

**FINAL DOCUMENT--UPDATED JULY 13 2006**

The left column the National Goals, Objectives, and Performance Indicators. This reflects changes accepted by the Executive Committee in the June 2006 conference call.

Data Items refer to recommended minimum data items. Additional detail regarding data items are provided in the "Data Items" sheet included in this file.

The numerator and denominator columns refer to calculations used in reporting counts and percentages referenced in certain performance indicators.

Additional notes regarding the goals/objectives/performance indicators, data items, and formulas are provided in the "Goals and Objectives" sheet included in this file.

**GOALS**

Objective Performance Indicators	Data Items	Formula	
		Numerator	Denominator
GOAL 1. ALL NEWBORNS WILL BE SCREENED FOR HEARING LOSS BEFORE 1 MONTH OF AGE, PREFERABLY BEFORE HOSPITAL DISCHARGE.			
1.1 Universal screening. All birthing facilities will have a universal newborn and infant hearing screening (UNHS) program that screens all newborns. Small hospitals that do not screen newborns will refer infants to a screening program.			
1.1a. Number and percent of birthing hospitals in the state or territory in which 98% of the infants born are screened before one month of age.	6_Child (Unique Identifier) 27_Child Date of Birth 1_Birth Facility 32_Date of Screening Test	Number of hospitals for whom 98% of births were screened by 1 month of age	Total number of hospitals

<p>1.1.b. Number and percent of small hospitals that do not screen but have plans for referral of infants to a screening program including designation of responsible staff positions(s) and timeline.</p>			
<p>1.1.c. Number and percent of infants screened before 1 month of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 32_Date of Screening Test 1_Birth Facility 4_Facility ID 11_Mother's DOB 12_Mother's ethnicity 13_Mothers race 14_Mothers education 26_Child Gender</p>	<p>All births with completed initial screen by 1 month of age</p>	<p>All births</p>
<p>1.1.d. Number and percent of infants whose families refuse screening.</p>	<p>1_Birth Facility 32_Date of Screening Test 3_Number of families that refuse screening</p>	<p>All births where family refuse initial screen</p>	<p>All births</p>
<p>1.2 Information on newborn hearing and the screening process. All birthing facilities will have linguistically appropriate and culturally sensitive brochures or other materials to inform parent(s) or guardians of newborns about the newborn hearing and screening process before the infant is screened.</p>			
<p>1.3 Demographic data. All hospitals will collect demographic data such as race/ethnicity, educational level of the mother, and type of insurance covered before hospital discharge.</p>			
<p>1.3.a. Number and percent of infants in each racial/ethnic group.</p>	<p>1_Birth Facility 6_Child (Unique Identifier) 27_Child Date of Birth 12_Mother's ethnicity 13_Mothers race</p>	<p>All births in each category</p>	<p>All births</p>

<p>1.3.b. Percent of infants whose mothers are in each category of level of education.</p>	<p>1_Birth Facility 6_Child (Unique Identifier) 27_Child Date of Birth 14_Mothers education 11_Mother's DOB</p>	<p>All births with mother in each category</p>	<p>All births</p>
<p>1.3.c. Number/percent of mothers in each insurance category.</p>	<p>1_Birth Facility 6_Child (Unique Identifier) 27_Child Date of Birth 31_Insurance Payment Type</p>	<p>All births in each insurance category</p>	<p>All births</p>
<p>1.4 Out of hospital births. States will have a mechanism to ensure that infants not born in birthing hospitals will receive a hearing screening.</p>			
<p>1.4.a. Number and percent of infants born out of hospital.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 1_Birth Facility 2_Type of Facility</p>	<p>All births outside of hospital</p>	<p>All births</p>
<p>1.4.b. Number and percent of infants born out of the hospital that received a hearing screening before one month of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 1_Birth Facility 2_Type of Facility 32_Date of Screening Test</p>	<p>All births outside of hospital with completed hearing screening by 1 month of age</p>	<p>All births outside of hospital</p>
<p>1.5 Financial barriers. Each state will develop a system to reduce/eliminate financial barriers to newborn hearing screening.</p>			
<p>1.6 Reporting. Results of the hearing screening will be provided to the infant's parents and primary care provider (PCP).</p>			

