Supporting Families of Children Who Have Confirmed Hearing Loss; A Minnesota EHDI Systems Overview (Revised August 2018)

Originally presented at MN Collaborative for DHH Conference April 1, 2016, Kathy Anderson, B.S., M.Ed., LSLS Cert AVT, Statewide EHDI Specialist-MN Low Incidence Projects

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
(No activities are described in	EHDI Legislation, System	JCIH (http://www.jcih.org/)
this cell.)	Resources:	Year 2007 JCIH Position Statement, <u>Principles and Guidelines for Early Hearing Detection and Intervention</u>
	Joint Committee on Infant Hearing	<u>Programs</u> . (http://pediatrics.aappublications.org/content/120/4/898.full)
	(JCIH), 2007 Position Statement,	2012 Complement ICIII 2007 Resition Statement Principles and Cuidelines for Fault Intervention After
	2013 Supplement, Parent' Guide	2013 Supplement JCIH 2007 Position Statement, <u>Principles and Guidelines for Early Intervention After</u> Confirmation That a Child Is Deaf or Hard of Hearing.
	Federal, State EHDI Legislation	(http://pediatrics.aappublications.org/content/early/2013/03/18/peds.2013-0008)
	MN Dept. of Health EHDI websites	A Parent's Guide to Deaf and Hard of Hearing Early Intervention Recommendations.
	and materials	(http://www.handsandvoices.org/resources/jcih-parent-guide.html)
	Annual MDH EHDI Reports	Federal Public Law No 115-71, Early Hearing Detection and Intervention Act of 2017.
	Early MDH EHDI system activities	(https://www.congress.gov/bill/115th-congress/senate-bill/652/all-info)
	include:	MN Statute 144.966 (2017), Early Hearing Detection and Intervention Programn.
	Development and	(https://www.revisor.mn.gov/statutes/?id=144.966)
	monitoring of newborn	
	hearing screening	MN Statute 144.125 (2017) Tests of Infants for Heritable and Congenital Disorders.
	reporting systems, follow-	(https://www.revisor.mn.gov/statutes/?id=144.125)
	up, data collection	MN Statute 15.059 (2017), Advisory Councils and Committees.
	 Training of hospital/birthing 	(https://www.revisor.mn.gov/statutes/?id=15.059)
	center/midwife hearing	MN Statute 125A.63 (2017), Resources; Deaf or Hard of Hearing and Blind or Visually Impaired.
	screening staff, (MDH	(https://www.revisor.mn.gov/statutes/?id=125A.63)
	Newborn Screening staff,	(,,
	Kirsten Coverstone)	MDH Newborn Screening Program.
	 EHDI Information and 	(http://www.health.state.mn.us/newbornscreening/)
	training for Health Care Providers	MN Dept of Health EHDI Follow-up Guidelines. (http://www.improveehdi.org/mn/) This site includes guidelines,
	1 TOVIGETS	recommendations approved by the MN Newborn Hearing Screening Advisory Committee.

