for hearing loss. How is that information obtained and disseminated?

This information can be obtained from family report or the medical record and then recorded on the newborn hearing screening test results form that is given to parents. This information should be entered by the hospital in the EHDI Ears system and on the heelstick card with details about the risk factor.

What happens to those babies that passed their newborn hearing screening but are known to have a risk factor?

Indiana EHDI program immediately sends a letter to families and pediatricians alerting them of the need to have follow-up hearing testing around age 9 - 12 months. Audiologists can typically conduct behavioral measures of hearing at this age. Once the baby has been tested, the audiologist will determine how often the baby's hearing should be monitored in the future. Some babies need to have more frequent tests as infants/toddlers (every 3–6 months) and then be tested annually until they are enrolled in school.

Which risk factors for delayed onset hearing loss are important.? There are many risk factors known to cause delayed or late onset hearing loss. Indiana EHDI requires four of them to be reported from the hospital.

- *A family history of (childhood) hearing loss;*
- *Infections during pregnancy (such as cytomegalovirus, German measles and toxoplasmosis);*
- *Babies who required a blood transfusion after birth due to jaundice; and*
- *Unusual appearance of baby's head, face or ears. Certain conditions that are genetic (passed from parent to child)*

Other risk factors for delayed onset hearing loss can also include:

- Ototoxic medication during pregnancy (drugs that can harm the auditory (hearing) system).
- Birth complications that require babies to stay in the neonatal intensive care unit for extended time periods.
- Babies who weighed fewer than 3 pounds at birth.
- Babies who required drugs to help them breathe after birth

UPCOMING EVENTS 2019

April 27: EHDI Family conference, Indiana School for the Deaf, Indianapolis, IN, Conference is free to parents and childcare is available for all ages!

June 13-14: First Steps Conference, Bloomington, IN

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Indianapolis, Indiana 46204

IMPORTANT LINKS

Joint Commission on Infant Hearing
www.jcih.org

National Center for Hearing
Assessment and Management
<http://www.infanthearing.org>

**We're on the web! Check out
our website at:**

www.hearing.in.gov



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Indiana EHDI Staff



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