<p>1.7 Linkage and referral to audiologic follow-up. Each state will identify a linkage system to ensure that all infants who do not pass the hearing screening will have appropriate referral for diagnostic evaluation. Referral rates will be 4 percent or less.</p>			
<p>1.7.a. Number and percent of infants that did not pass the initial inpatient or outpatient screen and are referred for diagnostic audiologic evaluation.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 37_Recommendation 32_Date of Screening Test 1_Birth Facility 4_Facility ID</p>	<p>All infants with a final "Not Pass" screen by 3 months of age</p>	<p>All births screened by 3 months of age</p>
<p>1.8 Education and training. Hospitals or EHDI program will have a training plan for all service providers, including screeners (inpatient and outpatient), nurses, and physicians.</p>			
<p>1.9 Screening protocols. Hospitals will have written hearing screening protocols that include standard policies, procedures for screening, and appropriate forms.</p>			
<p><b>GOAL 2. ALL INFANTS WHO SCREEN POSITIVE WILL HAVE A DIAGNOSTIC AUDIOLOGIC EVALUATION BEFORE 3 MONTHS OF AGE.</b></p>			
<p>2.1 Audiologic evaluation. Audiologists will administer a comprehensive audiologic evaluation to all infants who screen positive for hearing loss before 3 months of age to confirm infant/child hearing loss, including type, configuration, and degree.</p>			

2.1.a. Number and percent of infants who screened positive and received a comprehensive audiologic evaluation before 3 months of age.	6_Child (Unique identifier) 27_Child Date of Birth 37_Recommendation 32_Date of Screening Test 34_R Ear Screen Results 36_L Ear Screen Results 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag: Degree of HL 43_L Ear Diag: Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL RISK FACTORS TBA	All "Not Pass" screens with diagnostic evaluation by 3 months of age	All "Not Pass" screens
2.1.b. Number and percent of infants with (1) bilateral hearing loss or (2) unilateral hearing loss. Preferably this will also indicate the number and percent of infants with bilateral hearing loss where both ears (3) have the same diagnosis and (4) have a different diagnosis.	6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL	All births with permanent bilateral or unilateral hearing loss.	All births
2.1.c. Number and percent of infants with (1) conductive hearing loss, (2) sensorineural hearing loss, or (3) mixed hearing loss in one or both ears.	6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL	All births with (1) permanent conductive, (2) sensorineural or (3) mixed hearing loss in either or both ears.	All births
2.1.d. Number and percent of infants with mild, moderate, severe, or profound hearing loss.	6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag: Degree of HL 43_L Ear Diag: Degree of HL	All births with (1) mild, (2) moderate, (3) severe, or (4) profound hearing loss.	All births

<p>2.1.e. Number and percent of infants with unilateral or bilateral auditory neuropathy/auditorydys-synchrony hearing loss.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL</p>	<p>All births with (1) unilateral, or (2) bilateral auditory neuropathy/auditory dys-synchrony hearing loss.</p>	<p>All births</p>
<p>2.1.f. Number and percent of infants referred for audiologic evaluation who were lost to follow-up.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 37_Recommendation 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag: Degree of HL 43_L Ear Diag: Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL</p>	<p>All children with a "Not Pass" screen who are older than 6 months of age, but have not received a diagnostic determination of hearing loss.</p>	<p>All "Not Pass" screens</p>
<p>2.2 Evaluation protocols. Each state will develop and make accessible protocols and guidelines for appropriate diagnostic audiologic evaluation and recommendations for management (e.g., amplification, rehabilitation). These guidelines will be developed with input from state and local audiologists and based on current national guidelines.</p>			
<p>2.3 List of diagnostic audiologic providers. Each state will maintain a current resource list of diagnostic centers and/or pediatric audiologists who have experience and expertise in administering diagnostic audiologic evaluations for infants, according to the protocol and guidelines.</p>			

