



Have You Heard?

Welcome Spring!

Along with the warmer weather, and upcoming-beach days, the Connecticut Early Hearing Detection and Intervention Program of the Family Health Section here at DPH has embarked on creating a quarterly newsletter to be distributed among staff at all CT birthing facilities across the state.

We are excited about this new project, and envision this as a tool to enhance communication to and from hospital newborn screening staff.

There are plenty of changes coming in the fu-

ture, especially trainings for the new computer system, and keeping the lines of communication open will be especially timely during that transition phase. We will have a question and answer section, data section, updates and would like to highlight a hospital each issue.

We hope you will enjoy and utilize the tips, facts, stories and data we will present, and we welcome any submissions (stories, questions, pictures) for future newsletters.

And, Have You Heard?

Amy delivered a beautiful baby boy this April, and will be on her maternity leave for a few months. If there are any questions, please call Kathy.

Happy Spring!

Amy, Kathy and Ann



Amy's new addition - Baby Austin passed his newborn hearing screen!

Newborn Hearing Screening Program Updates

Thank you to all who responded to our survey - here's some of what we learned from your responses:

- ❖ 81% of hospitals have a policy in place regarding how hearing screening results are to be conveyed to the baby's mother and primary care provider.
- ❖ 81% of hospitals include both pass and refer results on the infant's discharge summary.
- ❖ When a well baby does not pass the newborn hearing screening,
 - 61% of hospitals refer the baby to an audiologist
 - 39% of hospitals schedule the baby to return for an outpatient hearing rescreen
 - AND 74% of hospitals schedule a follow-up appointment for the baby prior to discharge, when possible.

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- ❖ The number of people who use the Newborn Screening System in each hospital:
 - Ranges from 2 to 125
 - Average number: 17

Did You Know?

- Some degree of hearing loss is present in 1 to 6 per 1,000 newborn infants.
- More than 90% of the children with permanent hearing loss are born to “hearing” parents.
- Infants with hearing loss can be fit with amplification before they are 1 month old.

With appropriate family-centered intervention, normal language, cognitive, and social development for infants with hearing loss is likely.



Medical Home 101

What is a Medical Home?

Not a building, house or hospital, but rather...

- ☉ An approach to providing health care services in a high-quality, cost-effective manner
- ☉ A means for children & families to receive care they need from a professional they know & trust
- ☉ An improved system where care coordination is the keystone

Components of a Medical Home:

- Accessible
- Family-Centered
- Continuous
- Comprehensive
- Coordinated
- Compassionate
- Culturally-Competent

In future issues, we'll address each of the essential components, & why the American Academy of Pediatrics believes that every child deserves a medical home.

The Connecticut Early Hearing Detection and Intervention (EHDI) Program of the CT Department of Health strives to assure all babies are screened at birth, and that those with a hearing loss are diagnosed early and enrolled in an Early Intervention program, if eligible. The mission is to provide early hearing detection and intervention in an effort to prevent speech, language and other delays and support children in reaching their maximum potential.

If there are ever any questions or concerns about the EHDI program, feel free to call either Kathy Britos-Swain, at 860-509-8180 or Ann Gionet at 860-509-8069.



THIS MONTH'S KEY MESSAGE:

It is important not to downplay a referral!

If a baby does not pass the hearing screening this does not necessarily mean he or she has a hearing loss, but we cannot be sure without additional testing.

We're on the web!
www.ct.gov/dph

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***Screen at birth, diagnose by three
months, intervene by six months***



In a Medical Home, professionals & families act as partners to identify & access all medical & non-medical services. These services help children & families achieve their maximum potential, & improve health outcomes for all Connecticut's children.

The term “medical home” is defined as an active process, a philosophy of care that emphasizes the role of the primary care physician, particularly for children who have special needs.

Infants who refer on a newborn screening & are subsequently diagnosed with hearing loss are suddenly swept into the currents of pediatric audiology care & the world of early intervention. The hospital staff becomes the crucial first contact with a world that is, most often, unfamiliar and frightening. It becomes essential for staff to engage families with the most current information & support them through this challenging first step on the exciting journey of parenthood. Arming parents with valuable information helps foster advocacy and ensures the best possible outcome for their child.