
Ensuring Family Success Through a Single Point of Entry into Early Intervention: The Regional Colorado Hearing Resource Coordinator (CO-Hear)

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Disclosures and Conflicts

We have no financial gains to disclose

We have no conflicts of interest



Learning Objectives

- Participants will learn about the critical and timely first contact and resources shared with families with newly identified infants and toddlers through a single point of entry, the CO-Hear coordinator.
- Participants will understand the power of a dedicated professional collaborating and overseeing the efficacy of the CHIP program and journey with individual families from identification to transition to Part B services.
- Participants will consider recommendations for best practices and resources to enhance their early intervention program related to family support and ongoing mentoring and collaboration.

Who is the CO-Hear?

- ❖ We are a group of 8 professionals from a variety of disciplines (TOD, SLP, Audiology, Social Work, Deaf Adult, etc.)
- ❖ Coordinator of Colorado Home Intervention Program (CHIP)
- ❖ Provides specialized service coordination
- ❖ Collaboration and team member with EI system (assessment/IFSP development)
- ❖ Family Support
- ❖ Mentor and provide materials to CHIP Facilitators
- ❖ Referral and data tracking
- ❖ Collaborates with community agencies
 - Interagency Coordinating Councils (ICC)
 - Colorado Infant Hearing Advisory Committee (CIHAC)
 - EHDI
 - Pediatric Audiology groups
 - Colorado Hands and Voices
 - Local School District Child Find teams
 - DHH Professionals



Colorado System

Referral

- Audiologist refers to CO-Hear
- Attempted contact with family within 48 business hours
- Initial visit with family within 2 weeks of referral

Part C Collaboration

- Referral to Community Centered Board (CCB) for direct services
- Collaboration with CCB service coordinator
- Assessment and initial IFSP for direct service provider.

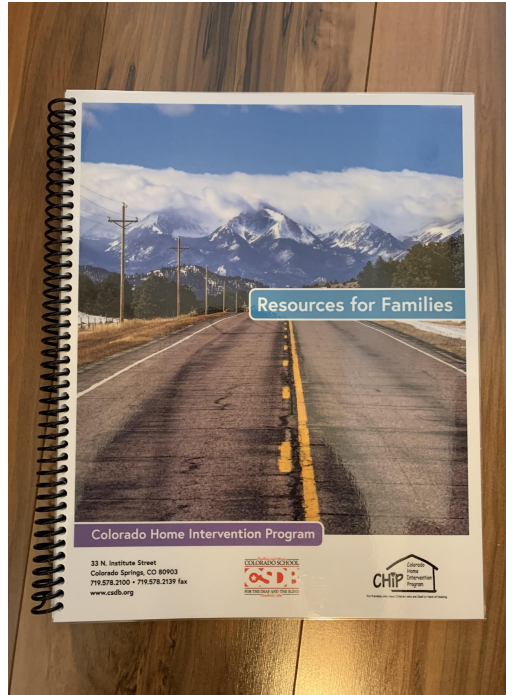
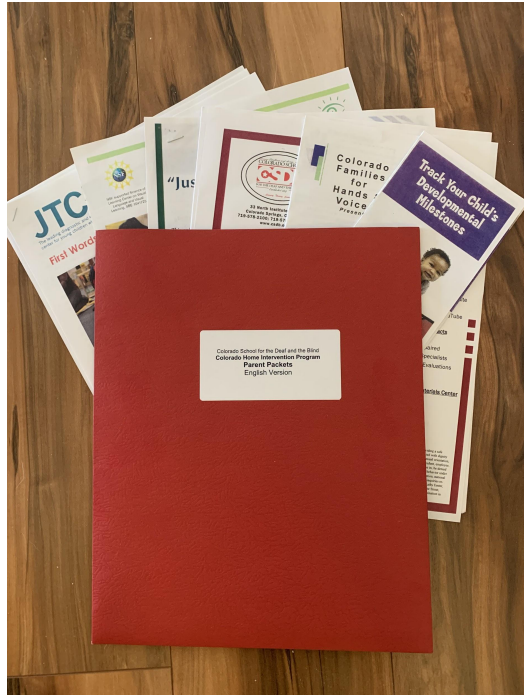
Intervention

- CHIP Facilitator (DHH specialized direct service provider) provides services
- CO-Hear provides mentoring, support, and trainings

