

Iowa EHDI News

Your Sound Source for Early Hearing Detection & Intervention Information

Summer 2015

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Impact Follow Up?

Highlight from the Field

Non-Surgical Correction of Infant Ear Deformities

By: Douglas Henstrom, MD, FACS, and Barbara Gienapp
University of Iowa Department of Otolaryngology

Some statistical data suggests that infant ear deformities occur anywhere between 20 and 35 percent of all births. Unfortunately many pediatricians and caregivers believe that all outer ear deformities will self correct, or can be corrected through plastic surgery when the child has grown. However, it has been shown that ear deformities can negatively impact a child's emotional and physical development, which may lead to low self-esteem, anxiety, isolation and withdrawal. Those of us who care for patient with these deformities know that it is impossible to predict which course a deformed ear will take.

Dr. Douglas Henstrom, Facial Plastic and Reconstructive surgeon at the University of Iowa uses the EarWell™ Infant Ear Correction System to quickly, painlessly and non-surgically attempt to correct a majority of infant ear abnormalities. It is an external system applied to the infants' ear shortly after birth and is worn for 4 to 6 weeks. This is possible due to the remaining high levels of maternal estrogen in an infant that leads to increased cartilage pliability. This system is most effective when started within the first couple of weeks after birth.

For more information you can visit www.earwells.com. To refer a patient and schedule a consultation, please call our clinic at 319-356-3600.



Iowa's Early Hearing Detection & Intervention Program

Sound Bites

Updates from the EHDI Advisory Committee Meeting on April 2, 2015

Coming and Going: Committee Member Changes

- Bob Vizzini has served two full terms and will be leaving the committee. He is grateful to have been a part of the committee and has learned a lot.
- This meeting was Sally Nadolsky's last, as she is retiring on July 7th. Sabrina Johnson will serve as her replacement at this time.
- Valorie Caputo is also retiring at the end of June 2015. Stephanie Childers will serve as her replacement.
- Sarah Johnston, parent, will be joining the Advisory Committee in July 2015.
- Michelle Simmons, a nurse at Mercy Des Moines, will join the Advisory Committee in July 2015.
- Michelle Vaccero, parent, will join the Advisory Committee in July of 2015. Michelle previously served on the committee for one term.

Thank you to everyone for your service. Best of luck to those who are beginning new chapters in their lives and a warm welcome to those who are joining us.

Hearing Aid and Audio Funding

As of Monday, February 23, 2015, 100% of available funds for fiscal year 2014-2015 have been obligated with the Hearing Aids and Audiological Services program. Provider Claim Systems will begin to place children on a wait list and enroll them as funding is available ensuring that we can meet all previously obligated enrollments. Children enrolled or in process of enrollment will receive services as approved. Any outstanding claims, including invoice and insurance information as indicated, need to be submitted immediately or as soon as possible after the delivery of the service.

Tele-Audiology Update

There is a movement towards piloting tele-audiology services in a number of AEAs. Training will take place this spring and it is anticipated that the first pilot site will be up in the summer. Lenore Holte and Emily Andrews, pediatric audiologists for EHDI, will provide training and assist in protocol development. Diana Hansen, a pediatric audiologist, is prepared to mentor audiologists who are interested in conducting diagnostic ABRs.

Audiology Module Taskforce

There has been an education database for AEA audiologists since the late 90's. They will be rolling out a new system at the beginning of next school year in August 2015.

Next EHDI Advisory Committee Meeting: July 9
Comments or questions? Contact Tammy O'Hollearn at tammy.ohollearn@idph.iowa.gov or at either (515) 242-5639 or (800) 383-3826 (toll free).

Regional Program Updates:

- In March, AEA 267 kicked-off a workshop series for families with D/HH children ages 3-6 on building language and literacy skills at home.
- In April, Keystone AEA started a mentor/buddy program matching high school students to a 4th or 5th grade buddy.
- AEA 1 is also starting a Read With Your Child series to build ASL pre-reading and language building strategies.
- Ann Lupkes is working to develop D/HH specific workshops that will coincide with events already planned through AEA 267, including a transition fair for area high school students each year.
- ISD will offer summer enrichment camps.