<p>2.4 Linkage to appropriate follow-up. Each state will identify a linkage system to ensure that families of infants identified with hearing loss will have appropriate referral to medical, audiologic, and intervention services, according to state resources.</p>			
<p>2.4.a. Number and percent of infants identified with hearing loss referred to medical specialists, such as otolaryngologists, ophthalmologists, and geneticists.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 55_Date Referral Made 54_Referral 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss?</p>	<p>All identified with hearing loss referred to any medical specialists no later than 3 months post diagnosis</p>	<p>All identified with hearing loss</p>
<p>2.4.b. Number and percent of infants with hearing loss who are referred to early intervention services, including counseling and support services.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 55_Date Referral Made 54_Referral 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss?</p>	<p>All identified with hearing loss referred to any early intervention services no later than 3 months post diagnosis</p>	<p>All identified with hearing loss</p>
<p>2.4.c. Number and percent of infants with hearing loss who are referred to on-going audiologic evaluations and services.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 55_Date Referral Made 54_Referral 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss?</p>	<p>All identified with hearing loss referred to on-going audiologic evaluations and services no later than 3 months post diagnosis.</p>	<p>All identified with hearing loss</p>
<p>2.5 Education and training for audiologists. Each state will develop an education/ training plan for audiologists to ensure competency in pediatric evaluation, management, and family counseling.</p>			

<p>2.6 Education and Training for other providers. Each state will develop an education and training plan for primary care providers, public health nurses, and others on the importance and process of audiologic evaluation.</p>			
<p>2.7 Information on the audiologic evaluation process. Parents and guardians will be informed in a culturally sensitive and language-appropriate manner about the diagnostic audiologic evaluation process and report.</p>			
<p>GOAL 3. ALL INFANTS IDENTIFIED WITH HEARING LOSS WILL RECEIVE APPROPRIATE EARLY INTERVENTION SERVICES BEFORE 6 MONTHS OF AGE (MEDICAL, AUDIOLOGIC, AND EARLY INTERVENTION).</p>			
<p>3.1 Medical services. All infants identified with hearing loss will receive appropriate medical services, such as primary care, visual screening, genetic services, and counseling before 6 months of age.</p>			
<p>3.1.a. Number and percent of infants with hearing loss who received appropriate medical services before 6 months of age from each of the following: (1) a primary care provider, (2) an otolaryngologist, and when appropriate, (3) an ophthalmologist, (4) a geneticists/genetic counselors, and/or (5) other medical specialist.</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  51_Type of Eval, Serv, or Int                  52_Date of Eval, Serv, or Int                  47_Int or Service Start Date                  40_R Ear Diag Degree of HL                  43_L Ear Diag Degree of HL                  41_R Ear Diag Type of HL                  44_L Ear Diag Type of HL                  53_Risk Fact Monitoring                  58_Genetic Eval App</p>	<p>All identified with hearing loss who received medical services from each category before 6 months of age</p>	<p>All identified with congenital hearing loss</p>

<p>3.1.b. Number and percent of infants with hearing loss who received appropriate medical services before 12 months of age from each of the following: (1) a primary care provider, (2) an otolaryngologist, and when appropriate, (3) an ophthalmologist, (4) a geneticists/genetic counselors, and/or (5) other medical specialist.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int 47_Int or Service Start Date 40_R Ear Diag Degree of HL 43_L Ear Diag Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL 53_Risk Fact Monitoring 58_Genetic Eval App</p>	<p>All identified with hearing loss who received medical services from each category before 12 months of age</p>	<p>All identified with congenital hearing loss</p>
<p>3.2 Early intervention services. Each state will ensure that all infants and children with documented hearing loss will receive appropriate early intervention services from Part C or other state approved intervention services. Service coordination will be provided to eligible children.</p>			
<p>3.2.a. Number and percent of infants with hearing loss who were enrolled in an intervention program before 6 months of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 47_Int or Service Start Date 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int</p>	<p>All identified with hearing loss enrolled in intervention before 6 months of age</p>	<p>All identified with congenital hearing loss</p>
<p>3.2.b. Number and percent of infants with hearing loss who were enrolled in an intervention program before 12 months of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 47_Int or Service Start Date 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int</p>	<p>All identified with hearing loss enrolled in intervention before 12 months of age</p>	<p>All identified with congenital hearing loss</p>

