Maine’s EHDI Process

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What is EHDI?

• Early Hearing Detection and Intervention
• Prior to the establishment of a federal universal newborn infant hearing screening program in 1999, less than 10% of newborns in the U.S. were screened for hearing loss
• As a result, 47% of children born with hearing loss were not diagnosed with hearing loss until their third birthday or later
• 2000 US Congress authorized and supported funding to establish statewide EHDI Programs
• AAP EHDI is part of a cooperative between the AAP and the Maternal Child Health Bureau
• AAP EHDI Goals:
  • 1. Every child receives an appropriate and timely hearing screening, and when indicated, a diagnostic evaluation following the EHDI guidelines
  • 2. Every child who is found to be D/HH receives comprehensive and coordinated care within the medical home model that maximizes development, language and medical outcomes
  • 3. Pediatricians and healthcare teams caring for D/HH children have up to date resources, guidelines and strategies beginning from hearing screening and continuing through identification and intervention

What is the Role of the EHDI Chapter Champion?

• Disseminating information: through AAP chapter newsletters and other media to the pediatrician community about what is going on related to EHDI in the state
• Education/educational awareness: EHDI guidelines
• Acting as a liaison between the state EHDI Coordinator and the pediatric community
• Participating in state EHDI advisory meetings
American Academy of Pediatrics EHDI Program Evaluation 2019

When describing the role of the pediatrician in managing potential hearing loss in a young infant, the most common themes included the following:

• connecting families with resources
• providing support with follow up
• coordinating referrals
• being a medical home.
Nearly all pediatricians interviewed expressed that they were not very familiar with their state's family support organizations.

- Concerned that many pediatricians did not know the steps to take after initial hearing screening failure
- Many pediatricians minimized failed hearing screening to make them feel better rather than focusing on care coordination and referral
- Families report while their pediatrician does have good listening skill and is culturally sensitive, they often fail to ask how their child's condition impacts the family
American Academy of Pediatrics
EHDI Program Evaluation
2019: Families

• 50% of all families are not receiving care in the medical home model
• 33% of families identified the audiologist as their medical home

Maine EHDI Survey - Providers

Respondents = 45
- Pediatricians: 35%
- Family Practitioners: 28%
- Non physician provider: 7%
- Sub speciality provider: 4%
- Hospital Medicine: 2%
- Other: 2%
How familiar are you with the EHDI newborn hearing screening guidelines?

- Extremely Familiar: 16%
- Very Familiar: 26%
- Somewhat Familiar: 18%
- Not so Familiar: 16%
- Not at all Familiar: 24%

How familiar are you with the coordination of care needed for children who are deaf or hard of hearing?

- Extremely familiar: 7%
- Very familiar: 27%
- Somewhat familiar: 27%
- Not so familiar: 30%
- Not at all familiar: 9%
How familiar are you with community resources for your pediatric patient who is deaf or hard of hearing?

- Extremely Familiar: 27%
- Very familiar: 9%
- Somewhat familiar: 33%
- Not so familiar: 29%
- Not at all familiar: 2%

How familiar was your primary care provider with the EHDI recommendations, referrals needed and community resources available for your family?

- Extremely familiar: 31%
- Very familiar: 19%
- Somewhat familiar: 13%
- Not so familiar: 38%
- Not at all familiar: 13%

Maine EHDI Survey – Families
Maine’s EHDI Process

THE MAINE EDUCATIONAL CENTER FOR THE DEAF AND HARD OF HEARING

Maine's EHDI Process

Early Hearing Detection

Early childhood hearing detection and intervention at your fingertips!

Go through our guided process to get the answers you need!

Check out our additional resources for parents and providers!

Open