Other topics/presentations:

- Esha presented on the follow-up analysis for 2014 (See Spring 2015 Newsletter)
- Emily Andrews presented on Gabrielle Watson's research results (See story on page 8 & 9)
- Committee members brainstormed an audiology checklist and annual EHDI program report content
- Tammy gave an update on the integration of EHDI database and the dried bloodspot database

Advisory Committee Members

Stephanie Childers, AuD
Pediatric Audiologist
Mississippi Bend AEA

John Cool
Assistant Administrator
Iowa School for the Deaf

Heather Dirks
Parent Representative

Jill Filitano Avery
Iowa Department of Human Rights
Office of Deaf Services

Marhsa Gunderson
Audiology Consultant
Deaf & Hard-of-Hearing
Iowa Department of Education

Diana Hanson, MS, CCC-A
Pediatric Audiologist
Iowa Ear Center

Teresa Hobbs
Early ACCESS Regional Coordinator
Northwest AES 12

Jeffrey Hoffman, DO
Iowa Academy of Family Physicians

Sabrina Johnson
Iowa Department of Human Services

Sarah Johnston
Parent Representative

Marcus Johnson-Miller
Chief, Bureau of Family Health
Title V Director
Iowa Department of Public Health

Kathy Miller
Iowa Association of the Deaf

Kimberly Noble Piper, RN, BS, CPH, CPHG
State Genetics Coordinator
Bureau of Family Health
Iowa Department of Public Health

Michelle Simmons, LPN
Mercy Hospital Medical Center

Mary Stevens, PhD
Director of Special Education
AEA 267

Shannon Sullivan, MD
Iowa Chapter of the
American Academy of Pediatrics
University of Iowa

Linda True
Audiologist
Heartland AEA

Michelle Vaccero
Parent Representative

Debra Waldron, MD, MPH
Director & Chief Medical Officer
Child Health Specialty Clinics

Eytan Young, MD
Iowa ENT Center, PLLC

*EHDI program staff and audiology the technical assistance team are also advisory committee members. (See page 5 for their contact information)

Introducing Bill

Bill Helms was hired in September 2014 as an EHDI audiologist (replacing Nick Salmon). He will be providing audiology technical assistance and training to hospitals and clinics in the western half of Iowa.

Bill earned both his bachelor's and master's degrees in audiology at the University of Tennessee, Knoxville. In 2006, he earned his doctorate in audiology from the University of Florida.

Bill started his audiology career in 1977 at the Dubuque Otolaryngology clinic. In 1986 he joined the hearing department of Heartland AEA, where he was employed for 28 years before retiring.

In 1992, Bill was one of the founding members of the Iowa Newborn Audiology Committee (the forerunner to the EHDI Advisory Committee), and was one of the original audiologists who worked to train hospital personnel and spread universal newborn hearing screening throughout Iowa in the mid/late 1990's. Part of his responsibilities at Heartland AEA included providing newborn hearing rescreens and diagnostic hearing evaluations for children from birth to three-years-old. He is looking forward to his new role with EHDI.

Bill lives in Ames with his wife, Peg. When they can, they enjoy spending time in Newport Beach, CA and Okoboji, IA.



A Note Regarding EHDI-PALS:

Dear Audiologists,

The Early Hearing Detection and Intervention—Pediatric Audiology Links to Services (EHDI-PALS) Directory is a great place for families to learn about your facility's pediatric audiology services.

EHDI-PALS is a web-based directory and search engine designed to help parents, hospital personnel, and physicians identify pediatric audiology facilities that will meet the individual needs of a child and his or her family. Facilities listed in EHDI-PALS must have the appropriate equipment and audiology services to evaluate and treat children who are less than 5 years of age. Additionally, these services must be provided by licensed audiologists.

If you haven't done so in the past year, please complete the 10-to 20-minute online survey at www.ehdi-pals.org. Each facility's online profile is developed from the information you provide. With your own created user name and password, you will

be able to update this information, as needed and will receive annual reminders to keep your information current. There is no cost to be listed.

Parents and medical professionals use EHDI-PALS every day. Don't miss this opportunity to showcase the services that your facility offers. If you have any questions please email hearing@ehdipals.org.

Many thanks for your continued service to children!

**Sincerely,
EHDI-PALS Advisory Group and
Iowa EHDI**

We want to hear from you.