<p>3.2.c. States and Territories will have a policy in place that will make available to families of children with identified hearing loss, information regarding family support and early intervention services available.</p>			
<p>3.2.d. Number and percent of infants who are lost to follow-up after identification.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag Degree of HL 43_L Ear Diag Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL 47_Int or Service Start Date 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int</p>	<p>All children identified with hearing loss who have not received intervention services, and who are (1) twelve months of age or older, AND (2) at least six months post diagnosis.</p>	<p>All identified with hearing loss</p>
<p>3.2.e. Number and percent of infants with hearing loss enrolled in Part C services with mild hearing loss, moderate hearing loss, severe hearing loss, profound hearing loss, or auditory neuropathy/auditory dys-synchrony.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag Degree of HL 43_L Ear Diag Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL 47_Int or Service Start Date 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int</p>	<p>All identified with hearing loss AND enrolled in Part C, for each degree of hearing loss group</p>	<p>All identified with (degree of hearing loss) hearing loss</p>
<p>3.3 Audiologic services. All infants identified with hearing loss will receive appropriate audiologic services before 6 months of age.</p>			
<p>3.3.a. Documentation that confirms that families of children with hearing loss received information on communication and amplification options.</p>			

<p>3.3.b. Documentation of plan for management of each infant's/child's assistive technology which include, at a minimum, use of probe microphone measures and recommendations for frequency of evaluation.</p>			
<p>3.3.c. Documentation of protocols and guidelines for managing the aural habilitation or rehabilitation of each infant or child.</p>			
<p>3.3.d. Number and percent of infants fitted with personal amplification before 6 months of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 38_Date of Diag Eval 46_Date of Hearing Aid Fit 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag Degree of HL 43_L Ear Diag Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL</p>	<p>All receiving personal amplification by 6 months</p>	<p>All identified with congenital hearing loss</p>
<p>3.3.e. Number and percent of infants fitted with personal amplification before 12 months of age.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 38_Date of Diag Eval 46_Date of Hearing Aid Fit 51_Type of Eval, Serv, or Int 52_Date of Eval, Serv, or Int 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 40_R Ear Diag Degree of HL 43_L Ear Diag Degree of HL 41_R Ear Diag Type of HL 44_L Ear Diag Type of HL</p>	<p>All receiving personal amplification by 12 months</p>	<p>All identified with congenital hearing loss</p>
<p>3.4 Policy statement for stakeholders. Each state will adopt and distribute as appropriate a policy regarding the rights of every family to choose the communication modes and methods that are most appropriate for their child.</p>			

<p>3.5 Resource guide. All states will develop a comprehensive, family-friendly Resource Guide that will include: material from a variety of sources; a list of relevant web sites; a list of state contact people. The Guide will be available in print as well as on a web site and in major languages used in the state, pending available resources.</p>			
<p>3.6 Membership of IFSP or other intervention team. All families who have a child with identified hearing loss should have an individual on their intervention team who has knowledge, experience, and expertise with the issues related to children who are deaf or hard of hearing.</p>			
<p>3.7 Education and training. States will provide opportunities to Part C and other intervention services to receive training on specific issues related to deafness and hearing loss.</p>			
<p>3.8 Quality intervention systems. States shall make sure that high quality early intervention systems are available, including those that meet the needs of diverse populations and children with additional disabilities.</p>			