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
		MDH EHDI Annual Report 2015 (http://www.health.state.mn.us/divs/phl/newborn/program/ehdireport2015.pdf)
Newborn Hearing Screening is completed in the birth hospital/birthing center, or by	Hospitals and birthing center staff are required by 2007 MN Statute to report results of newborn	MDH, Newborn Screening information for Families. (http://www.health.state.mn.us/divs/phl/newborn/families/index.html)
midwives for homebirths; Results recorded as "Pass" or	hearing screening (and all screenings) to MN Dept. of Health	MDH, Screening and Diagnostic Resources for Families. (http://www.improveehdi.org/mn/resources.cfm) TPT-ECHO video, Does My Child Have a Hearing Loss
"Did not pass/Refer". If "did not pass", screening is typically repeated before	Newborn Screening staff. MDH systems development has	(http://www.echominnesota.org/library/does-my-child-have-hearing-loss) MDH, Newborn Screening Materials and Resources; Education Materials and Forms.
baby leaves the hospital or birthing center. Sometimes, parents will be asked to bring	made reporting of hearing screening results at all MN hospitals and birth facilities now	(http://www.health.state.mn.us/divs/phl/newborn/materials/education.html) MDH, Newborn Screening information for Providers: Hearing Screening and Diagnostic Information for
baby back for a rescreen after leaving hospital.	more automatic through connections of hearing screening	Audiologists. (http://www.health.state.mn.us/divs/phl/newborn/providers/audiologists.html)
If the child "Did not pass" newborn hearing	technology and electronic medical records.	MDH, Newborn Screening information for Providers; Hearing Screening for Primary Care Providers. (http://www.health.state.mn.us/divs/phl/newborn/providers/hearingprimary.html)
screening/rescreening, a recommendation is made to parents to talk to their	Results of newborn hearing screening are also reported to child's pediatrician of record.	MN EHDI, Medical Home Best Practice Guidelines. (http://www.improveehdi.org/mn/medicalhome/bestpractices.cfm)
pediatrician regarding follow- up and further hearing evaluations.	In the case of a "Did not pass/Refer" newborn hearing	MDH EHDI Patient Checklist for Primary Care Providers. (http://www.improveehdi.org/mn/library/files/PCPChecklist.pdf)
It is also recommended that the hospital/birthing center	screening result, MDH screening staff follow a rigorous protocol of follow-up, often prompting contact and reporting with	MDH, Guidelines for Primary Care and Medical Home Providers, NHSAC 2017. (http://improveehdi.org/MN/library/files/medicalguidelines.pdf)
staff schedule the outpatient hearing screening follow-up for/with the family prior to	medical providers. MDH staff also contact audiology providers if audiology follow-up appointment	MDH EHDI graphic, Hearing Screening Follow-up Process for primary care providers. (http://improveehdi.org/MN/library/files/FollowUpTimelineandMyths_Revised%205.24.12.pdf)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
discharge. (Currently in progress of implementation.)	results are missing. An MDH Audiologist may call pediatrician of record to share information, answer questions, and reinforce referrals to clinical audiology and ENT. MDH staff sends "Just in Time" information to child's Pediatrician/Family Physician. Following discharge from the hospital, if MDH Screening staff are not able to find the child or pediatrician of record for followup, local Public Health Nurse is contacted. Local Public Health tries to find the child through other programs and helps to make sure follow-up happens.	MDH—NHSAC, Guidelines for Hearing Screening After the Newborn Period to Kindergarten. (http://www.improveehdi.org/mn/library/files/afternewbornperiodguidelines.pdf) Local Public Health Nurses who are EHDI Key Contacts by county. (http://improveehdi.org/mn/library/files/countykeycontacts.pdf)
Child sees pediatrician / Primary Care Provider (PCP), for newborn and well-baby visits; discusses results of hearing screening and next steps.	Pediatrician/PCP provides referrals to clinical audiologist as needed to schedule and complete diagnostic hearing evaluations. If a diagnostic audiology appointment has already been scheduled, the PCP will support the importance of the appointment and follow-up. Referrals to ENT are provided as needed for medical management. A few clinics provide a "medical	MDH EHDI, MN Diagnostic Audiology Providers. (http://www.improveehdi.org/mn/providers.cfm) EHDI PALS, Pediatric Audiology Links to Services. (http://www.ehdipals.org/) MDH EHDI, Medical Home. (http://www.improveehdi.org/mn/medicalhome/)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