We value your feedback and are here to answer any questions you may encounter throughout the hearing screening and follow-up process. Below is contact information for our dedicated staff. We look forward to hearing from you.

State EHDI Coordinator

Tammy O'Hollearn
Iowa Department of Public Health
(515) 242-5639 - direct
(800) 383-3826 - toll free
tammy.ohollearn@idph.iowa.gov

EHDI Follow-Up/Family Support Coordinator

Shalome Lynch
Iowa Department of Public Health
(515) 725-2160 - direct
(800) 383-3826 - toll free
shalome.lynch@idph.iowa.gov

EHDI Program Assistant

Jinifer Cox
Iowa Department of Public Health
(515) 281-7085 - direct
(800) 383-3826 - toll free
Jinifer.cox@idph.iowa.gov

EHDI Intern

Emily Sadecki
Iowa Department of Public Health
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Audiology Technical Assistance

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University of Iowa Hospitals and Clinics
Center for Disabilities and Development
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Emily Andrews, Au.D., CCC-A
University of Iowa Hospitals and Clinics
Center for Disabilities and Development
(319) 384-6894
emily-andrews@uiowa.edu

Bill Helms, Au.D., CCC-A
University of Iowa Hospitals and Clinics
Center for Disabilities and Development
(515) 450-1132
bhelms@isunet.net



Additional support from...

The Iowa Family Support Network, formerly known as Early ACCESS Iowa, provides a coordinated intake and referral system to assist families, child healthcare providers, and other professionals with information and support, as well as linkages to resources for young children ages zero to five. Families, child healthcare providers, and other professionals have access to a toll free phone number to make referrals and obtain information about family support services, group based services, IDEA Part C early intervention known as Early ACCESS, hearing rescreens, diagnostic assessments and other community support networks in Iowa. Information specialists are available via telephone Monday – Friday 8 am-6 pm 1-888-IAKIDS1 (1-888-425-4371).

Please take a moment to visit the website! <http://www.iafamilysupportnetwork.org/>

A message from:



Iowa's Early Intervention (IDEA Part C) System



Vision:

Every infant and toddler with or at risk for a developmental delay and their families will be supported and included in their communities so that the children will be healthy and successful.

About Early ACCESS:

Who does Early ACCESS serve?

Early ACCESS is for families with young children, birth to age 3. To be eligible for Early ACCESS, a child may have either a health condition or disability that affects his or her growth and development; or have delays in one or more areas, including cognitive development, physical development (ex. vision and hearing) communication development, social or emotional development and/or adaptive development.

What happens when a child is referred?

Every family referred to Early ACCESS is assigned a service coordinator. The family, service coordinator, and any other necessary early intervention providers determine if the child is eligible, identify child and family needs, coordinate services, and learn new information, discovering what works best for each child and family.

What is provided to families?

For children and families that qualify and enroll in Early ACCESS, early intervention services provided to children are based on the needs and goals of the child and family. A variety of disciplines, such as: early childhood teachers, speech language pathologists, physical therapists and audiologists, are providers of early intervention services in Iowa. Early ACCESS builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development by coaching families to embed intervention strategies in the child and family's daily routines.

For more information, visit: www.iafamilysupportnetwork.org
Call 1-888-425-4371 or Email: iafamilysupportnetwork@vnsia.org

Mission:

Early ACCESS builds upon and provides supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities.

WHAT is early intervention?

Early intervention is a system of services that **helps infants and toddlers with or at risk for developmental delays or disabilities**. Early intervention focuses on helping the caregivers of eligible infants and toddlers learn how to support their child learn the basic and brand-new skills that typically develop during the first three years of life, such as: physical (reaching, rolling, crawling, and walking); cognitive (thinking, learning, solving problems); communication (talking, listening, understanding); social/emotional (playing, feeling secure and happy); and self-help (eating, dressing).

WHY is early intervention important?

1. Early childhood impacts later success.

A child's brain will grow the most during the first five years of life, reaching 90 percent of its final size. 700 new neural connections are made per second. These neural connections build a child's brain architecture that is heavily influenced by the "serve and return" experiences they have with their primary caregivers and social environment.