<p>3.9 Recommendations for early intervention providers. States shall develop a set of recommendations for early intervention providers who work with children who are deaf or hard of hearing and their families that include: identification of objective sources of information for families to learn about communication options, guidelines for monitoring the communication and social skill development of the child with hearing loss at 6-month intervals, identification by each early intervention program of personnel within their staffs who are specialists in deaf and hard of hearing issues, process for linking to family-to-family support within an early intervention system, list of preschool program options that are particularly prepared to serve children who are deaf or hard of hearing, and inclusion of this information in the preparation of the family for transition at age 3 years.</p>			
<p>3.9.a. Documented distributions of a resource guide that presents balanced information on communication options.</p>			
<p>3.9.b. Documented test scores for receptive and expressive language communication and social skill development at 6-month intervals.</p>	<p>6_Child (Unique Identifier)                  27_Child Date of Birth                  51_Type of Eval, Serv, or Int                  52_Date of Eval, Serv, or Int                  48_Language Inventory Used                  49_Receptive Language Level                  50_Expressive Language Level                  63_Social Development Inventory                  64_Social Development Score                  38_Date of Diag Eval                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  40_R Ear Diag Degree of HL                  43_L Ear Diag Degree of HL                  41_R Ear Diag Type of HL                  44_L Ear Diag Type of HL</p>		

3.9.c. Documentation of annual updated guidelines.			
3.9.d. Number and percent of families referred to parent-to-parent support program.	6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 54_Referral 55_Date Referral Made	All families of children with hearing loss referred to parent-to-parent support program	All identified with hearing loss
3.10 Parent participation. Each state will ensure families of children with hearing loss have an opportunity to actively participate in the EHDI system.			
<b>GOAL 4. ALL INFANTS AND CHILDREN WITH LATE ONSET, PROGRESSIVE OR ACQUIRED HEARING LOSS WILL BE IDENTIFIED AT THE EARLIEST POSSIBLE TIME.</b>			
4.1 Risk Factors: Each hospital, audiologist and other providers will identify infants with risk factors for hearing loss and transmit the information to state.			
4.1.a. Number/percent of infants with one or more risk factors.	SPECIFIC RISK FACTORS TBA 6_Child (Unique identifier) 27_Child Date of Birth 53_Risk Fact Monitoring	All births with one or more risk factor.	All births
4.2 Monitoring of at-risk infants. Each state will have a mechanism in place to monitor the hearing status of infants at-risk for late onset and progressive hearing loss.			

<p>4.2.a. Number and percent of infants with risk factors who receive an audiological evaluation before 3 years of age.</p>	<p>SPECIFIC RISK FACTORS TBA 6_Child (Unique Identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 53_Risk Fact Monitoring</p>	<p>All births with one or more risk factor that receives audiological testing prior to 3 years of age</p>	<p>All births with one or more risk factor</p>
<p>4.3 Acquired hearing loss. Each state will have a mechanism in place to identify and provide follow-up services for infants and children with acquired hearing loss.</p>			
<p>4.3.a. Number/percent of infants/children identified with acquired hearing loss.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 32_Date of Screening Test 34_R Ear Screen Results 36_L Ear Screen Results 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 53_Risk Fact Monitoring</p>	<p>All births that "Passed" screening process, later identified to have hearing loss</p>	<p>All births</p>
<p><b>GOAL 5. ALL INFANTS AND YOUNG CHILDREN (0 - 3 YEARS) WITH HL WILL HAVE A MEDICAL HOME AS DEFINED BY THE AMERICAN ACADEMY OF PEDIATRICS.</b></p>			
<p>5.1 Medical Home: Each child (0-3 years) with a confirmed hearing loss will have an identified primary care provider at the time of hearing loss confirmation.</p>			
<p>5.1.a. Number and percent of children (0-3 year with confirmed hearing loss), whose records include the name of the child's primary care provider at the time of hearing loss confirmation.</p>	<p>6_Child (Unique identifier) 27_Child Date of Birth 38_Date of Diag Eval 39_R Ear Diag Hearing Loss? 42_L Ear Diag Hearing Loss? 5_Med Home Ident at Dx</p>	<p>All children identified with hearing loss with PCP identified at time of diagnosis</p>	<p>All children identified with hearing loss</p>