	home" model of services for children with special needs, and "care coordination" of medical services and referrals.	
Family makes an appointment to see a pediatric diagnostic audiologist. (They may have to wait for an appointment or may need to travel to a larger medical center.)	Care Coordinators in medical home clinics or staff from birth centers may assist in making follow-up appointments. Timely diagnostic appointments with the pediatric audiologist are critical! Follow-up should not be delayed!	(No resources are listed in this cell.)
Child sees clinical audiologist (and possibly ENT) for initial visit. If hearing loss is confirmed by clinical audiologist, parents will need to make an appointment to see ENT. Sometimes a visit with an ENT can be done on the same day at the same clinic with audiology. Often, a family will need to make another appointment to see a pediatric ENT.	Clinical audiologist reports results of diagnostic audiological evaluations (or a repeat hearing screening) to MDH Newborn Screening program and to the child's pediatrician. Required by MN State Statute 144.966	MN Statute 144.966 (2017), Early Hearing Detection and Intervention Program. (https://www.revisor.mn.gov/statutes/?id=144.966) MDH, Audiologists Reporting Diagnostic Results and Appointments. (http://www.health.state.mn.us/divs/phl/newborn/providers/audiologists.html)
To get more complete hearing information, the child may need to be scheduled for a sedated/non-sedated ABR.	(No activities are described in this cell.)	(No resources are listed in this cell.)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
Parents schedule the ABR		
with the pediatric audiologist. A natural sleep ABR is		
recommended for infants		
prior to 3 months of age.		
prior to 3 months of age.		
If the child needs a sedated		
ABR, he/she will first go back		
to the pediatrician/PCP for		
medical clearance for		
sedation.		
ABR is completed.	1. ABR results are <u>REPORTED</u> to	Electronic medical records online reporting process with MDH Newborn Screening is being implemented in MN
	MDH and to medical providers.	hospitals and clinics.
If hearing loss is confirmed:		
1. Audiologist discusses	If hearing loss is confirmed:	Clinical Audiologist next steps: Report, Refer, Connect, poster and bookmark.
results with parents and next	2. REFERRAL is to be made by the	(http://improveehdi.org/MN/library/files/RRCSheet.pdf) These education materials are provided to clinical
steps for families, including	clinical audiologist to Part C Early	diagnostic audiologists by MDH EHDI Follow-up staff; revised materials have been disseminated. To download
audiological care, medical	Intervention as soon as possible,	the "Report, Refer, Connect" poster.
follow-up, MN Hands and	but no later than 7 days following	MDH, Minnesota EHDI Program, Guidelines for Audiologist Referral to Early Intervention and Family-to-Family
Voices, and early	confirmation of hearing loss, as	Support (NHSAC 2009).
intervention.	per federal Part C final	(http://improveehdi.org/MN/library/files/MDH%20Audiology%20EI%20Referral%20Guidelines.pdf)
2. Audiologist gives parents a	regulations, 2011. For children	(intip.//improveendi.org/ww/iibrary/mes/wibri/020Addiology/020E1/020Neterrai/020ddideiiiles.pdi/
book and materials provided	birth through five years of age,	MN Help Me Grow—Refer a Child.
by MDH. (Includes MN	referrals are completed online	(http://helpmegrowmn.org/HMG/GetHelpChild/index.html)
version of North Carolina	through MN Help Me Grow	
"Beginnings" book for parents	system. Children older than 5	MDH/MDE, Sharing Child Information to Coordinate Early Childhood Special Education (ECSE) Referrals;
and the MN EHDI	years of age are referred directly	Guidance for Clinics and Schools (2016).
"Roadmap.")	to their school district for an	(http://improveehdi.org/MN/library/files/ecsereferguide.pdf)
	evaluation.	Early Childhood Technical Assistance Contex (ECTA) webpage on IDEA Bart Conditated links
If hearing loss is confirmed by	*Note: Medical clinics may	Early Childhood Technical Assistance Center (ECTA) webpage on IDEA Part C and related links.
clinical audiologist, and	require that parents sign	(http://ectacenter.org/partc/303regs.asp)
hearing aid use is indicated,		

