

# February 2021 EHDI Quarterly Newsletter & Universal Newborn Hearing Screening Data



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## Newborn Hearing Screening Data

[Newborn Hearing Screening Data - 4th Quarter](#)

## EHDI Materials Order Form

[EHDI Order Form](#)

# Words Matter

Sharing newborn hearing screening results with parents can be uncomfortable and difficult. But it is crucial that we get it right. The ramifications to a child's development can be detrimental when we get it wrong. Since the inception of universal newborn hearing screening, we have been able to decrease the age of identification of hearing loss significantly which has allowed for early intervention for babies and families leading to better outcomes for speech and language development. But this only occurs when families understand and follow the newborn hearing screening process. New parents are overwhelmed by the information and teaching they receive at the hospital, so while for this I am focusing on the verbal message, please also make use of written information to give to families (see EHDI Material Order Forms above).

There are 3 possible outcomes of a newborn hearing screening: pass, pass with risk factors, and refer. Let's take a deep dive into how to convey this information to families in an understandable, meaningful way.

The baby **passed!** This is the easiest to convey as it is the information that every parent wants to hear. Remember, this is a snapshot of that babies hearing, today. While the baby passed the screen, it appears that hearing is normal, if the parents have any concerns about the baby's hearing or speech and language, they should discuss with the pediatrician as hearing can change.

The baby **passed with risk factors!** This conversation is a little trickier. In this instance, the baby passed the hearing screen, so we think the hearing is fine...today. But we have concerns that the baby's hearing could change due to some risk factors that the screener identified. We want the parent to know that it is important that the baby's hearing be monitored closely, and we want the parent to be watching their baby's developmental milestones and addressing any concerns with the pediatrician and/or pediatric audiologist. Many facilities schedule these babies for follow-up testing with a pediatric audiologist for 6 months post-discharge for this monitoring.

The baby **referred.** This is the difficult conversation to have with parents. For this conversation is best to stick with what we know. The baby did not pass the hearing screening at this time. We do not know why but we have concerns that the baby could have hearing loss and we need to take another look with another screen. We want the parent in a "Don't worry but Don't wait" mode. Time is of the essence in this situation. If a parent does not seek timely follow-up, the baby's speech and language can lag behind his/her peers significantly. This can have a devastating impact on a child's development. It is crucial that screeners stick to the script. Do not dismiss this important message or wash it down with notions about equipment issues, etc.

One useful tool to have near the hearing screen equipment is the [Newborn Hearing Screening "REFER" Results to Families](#) resource. This will help remind screeners of correct messaging.

Submitted by Shelly Schindler, EHDI Regional Audiology Consultant

# Knowledge of Family Support Availability Helps Screeners Portray Confidence

When the nurse told me that my baby failed the newborn hearing screen, I was a little concerned. When I got the final diagnostic, I became worried about my child's future. I didn't know anyone with a hard of hearing child, or anyone who grew up hard of hearing. Back then, there was very little support in place so that I could feel more confident in my child's future.

Now, national EHDI goals have been added to help make sure families receive support following identification. By 6 months of age, the goal is for parents to be enrolled in a program providing parent-to-parent support. Michigan Hands & Voices is a parent-led organization that offers one-on-one visiting with experienced parents, called Guide By Your Side<sup>®</sup>.

By 9 months of age, parents should be enrolled in a program providing Deaf or Hard of Hearing adult-to-parent support. Again, Michigan Hands & Voices offers these opportunities for families. See our events flyer for some examples. We offer more than 40 events per year!

When Hearing Screeners understand the vast amount of support available to families, they can project an attitude of confidence and positivity. Rather than a negative, sad experience, parenting a child who is deaf or hard of hearing can open doors and opportunities. Hearing Screeners can contribute to a family's positive journey by portraying confidence in that family's first step.

Make sure parents know that more information is needed to understand their baby's hearing level. If hearing loss is ultimately identified, there is plenty of support available. Michigan Hands & Voices is here to help!

Submitted by Karen Wisinski, Assistant Director - Michigan Hands & Voices

<https://www.mihandsandvoices.org/>

[Michigan Hands & Voices Upcoming Events](#)

## Maternal Infant Health Summit

[Maternal Infant Health Summit](#)

This year's Summit will be held on June 28 – 29, 2021 on a virtual platform and the theme is Raise Your Voice! The conference seeks to continue to create synergy and align priorities between public and private organizations as well as provide educational opportunities that will allow members to keep abreast of the latest developments in the field and delve further into the root causes of inequities.

Registration information coming soon!

# Advancing Equity in Maternal Infant Health

The Michigan Department of Health and Human Services in partnership with Michigan Public Health Institute is proud to release the training series **Unconscious Bias: One Part of a Bigger Problem**.