<p>5.1.b. Documentation that the results of the child's (0-3 years, with confirmed hearing loss) audiologic evaluation were sent to their primary care provider.</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  38_Date of Diag Eval                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  5_Med Home Ident at Dx                  45_Aud Report Sent to Med Home</p>		
<p>5.2 Collaboration with early intervention. Each medical home will collaborate with early intervention service providers and the family with a child with HL 0-3y to facilitate early intervention services.</p>			
<p>5.3 Unbiased information. Each state will develop or adopt resources that can be shared with the medical homes and families to provide unbiased information.</p>			
<p>5.4 Education. In partnership with parents of children (0-3y) with confirmed hearing loss, states will develop a plan to provide education about the state EHDI program to medical homes.</p>			
<p>5.5 Parental input. Each state will have a mechanism for obtaining parent feedback and including parents in the process of development and evaluation processes for the medical home.</p>			
<p>GOAL 6. EVERY STATE OR TERRITORY WILL HAVE A COMPLETE EHDI TRACKING AND SURVEILLANCE SYSTEM THAT WILL MINIMIZE THE NUMBER OF CHILDREN NOT SCREENED OR LOST TO FOLLOW-UP.</p>			

<p>6.1 Comprehensive system. Each state will have a computerized system that maintains current information on hearing screening for every infant, evaluation for all infants and children who do not pass the screening and interventions for every infant and child from birth through 5 years of age with hearing loss.</p>			
<p>6.2 Policies and procedures. Each state will have written policies and procedures regarding operation of the EHDI Tracking and Surveillance System.</p>			
<p>6.3 Privacy and confidentiality. Each state will develop policies, procedures, and informed consent requirements regarding privacy and confidentiality of data in the EHDI Tracking and Surveillance System.</p>			
<p>6.4 Include all births. Each state will ensure that all live births in the state are included in the state EHDI Tracking and Surveillance System by matching with the states birth certificates registry as allowed by state policy.</p>			
<p>6.4.a. Number of live-born infants.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 28_State of Child Birth 56_Child State of Residency</p>	<p>All live-born infants</p>	
<p>6.4.b. Number/percent of infants screened.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 37_Recommendation 32_Date of Screening Test 34_R Ear Screen Results 36_L Ear Screen Results 28_State of Child Birth 56_Child State of Residency</p>	<p>All births ultimately screened by 3 months</p>	<p>All births</p>

<p>6.4.c. Documentation of number and percent of matches with vital records.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 28_State of Child Birth 56_Child State of Residency 32_Date of Screening Test</p>	<p>The proportion of infants and children reported to the EHDI Program whose records can be matched to the EBC through a unique identifier.</p>	<p>Total number of infants and children reported to the EHDI program</p>
<p>6.5 Risk factors for hearing loss. The state EHDI Tracking and Surveillance System will ascertain risk factors for hearing loss for every infant by linkage with other state data systems, such as hospital records, birth certificates, birth defects, metabolic screening, immunizations, etc</p>			
<p>a. Number of other data systems linked or integrated with EHDI.</p>			
<p>6.6 Newborn hearing screening results. The state EHDI Tracking and Surveillance System will capture all hearing screening results at birthing hospital within a week after discharge or transfer.</p>			
<p>6.6.a. Report on number and percent of infants screened that includes: results for each ear, technology used, and age at screening.</p>	<p>6_Child (Unique Identifier) 27_Child Date of Birth 32_Date of Screening Test 34_R Ear Screen Results 36_L Ear Screen Results 33_R Ear Equipment Type 35_L Ear Equipment Type 37_Recommendation</p>	<p>All births ultimately screened by 3 months of age</p>	<p>All births</p>
<p>6.7 Reporting mechanism for health care providers. Each state will provide a mechanism for hospitals, audiologists and other health care providers to report hearing screening results, evaluations and interventions.</p>			
<p>6.7.a. Number of providers that have protocols for reporting hearing screening and/or evaluation and/or intervention results .</p>	<p>57_Provider ID</p>	<p>Sum of all active provider unique IDs</p>	