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
parents need to make an appointment to see ENT for medical clearance for hearing aids and other care. (The child may see ENT on the same/different day, same/different clinic.) Parents may choose to connect with MN Hands and Voices themselves. The clinical audiologist may facilitate that connection.	permission for audiologists to refer the child to Part C. Parent permission for a Part C referral, if providing contact information only, is NOT required under Part C Regulations. However, positive communication with the family about a referral to early intervention is important. HIPAA federal law does require parent permission for the audiologist to share any health/hearing information through the Help Me Grow online referral system. FERPA federal law requires the schools to obtain parent permission to share any evaluation and services information back with the audiologist and PCP. 3. Audiologists are strongly encouraged to CONNECT the	ASHA, IDEA Part C Final Regulations (2011) and Issue Briefs. (https://www.asha.org/Advocacy/federal/idea/2011-IDEA-Part-C-Final-Regulations/) This webpage includes "Implications for Audiologists and Speech-Language Pathologists Who Provide Services for Infants and Toddlers With Hearing Loss and Their Families." MDH Step by Step Roadmap for Parents of Children with a Hearing Loss. (http://improveehdi.org/MN/library/files/roadmapenglish.pdf) North Carolina, Beginnings for Parents of Children who are Deaf or Hard of Hearing (https://ncbegin.org) Understanding Child's Hearing Loss; A Guide for Parents, Beginnings book, order information. (http://ncbegin.org/product/understanding-your-childs-hearing-loss-a-guide-for-parents/) This book is available in English and Spanish, also on CD Rom. The MN Version is in English only and is currently under review by an interagency committee. MN Hands and Voices webpage Refer a Family. (https://www.mnhandsandvoices.org/refer-family)
(No activities are described in this cell.)	family with MN Hands and Voices. When MDH receives the audiologist's report of confirmed hearing loss, follow-up for the child moves from the MDH Newborn Screening section to MDH EHDI Follow-up Staff. MDH Follow-up staff alert local	MDH EHDI Follow-up, Improve EHDI. (http://www.improveehdi.org/mn/) MN Hands and Voices. (https://www.mnhandsandvoices.org/) MN Hands & Voices Parent Guides. (https://www.mnhandsandvoices.org/about-us.aspx)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
	county Public Health of the child's	
	confirmed hearing loss and ask	
	local Public Health Nurse to help	
	with follow-up as needed. LPHN	
	will report activities back to MDH	
	EHDI Follow-up staff.	
	MDH typically communicates with	
	child's pediatrician again to report	
	confirmation of hearing loss and	
	offer any needed assistance and	
	information.	
	MDH Follow-up staff contacts MN	
	Hands and Voices. MDH has	
	contracted with MN H&V to make	
	initial calls to families of children	
	newly diagnosed with hearing	
	loss. MN H&V also reports contact	
	data back to MDH Follow-up staff.	
	(Soeven if an earlier connection	
	with MN H&V was not facilitated	
	by the clinical audiologist, a MN	
	Hands and Voices Parent Guide	
	will now reach out to the family.)	
When medical clearance for	Clinical audiologist may be in	UMN Lions Infant Hearing Device Loaner Program.
hearing aid is approved,	contact with Lion's Hearing Aid	(https://hearbank.web.health.state.mn.us/home.xhtml)
family will need to go back to	Loaner program (Families of very	MN Statute 62Q.675 Hearing Aids; Persons 18 or Younger.
clinical audiologist for hearing	young children can borrow	(https://www.revisor.mn.gov/statutes/?id=62Q.675) Note: This bill does not apply to employers who are self-
aid choice, fitting, earmold	hearing aid(s) for up to a year.)	insured (ERISA).
impressions.	LDIN considerated to the ASSE	·
Family may receive a phone	LPHN reports status back to MDH	(No resources are listed in this cell.)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
call from a local Public Health Nurse to check in with parents and provide assistance as needed to get medical or audiological care, services, etc. LPHN also assists with MDH EHDI "Loss to Follow-up" efforts.	Follow-up staff.	
Parents receive a 3-ring binder of information and a link to an online pdf version in the mail from MDH EHDI Follow-up staff about 2 weeks after the clinical audiologist reports the child's hearing loss to MDH. ("What You Need to KnowResources for Families")	MDH Follow-up program mails a binder of printed information to the parents "What You Need to KnowResources for Families" and a link to an electronic pdf format of the binder. An interagency committee of professionals and parents review/update the contents of the binder yearly.	MDH Improve EHDI, What you Need to Know; Resources for Families binder, information for parents. (http://www.improveehdi.org/mn/resources.cfm) What You Need to Know; Resources for Families (pdf) (http://www.health.state.mn.us/divs/cfh/program/cyshn/content/document/pdf/ehdibinder.pdf)