2. Children's social, emotional & physical health is essential for school readiness, academic success and overall well-being.

When young children do not achieve the milestones linked to healthy development, they are at risk to do poorly in the early school years, putting them at increased risk for school failure, juvenile delinquency, adult mental health concerns and other problems.

3. Intervention is more effective and less costly when provided earlier rather than later in life.

High quality early intervention services can change a child's developmental trajectory and improve outcomes for children, families and communities.

Improving follow-up after newborn screening

A look at the demographic variables that may lead to increased children lost to follow-up as investigated by University of Iowa honors student, Gabrielle Watson.

By: Lenore Holte, PhD, CCC-A



Gabrielle presents her work at the Spring Undergraduate Research Festival at University of Iowa.

While the Iowa EHDI program has achieved a very high rate of newborn hearing screening, we still have challenges in losing babies to follow-up after referring them after screening. The EHDI staff recently enlisted the help of a University of Iowa honors student, Gabrielle Watson, to help investigate what factors may explain which babies are more likely to be lost in the process.

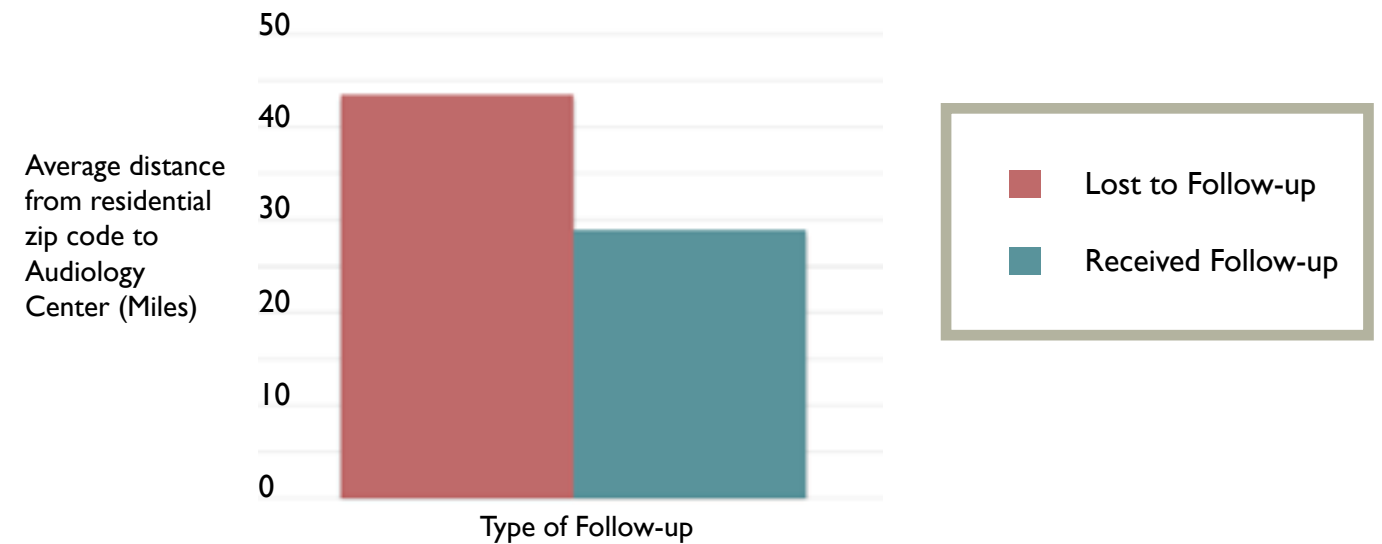
The purpose of Gabrielle's study was to evaluate demographic variables that may contribute to an increase of children lost to follow-up after a newborn hearing screening. Demographic data and newborn hearing screening results were taken from the electronic birth certificate and the Iowa EHDI database. A logistic regression was used to determine statistical significance of these various child-specific variables. Major results are shown in the two graphs to the right: Children who were lost to follow-up were more likely to live farther from a pediatric diagnostic audiology clinic, live in an urban area and have a mother with lower educational level.

This information will help the EHDI program determine how to reduce children lost to follow-up. Possible solutions being discussed include training more audiologists to perform pediatric diagnostic services to reduce distance to assessment. The EHDI program will also continue to find more effective and accessible ways to provide public information on the importance of early detection and intervention for children who are deaf or hard-of-hearing.