<p>6.7.b. Proportion of health care providers that have protocols for reporting hearing screening and/or evaluation and/or intervention results that are actually reporting these results to the state.</p>	<p>57_Provider ID 6_Child (Unique Identifier) 27_Child Date of Birth 32_Date of Screening Test 34_R Ear Screen Results 36_L Ear Screen Results 37_Recommendation</p>	<p>Sum of all active provider unique IDs that are linked to actual screening, evaluation, and/or intervention data</p>	<p>Sum of all active provider unique IDs</p>
<p>6.8 Access to information. The state EHDI Tracking and Surveillance System will allow care managers and authorized health care providers to access relevant information about infants and children.</p>			
<p>GOAL 7. EVERY STATE WILL HAVE A COMPREHENSIVE SYSTEM THAT MONITORS AND EVALUATES THE PROGRESS TOWARDS THE EHDI GOALS AND OBJECTIVES.</p>			
<p>7.1 Advisory Committee. Each state’s advisory committee will meet routinely to provide guidance on the EHDI system. The committee should include professionals, individuals with hearing loss, families and children who have permanent hearing loss, and others to provide guidance on the development and evaluation of the EHDI system.</p>			
<p>7.2 Monitoring and evaluation. Each state EHDI program will develop a program evaluation plan in collaboration with the program Advisory Committee to ensure progress towards national and state program goals and objectives.</p>			
<p>7.3 Feedback from families. The state EHDI program will obtain feedback from parents on the EHDI process.</p>			
<p>7.4 Surveillance of follow-up services. Each state will ensure that infants and children with hearing loss receive ongoing follow-up services.</p>			

<p>7.4.a. Number of infants and children fitted with implants, by age at implantation</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  38_Date of Diag Eval                  39_R Ear Diag Hearing Loss?                  40_R Ear Diag Degree of HL                  41_R Ear Diag Type of HL                  42_L Ear Diag Hearing Loss?                  43_L Ear Diag Degree of HL                  44_L Ear Diag Type of HL                  51_Type of Eval, Serv, or Int                  52_Date of Eval, Serv, or Int                  59_Date of Cochlear Implant</p>	<p>Sum of all infants and children fitted with implants, with age at time of implant as a possible aggregating field</p>	
<p>7.4.b. Number and percent of infants and children with hearing loss primarily using (1) manual mode of communication, and (2) non-manual mode of communication at 6-month intervals.</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  52_Date of Eval, Serv, or Int                  60_Mode of Communication</p>	<p>All infants/children with hearing loss using each communication mode category.</p>	<p>All identified with hearing loss for whom these data are available</p>
<p>7.4.c. Number and percent of infants and children achieving communication and social skills scores commensurate with their cognitive abilities age at 1, 3, 5, and 7 years of age.</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  51_Type of Eval, Serv, or Int                  52_Date of Eval, Serv, or Int                  48_Language Inventory Used                  49_Receptive Language Level                  50_Expressive Language Level                  63_Social Development Inventory                  64_Social Development Score                  61_Cognitive Inventory Used                  62_Cognitive Development Score</p>	<p>Children who are no more than one SD below their cognitive level</p>	<p>All identified with hearing loss for whom these data are available</p>

<p>7.4.d. Number and percent of infants and children with hearing aids that receive follow-up visits at 2-month intervals until age 2 and 3-month intervals until age 3.</p>	<p>6_Child (Unique identifier)                  27_Child Date of Birth                  39_R Ear Diag Hearing Loss?                  42_L Ear Diag Hearing Loss?                  46_Date of Hearing Aid Fit                  51_Type of Eval, Serv, or Int                  52_Date of Eval, Serv, or Int</p>	<p>Children diagnosed before 1 year of age with at least 10 follow-up visits. Children diagnosed between 1 year and 2 years of age with at least 5 follow-up visits.</p>	<p>All with hearing aids</p>
--	--	--	------------------------------