

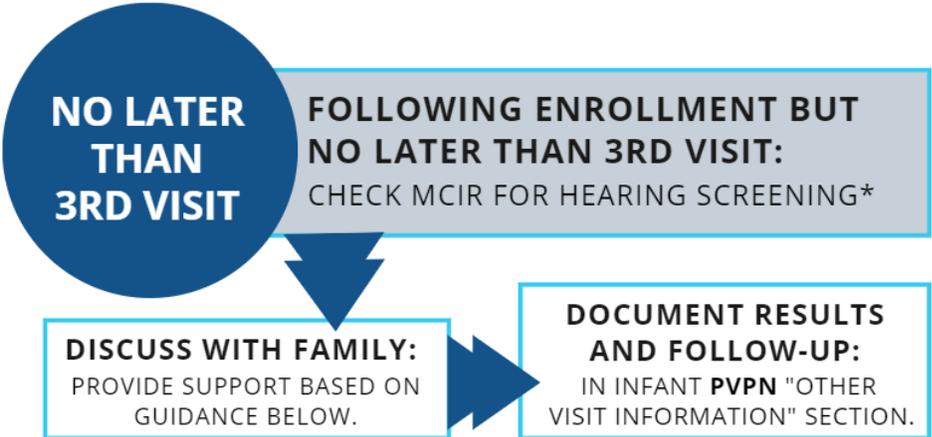
# MIHP MCIR GUIDANCE AND SUPPORT: HEARING

Maternal Infant Health Program (MIHP) Home Visitors must review and discuss hearing screening results located in the Michigan Care Improvement Registry (MCIR) and follow up as appropriate. This document provides **guidance for viewing data in MCIR and supporting families with appropriate resources**. Please note that this document is MCIR-specific and is therefore not all-encompassing for other aspects related to hearing. For example, this document reviews the timeframe to review results in MCIR, yet discussion and support for this area may occur at additional visits.

*Reminder: Please ensure that appropriate staff have been provided MILogin and MCIR access. The MIHP website has instructions for MIHP how to gain access to MCIR.*

## WHEN IS MCIR HEARING ASSESSMENT EXPECTED PER MIHP GUIDELINES?

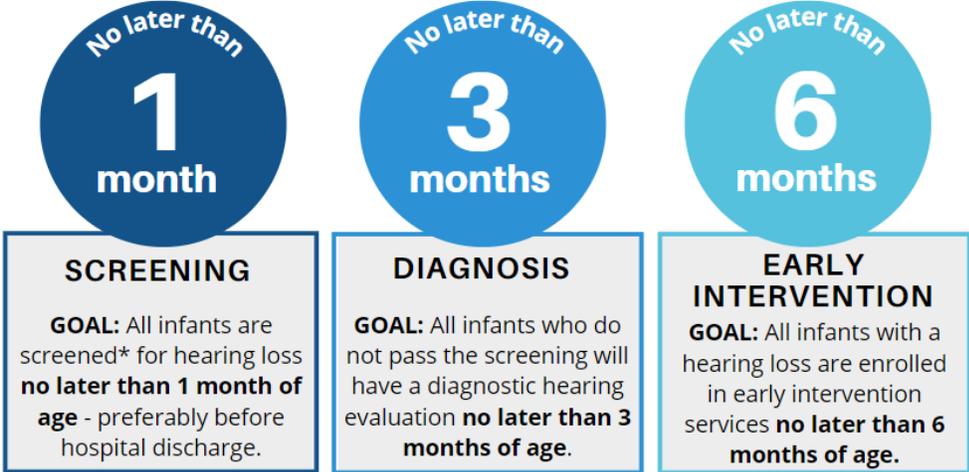
Home visitors must check MCIR hearing results **as soon as possible following enrollment, but no later than the third visit following enrollment**. Below is an overview of this process:



\*Note: The first **immunization** MCIR assessment also aligns with this timeframe.

## KEY POINTS

To best support families, it is crucial to understand the goals and timeline for the Early Hearing Detection and Intervention (EHDI) Program, known as the 1/3/6 goal:



\*Or re-screened if indicated

## Key points for home visitors

- Emphasize the timelines above when working with families.
- Coordinate referrals for families to access services needed, using the guidance below.
- Discuss the importance of **early** evaluations. Early evaluations allow testing during a young baby’s natural sleep and reduces the need for sedated procedures. It is easier to test young babies than older babies and allows prompt intervention if necessary.
- If failed hearing screen, ask family if they are aware of where to go for repeat testing and help coordinate an appointment and transportation if needed.
  - Your reminders can help reduce the number of families who are “lost to follow-up” and ensure they receive services needed.

## WHERE ARE HEARING RESULTS LOCATED IN MCIR?

Upon locating an infant’s MCIR record, the **Immunizations** section will be the default display.

1. To review hearing results, select the **Hearing (EHDI)** tab.



- If no tab is present, contact Michelle Garcia at 517-335-8878 or send a secure email to [garciam@michigan.gov](mailto:garciam@michigan.gov). Situations where a tab may not be present: Babies not linked correctly and it needs to be manually done, babies not born in Michigan, or parent refused a bloodspot test.
- If there is a tab but no results, EHDI has not yet received the hearing screen results.

2. Results will be displayed for the screening as well as diagnostics if applicable. Take note of the results for **left ear, right ear, as well as the color of the square** shown in the Hearing tab. The square color aligns with the color-coding on guidance.

Take note of color.

Locate results in “Initial and Rescreen”: and “Diagnostic” sections and apply guidance below.