Family receives a call from a MN Hands & Voices Parent Guide to offer information and support, connections to other services.	(No activities are described in this cell.)	MN Hands and Voices, Our Services. (https://www.mnhandsandvoices.org/about-us/our-services)
(No activities are described in this cell.)	Referral to Early Intervention by clinical audiologist has begun through online Help Me Grow system or directly to local school districts.	Referrals to Early Intervention through MN Help Me Grow. (http://helpmegrowmn.org/HMG/index.htm)
Parents return to clinical audiologist to get hearing aid,	(No activities are described in this cell.)	(No resources are listed in this cell.)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
instruction on hearing aid care. New ear molds will be needed often.		
Parents may meet with MN H&V Parent Guide in person or talk on the phone. Parents receive a folder of information from MN H&V.	MN Hands & Voices compiles a folder of information appropriate for each family. It currently includes resources such as the <i>Pathways</i> DVD from N. Carolina Beginnings, "The Book of Choice", family stories, and information about H&V.	N. Carolina Beginnings, Pathways to Language and Communication, DVD ordering. (http://ncbegin.org/product/pathways-to-language-and-communication/) Hands & Voices "The Book of Choice," Edited by Leeann Seaver, ordering. (Available in English and Spanish). (http://www.handsandvoices.org/resources/products.htm) MN Hands & Voices, Family Stories. (https://www.mnhandsandvoices.org/first-stop/parent-stories.aspx)
Parents return to their PCP for well-child visits, etc.	(No activities are described in this cell.)	(No resources are listed in this cell.)
(No activities are described in this cell.)	When notified through the HMG system or direct referral, the school district intake person and B-3 ECSE staff members meet and make plans for who/how to respond to referral. Team should include Teacher DHH and Educational Audiologist, along with ECSE program staff (ECSE Teacher, SLP, OT, PT as appropriate to the individual child. Teams are encouraged to ask parents to include the referral source on release of information to share status/eligibility.	MDE MN Help Me Grow. (http://helpmegrowmn.org/HMG/index.htm) This site includes information and resources for parents and professionals on child development, referral to Part C Infant and Toddler Intervention or Part B Special Education, and support services. MN Department of Education (MDE), Early Childhood Special Education. (http://education.state.mn.us/MDE/dse/ecse/) MDE, Part B and Part C Resources. (http://education.state.mn.us/MDE/dse/ecse/bc/) The posted documents "support efforts of school districts to meet Early Childhood Special Education program requirements established by the Individuals with Disabilities Education Act (IDEA) and Minnesota statutes and rules." This webpage includes links to post-referral requirements and processes for young children referred for Part C or Part B evaluation, assessment and program planning. MDH/MDE, Sharing Child Information to Coordinate Early Childhood Special Education (ECSE) Referrals; Guidance for Clinics and Schools (2016). (http://improveehdi.org/MN/library/files/ecsereferguide.pdf)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
Parents receive a call from local Early Intervention intake person. Developmental screening and/or planning for an eligibility evaluation, developmental assessment starts. Parents participate in Part	Team meets to determine evaluation team, service coordinator, steps and timelines for eligibility evaluation and assessment for IFSP development. The educational team completes	MN State Newborn Hearing Screening Advisory Committee, Knowledge and Competencies for Professionals Working with Young Children who are Deaf and Hard of Hearing and their Families, 2010 Recommendations. (http://www.improveehdi.org/wi/library/files/MDH%20Knowledge%20and%20Competencies.pdf) MN Low Incidence Projects/EHDI document, Part C Service Coordinator's/Service Provider's/IEP Case
C/B eligibility evaluation and developmental assessment for the child, conducted by a team of education professionals. Following the eligibility	eligibility evaluations and assessments with the family. They discuss needs, services, early intervention providers, and educational placements appropriate to support each	Manager's Checklist: Supporting Families of Children Who are Deaf or Hard of Hearing. (http://www.mnlowincidenceprojects.org/documents/ehdi_service_coordinator_checklist_July2015_accessible. pdf) MDE, Part C and Part B Resources. (http://education.state.mn.us/MDE/dse/ecse/bc/) This webpage includes a "Part C Eligibility Determination Flowchart" and IFSP Form Guidance for educational teams, and a "Summary of Your Part C Procedural Safeguards" for parents.