"Other than the data collection process I really enjoyed presenting my project. I loved when I had an opportunity to explain my project to a person who knew nothing about the field of Audiology and have them leave with an understanding of the importance of my project." - Gabrielle

Gabrielle's project was accepted for a poster presentation at the Research at the Capitol Day in Des Moines on March 24, 2015. After getting a tour of the capitol, she was able to talk to state legislators about her project and its implications for public policy. Ann McCarthy from the Board of Regents was particularly interested, as was Representative Dave Jacoby from Coralville. The Iowa EHDI staff would like to thank Gabrielle for her contributions to our programs and to congratulate her on this honor.

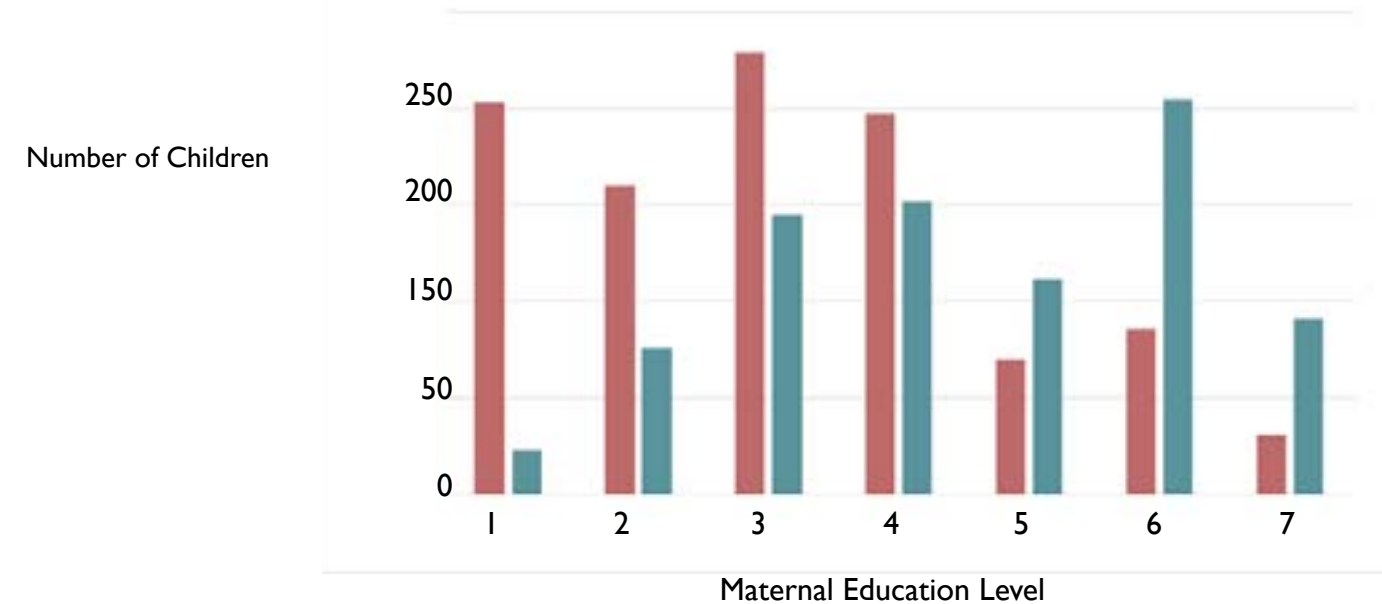
Average Distance in Miles from Residential Zip Code to Pediatric Diagnostic Audiology Centers in Iowa and Bordering States



Average Distance in Miles from Residential Zip Code to Pediatric Diagnostic Audiology Centers in Iowa and Bordering States. The graph above displays the average distance of each child's residential zip code to the closest pediatric diagnostic audiology clinic.

Results

Maternal Education Level - Overall



Maternal Education Level. The graph above displays the number of children who were lost to follow-up and received follow-up based upon maternal education level (Numbers on the x-axis indicate level of education from least (1=8th grade or less) to most (7=completed graduate school)).

Thank you.



Iowa's Early Hearing Detection & Intervention Program

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www.idph.state.ia.us/iaehdi