This two-part, on demand series discusses unconscious or implicit bias and its relationship to health equity. Although the Unconscious Bias series may be the first step participants take in their journey towards health equity, it is also an excellent and concise refresher of key concepts and ideals related to health equity. During the series participants will gain an understanding of health equity and unconscious bias and their impacts on health outcomes and health disparities. Participants will also learn about root causes of health inequities and levels of oppression. Part two of the Unconscious Bias series focuses on clinicians and health care professionals. This training will help participants explore unconscious bias and learn to apply practical tools to mitigate the impact of bias in the healthcare field.

Please visit the [Maternal Infant Health, Health Equity website](#) to view the Unconscious Bias series, along with a wealth of related webinars, trainings, resources, and tools. The movie **Toxic** is also available to view on the [Maternal Infant Health website](#) courtesy of the March of Dimes.

## [REPORT: Doula Services for improving Birth Outcomes](#)

This report examines the history and current work of doulas, the lack of recognition many face in clinical settings and the structures they operate within, including community-based doula programs. Doulas have shown to be an empowering and effective resource to reduce racial disparities in birth outcomes.

The report is part of the Birth Equity Education Project, produced by Michigan Council for Maternal and Child Health (MCMCH) in partnership with the Institute for Health Policy at Michigan State University. MCMCH was awarded a W.K. Kellogg Foundation grant which will produce a series of knowledge products focused on key strategies to reduce racial disparities in maternal and infant health.

MCMCH has an accompanying policy guidance document --[Advancing Doulas in Michigan](#)-- that outlines several policy considerations to enhance the availability and viability of doulas.

## [REPORT: Infant health inequality has increased since 2010 in the United States](#)

After decades of narrowing gaps in health between infants born to American mothers, infant health inequality is increasing, portending a rise in health and social inequity that could last for decades.

## REPORT: Five Experts Reflect on the Health Equity Implications of the Pandemic

From the Robert Wood Johnson Foundation - As the novel coronavirus swept the globe, structural racism drove its disproportionate impact on communities of color in our nation. As we look ahead to a new year, experts weigh in with thoughts and hope for shaping a healthier, more equitable future.

# Reminder: Newborn Hearing Screening Results Cards

Friendly reminders for completing the Hearing Screening Results cards:

- It's a New Year! Please remember to use 2021 (not 2020) when entering the "date screened" information.
- Please remember that the "0" is above the "1" under the date screened section (below in red).

Please feel free to reach out if you have any questions regarding completion of the Newborn Screening Results cards.

**BABY**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ GENDER MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

BIRTH DATE \_\_\_\_\_ BIRTH TIME (Military) \_\_\_\_\_ BIRTH WT. (gms) \_\_\_\_\_ WKS GESTATION \_\_\_\_\_ SINGLE BIRTH \_\_\_\_\_ MULTIPLE BIRTH \_\_\_\_\_ BIRTH ORDER A B C D ANTIBIOTICS? NO YES

SPECIMEN DATE \_\_\_\_\_ COLLECTION TIME (Military) \_\_\_\_\_ NICU or SPECIAL CARE? NO YES ANY RBC TRANSFUSION? NO YES DATE \_\_\_\_\_

MEDICAL RECORD # \_\_\_\_\_ Collected By (initials) \_\_\_\_\_ SP CARE \_\_\_\_\_

ANY TPN FEEDING? NO YES HISPANIC NON-HISPANIC WHITE BLACK AMERICAN INDIAN ASIAN/PACIFIC ISLAND. ARAB DESCENT MULTIRACIAL

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MOM/BABY STEROID TX? NO YES

Please completely fill shapes when entering hearing results **HEARING SCREENING RESULTS**

**SCREENED**

DATE SCREENED

0	M	M	D	D	2	1
1						
2						
3						
4						
5						
6						
7						
8						
9						

Left Ear:  Pass  Refer Right Ear:  Pass  Refer

Test Method:  AABR  DPOAE  ABR  TEOAE

**NOT SCREENED**

Equipment Failure  Restlessness  Other \_\_\_\_\_

Newborn discharged  Environmental noise  NICU hearing pending  Parent refusal  Transfer to another facility

XXXXXX

Hearing Results: Enter demographics on top copy. Detach this sheet before blood collection. Enter results.

# EHDI Contact Information

## MICHIGAN DEPARTMENT OF HEALTH AND HUMAN SERVICES EARLY HEARING DETECTION AND INTERVENTION

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Michigan EHDI Web Page: [www.michigan.gov/EHDI](http://www.michigan.gov/EHDI)

## [EHDI Contact Information](#)

*[Become a foster parent through Michigan Department of Health & Human Services foster care program.](#)*



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