evaluation and assessment activities, an IFSP/IEP is written for eligible children and the family starts to receive Family-Centered EI or ECSE services.	MN Help Me Grow, Diagnosed Conditions Affecting Development for information related to automatic eligibility for Part C services. (http://helpmegrowmn.org/HMG/HelpfulRes/ResourcesProf/DiagCondAffectDev/index.html) MN Low Incidence Projects – EHDI online resources, Assessment and Outcomes Reporting for DHH. (http://www.mnlowincidenceprojects.org/ehdiAssessment.html) A Parent's Guide to Deaf and Hard of Hearing Early Intervention Recommendations. (http://www.handsandvoices.org/resources/jcih-parent-guide.html)	
		Centers for Disease Control (CDC), Making a Plan for Your Child; IFSP Considerations for Children Who are Deaf or Hard of Hearing. (http://www.cdc.gov/ncbddd/hearingloss/freematerials/planforyourchild.pdf) MN Administrative Rule for Part B, Special Education Eligibility under Deaf and Hard of Hearing Categorical Criteria. (https://www.revisor.mn.gov/rules/?id=3525.1331)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
		MN Collaborative for DHH, Discussion Guide for Language and Communication Focused IEPs for Deaf and Hard
		of Hearing Learners (2015). (https://mn.gov/deaf-commission/assets/Language-and-Communication-Focused-
		IEPs-for-Learners-Who-Are-Deaf-or-Hard-of-Hearing-Discussion-Guide_tcm1063-154134.pdf)
		IEP Discussion Guide Webinars supplement the Discussion Guide for Language and Communication Focused IEPs
		for Deaf and Hard of Hearing Learners (2015).
		(https://mn.gov/deaf-commission/advocacy-issues/education/iep-discussion-guide/webinars/)
		MN Hands and Voices "Advocacy, Support and Training (ASTra) Program.
		(http://handsandvoices.org/astra/index.html)
		The ASTra website Includes information for families on IDEA and IEP considerations for children who are DHH. It
		includes a list of resources, including the book "Educational Advocacy For Students Who are Deaf or Hard of
		<u>Hearing" ordering information</u> . (http://handsandvoices.org/resources/products.htm#astra)
		PACER Center, Early Childhood Family Information and Resources Project.
		(http://www.pacer.org/ec/)
		PACER Center, Parent Special Education Information
		(http://www.pacer.org/parent/)
		PACER Center, Special Education Rights.
		(http://www.pacer.org/publications/specedrights.asp)
By this time, child will need to	(No activities are listed in this	(No resources are listed in this cell.)
be seen again for follow-up	cell.)	
clinical audiology		
appointment to re-make		
earmolds, check hearing aid,		
etc.		
At some point in the first year	PCP referrals to ophthalmology	MDH Step by Step Roadmap for Parents of Children with a Hearing Loss.
after confirmation of hearing	and genetics are recommended by	(http://improveehdi.org/MN/library/files/roadmapenglish.pdf)
loss, the child and family may	the MN EHDI system (typically	MDH Improve EHDI, Specialty Care. (http://www.improveehdi.org/mn/specialty/)
see medical specialists in	discussed by the PCP, clinical	improve Endi, specially care. (http://www.improveendi.org/init/specially/)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
ophthalmology and genetics.	audiologist, ENT or other professionals with reference to the MN EHDI Roadmap for families.	MDH handout for parents, Genetics of Hearing Loss. (http://improveehdi.org/MN/library/files/Genetics_of_Hearing_Loss_(MDH).pdf)
The child and family begin to receive EI or ECSE services	Early Intervention Services / Preschool Special Education Services are initiated. Given parent permission to share information, Early Intervention services providers and medical providers are encouraged to continue to communicate in support of the child and family.	Division for Early Childhood (DEC), DEC Recommended Practices in early intervention/early childhood special education 2014. (http://www.dec-sped.org/recommendedpractices) ECTA Center, online edition of the DEC Recommended Practices, Practice Guides, Performance Checklists, and Videos. (http://ectacenter.org/decrp/decrp.asp) MN Centers of Excellence for Young Children with Disabilities. (https://mncoe.org/) For links to INSPIRE ACTION initiatives. (https://mncoe.org/inspire-action/) Best Practices in Family-Centered Early Intervention for Children Who Are Deaf or Hard of Hearing; An International Consensus Statement. (https://academic.oup.com/jdsde/article/18/4/429/562489) 2013 Supplement to the JCIH 2007 Position Statement, Principles and Guidelines for Early Intervention After Confirmation That a Child Is Deaf or Hard of Hearing. (http://pediatrics.aappublications.org/content/early/2013/03/18/peds.2013-0008) A Parent's Guide to Deaf and Hard of Hearing Early Intervention Recommendations based on JCIH 2013. (http://www.handsandvoices.org/resources/jcih-parent-guide.html) MN Low Incidence Projects-EHDI, Early Intervention Toolkit: 2015 Portfolio of Suggested Early Intervention Resources; Supporting Families of Young Children Who Are Deaf, Deafblind or Hard of Hearing. (http://www.mnlowincidenceprojects.org/earlyInterventionToolkit 2015portfolio.html)
Additional services that may be provided to the family:Continued contact/support from MN H&V Parent Guides and family activitiesConnection with D/HH	(No activities are listed in this cell.)	MN Deaf Mentor Family Program. (http://lifetrack-mn.org/services/dmfp) MN Deaf and Hard of Hearing Role Model Services. (http://www.lifetrack-mn.org/rolemodel)