“Test Method” Definitions	
<b>AABR</b>	<b>Automated Auditory Brainstem Response (A-ABR)</b> <ul style="list-style-type: none"> <li>• A type of screening method</li> <li>• This is the recommended method for NICU graduates.</li> <li>• Process: Patches are placed on the baby. Soft sounds are played using small earphones. The patches record brain waves related to hearing.</li> </ul>



**Table A: Guidance for “Initial and Rescreen Results”**

SCREENING RESULT	GUIDANCE BASED ON SCREENING RESULT
No results	<ul style="list-style-type: none"> <li>• If there is an EHDI tab but no results, EHDI has not yet received data. Ask family if they received results (i.e., discharge paperwork) and provide applicable guidance.</li> <li>• If family reports a hearing screen did not occur, encourage family to contact the birth facility to set up a hearing screen ASAP and <b>no later than 1 month of age</b>. The birth facility is responsible for coordinating this initial screen.</li> </ul>
Passed both ears	<ul style="list-style-type: none"> <li>• Monitor speech-language development and provide information on milestones:               <ul style="list-style-type: none"> <li>○ <a href="#">Checklist available on EHDI brochure</a></li> </ul> </li> </ul>
Incomplete	<ul style="list-style-type: none"> <li>• Encourage family to contact the birth facility to schedule a screening ASAP and <b>no later than 1 month of age</b>. The birth facility is responsible for coordinating the initial screen.</li> </ul>
Failed one or both ears	<ul style="list-style-type: none"> <li>• Ask family if they are aware of where to go for repeat testing and help coordinate an appointment and transportation if needed. Not sure where to go? See below:               <ul style="list-style-type: none"> <li>○ If it is a failed <u>initial</u> screen, a rescreen should occur <b>no later than 1 month of age</b>. Contact the EHDI program if the family needs guidance: Contact Michelle Garcia at 517-335-8878 or send a secure email to <a href="mailto:garciam@michigan.gov">garciam@michigan.gov</a>.</li> <li>○ If it is a failed <u>rescreen</u>, check for “diagnostic results” and use guidance in Table B. Contact the EHDI program if the family needs guidance: Contact Michelle Garcia at 517-335-8878 or send a secure email to <a href="mailto:garciam@michigan.gov">garciam@michigan.gov</a>.</li> </ul> </li> <li>• Emphasize the importance of <b>early</b> evaluations (reduces need for sedated procedures).</li> </ul>

**Table B: Guidance for “Diagnostic Results”**

DIAGNOSTIC RESULT	GUIDANCE BASED ON DIAGNOSTIC RESULT
No results	<ul style="list-style-type: none"> <li>• If diagnostic evaluation is indicated (due to failure of a re-screen) but did not occur, emphasize the importance for this to occur <b>no later than 3 months of age</b>. Ask family if they are aware of where to go; help coordinate an appointment and transportation if needed.</li> </ul>
Within Normal Limits	<ul style="list-style-type: none"> <li>• Monitor speech-language development and provide information on milestones:               <ul style="list-style-type: none"> <li>○ <a href="#">Checklist available on EHDI brochure</a></li> </ul> </li> </ul>
Undetermined and Conductive (Transient)	<ul style="list-style-type: none"> <li>• Further diagnostic testing needed; help coordinate an appointment and transportation if needed. Facility list is <a href="#">available here</a> or call 517-335-8878.</li> </ul>
Sensorineural/ Auditory Neuropathy/ Mixed/ Conductive (Permanent)	<ul style="list-style-type: none"> <li>• Permanent loss confirmed; ask family about what services have been recommended and assist family in accessing them. Emphasize the importance for early intervention to occur <b>no later than 6 months of age</b>. Examples of services may include:               <ul style="list-style-type: none"> <li>○ <a href="#">Early On</a></li> <li>○ <a href="#">Guide by Your Side</a> parent support</li> <li>○ <a href="#">Michigan Hands and Voices</a> parent support</li> <li>○ Following through on medical referrals and treatment (ophthalmology, genetics, neurology, etc.)</li> </ul> </li> </ul>

If data in MCIR differs from what the family reports to you, please contact Michelle Garcia at the EHDI program: 517-335-8878 or send a secure email to [garciam@michigan.gov](mailto:garciam@michigan.gov).

## GUIDANCE APPLICABLE TO ALL INFANTS

- Emphasize the 1/3/6 goals and timelines.
- If barriers exist for family to access services, identify and coordinate referrals (i.e., transportation, audiologist, etc.). Assess follow-through in subsequent visits.
- Monitor speech-language development and provide families with information on milestones: [Checklist available on EHDI brochure](#) (also available in [Spanish](#) and [Arabic](#)).
- Discuss the importance of **early** evaluations which allows testing during a young baby’s natural sleep and reduces the need for sedation. It is easier to test young babies and allows prompt intervention if necessary.
- If infant experiences middle ear disease, encourage family to receive prompt treatment. Chronic middle ear effusion can lead to chronic mild hearing loss which can impact speech and language development.
- Parental concern about hearing is a recognized indicator to justify referral for evaluation.
- Provide information from the “Resources” section below as appropriate.

## RESOURCES AND ADDITIONAL INFORMATION

Resources to help families navigate screening, diagnosis, and early intervention:



### QUESTIONS?

- Visit [www.Michigan.gov/EHDI](http://www.Michigan.gov/EHDI) or call 517-335-8878.

## DOCUMENTATION

- Record results and follow up in the “Other visit information” section of the infant PVPN.
- To best coordinate services, contact EHDI with information about families who need follow-up services (i.e., testing, diagnosis, early intervention). For example, inform EHDI about families who need services, but they refuse, or families who need services but face barriers to utilization.