Transition

- 2 years, 3 months
- Collaboration with Child Find Evaluation Teams

Initial Resources



- Parent Resource Folder
 - bilateral/unilateral
- Parent Manual
 - English and Spanish
- Welcome Bag



Aligning with JCIH and Best Practices

CO-Hear Role	JCIH Recommendations (2019)
Referrals for both Unilateral and Bilateral hearing differences are sent to the CO-Hear from the Audiologist	All infants who are deaf or hard of hearing in one or both ears should be referred immediately to early intervention in order to receive targeted and appropriate services.
Timely, single point of entry into the early intervention system	A simplified, coordinated point of entry into an intervention system appropriate for identified children is optimal.
Team member for assessment and IFSP development	Early intervention services should be offered through an approach that reflects the family's preferences and goals for their child, and should begin as soon as possible after diagnosis but no later than six months of age and require a signed Part C of IDEA (Individuals with Disabilities Education Act, 2004) Individualized Family Service Plan.
Works with the Service Coordinator for rights, follows HIPAA for all appointments and meetings, parent consent for all additional opportunities, honors parents as a valued team member	The EHDI system should be family-centered with infant and family rights and privacy guaranteed through informed and shared decision-making, and family consent in accordance with state and federal guidelines.

(2019). Year 2019 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs. *Journal of Early Hearing Detection and Intervention*, 4(2), 1-44. DOI: <https://doi.org/10.15142/jepk-b748>
Retrieved from <https://digitalcommons.usu.edu/jehdi/vol4/iss2/1>

Aligning with JCIH and Best Practices

CO-Hear Role	JCIH Recommendations (2019)
<p>Provides parent packet, manual, and ongoing information about resources, programs, supports (regionally, statewide, and nationally)</p>	<p>Families should have access to information about all resources and programs for intervention, and support and counseling regarding the child’s educational and communication/language needs</p>
<p>FAMILY Assessment at regular intervals to assess whole child development, training and mentoring of CHIP Facilitator, access to additional assessments</p>	<p>Professionals with appropriate training should provide ongoing surveillance of communication development to all children with or without risk indicators.</p>
<p>CHIP Facilitator provides weekly services, trained and mentored by CO-Hear, access to additional resources</p>	<p>Appropriate interdisciplinary early intervention programs for identified infants and their families should be provided by professionals knowledgeable about the needs and requirements of children who are deaf or hard of hearing (JCIH, 2013)</p>
<p>Scope and Sequence for CHIP Facilitators, padlets to access resources, ongoing workshops and trainings related to best practices, conversations at reviews and annuals to ensure families are being “served”</p>	<p>Early intervention programs should recognize evidence-based practices and build on strengths, informed choices, language traditions, and cultural beliefs of families they serve</p>

Additional Opportunities and Resources to Support Early Intervention

Assessment	Referrals	Programs	Early Intervention Supports
LENA	Hands and Voices	Early Literacy Programs	CHIP Scope and Sequence
VCSL	Ascent	Colorado Shared Reading Project (CSRP)	Padlets
Communication Matrix	Anchor Center for DeafBlind	Toddler Programs	Toy Time for Tots
FAMILY Assessment		Music Together	

Benefits to the Family

- ❖ Primary EI specialist to coordinate, collaborate, and support throughout the evaluation/IFSP process and beyond
- ❖ Knowledgeable about local and regional resources and programs
- ❖ Helps ensure best practices are being implemented
- ❖ Provides unbiased information about communication modalities, therapy options, program opportunities, etc.
- ❖ Consistent person through the early intervention journey
- ❖ Provide professional development opportunities for CHIP Facilitators
- ❖ Share additional community events and opportunities
- ❖ Access to speciality providers as need (AAC, LSL, ASD, VCSL, etc.)
- ❖ Family connections

“She ensured (our son) never got lost in his medical and language development journeys and that we had every resource and answer we needed to make the best decisions for our family”
~Parent in CHIP



Key Takeaways and Considerations

- ❖ Families report being grateful for ongoing support and guidance/connections from the expertise we provide, with up to date information/research/best practices
- ❖ Families develop increased confidence and ability to advocate for their child(ren)
- ❖ General EI providers/coordinators and pediatric audiologists are grateful for the collaboration and expertise we provide from entry into Part C through the transition to Part B services
- ❖ CHIP facilitators receive quality mentorship in their field of expertise along with ongoing training opportunities to ensure they are implementing best practices as outlined in the JCIH guidelines



THANK YOU!



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