Child and Family	Professionals / System Activities	Related Information—Selected Websites, Online Resources
Family Mentor Program		MN Department of Health, find a Local Health Department or County Health Board
through Lifetrack Resources		(http://www.health.state.mn.us/divs/opi/gov/find.html)
County Social Services		Local Public Health Nurses who are EHDI Key Contacts by county.
		(http://improveehdi.org/mn/library/files/countykeycontacts.pdf)
County Public Health		
Services		MN Department of Human Services webpage Program Overviews
		(https://mn.gov/dhs/partners-and-providers/program-overviews/)
Local family support groups		
Additional medical/private		
therapy services if child has		
multiple needs or with parent		
choice		

Additional Selected Publications, listed for your review:

Cole, E., and Flexer, C., Children with Hearing Loss; Developing Listening and Talking, Birth to Six, 3rd Ed., Plural Publishing, 2016. (http://pluralpublishing.com/publication_chl3ed.htm)

<u>Families: Knowing Families, Tailoring Practices, Building Capacity, DEC Recommended Practices Monograph Series No. 3, CEC-DEC 2017</u>. (http://bookstore.dec-sped.org/product-p/decrp3.htm)

Gallaudet University, Visual Language Visual Learning Project VL2 Parent Package. (http://vl2parentspackage.org/)

MN Hands and Voices webpage *Resource Directory*. (https://www.mnhandsandvoices.org/resources-information/resource-directory). This webpage provides information about, and links to, Minnesota and National organizations.

Moeller, M.P., Ertmer, D.J., Stoel-Gammon, C., *Promoting Language and Literacy in Children Who are Deaf or Hard of Hearing*, Brookes Publishing 2016. (http://products.brookespublishing.com/Promoting-Language-and-Literacy-in-Children-who-are-Deaf-or-Hard-of-Hearing-P882.aspx)

NCHAM EHDI e-Book, A Resource Guide for Early Hearing Detection and Intervention (2018). (http://infanthearing.org/)

NCHAM eBook, *Preparing to Teach, Committing to Learn: An Introduction to Educating Children Who Are Deaf/ Hard of Hearing (2017.* (https://www.infanthearing.org/ebook-educating-children-dhh/)

Rhoades, E.A., Duncan, J., *Auditory Verbal Practice; Family-Centered Early Intervention, Second Ed.*, Charles Thomas Publisher, 2017. (https://www.ccthomas.com/details.cfm?P_ISBN13=9780398091477)

Sass-Lehrer, Marilyn, Ed., Early Intervention for Deaf and Hard-of-Hearing Infants, Toddlers, and Their Families, Oxford University Press, 2015.

(https://global.oup.com/academic/product/early-intervention-for-deaf-and-hard-of-hearing-infants-toddlers-and-their-families-9780199957743?cc=us&lang=en&)

Supporting Young Children who are Dual Language Learners with or at-risk for Disabilities, Young Exceptional Children Monograph Series No.14. CEC-DEC 2012.

(https://bookstore.dec-sped.org/product-p/14.htm)

EHDI System String Demonstration -- Possible Participant Roles:

- Parent(s), Grandparent(s)
- MN Dept of Health Newborn Screening, EHDI Follow-up Staff
- Pediatrician/Family Practice Dr.
- Clinical Audiologist
- ENT Specialist
- Medical Specialists: Ophthalmologist, Geneticist
- Local Public Health Nurse
- MN Hands & Voices Parent Guide
- MDE/HMG online referral
- District Intake Person
- District B-3 / ECSE team: Teacher DHH, Educational Audiologist, ECSE Teacher, SLP, Others
- Deaf Mentor/ Hard of Hearing Adult contact
- County Social Services Provider