

# **SPECIALIZED CARE FOR CHILDREN**



# Illinois Early Hearing Detection and Intervention (EHDI) Program:

## Illinois Department of Public Health (IDPH)

- ▶ Center for Disease Control and Prevention (CDC)

Cooperative agreement

- ▶ Reporting; tracking and follow-up

## Illinois Department of Human Services (DHS)– Early Intervention

- ▶ 25 Child and Family Connections (CFCs)

- ▶ Enrolling children with a confirmed hearing loss into Early Intervention services

## Univ. of Illinois at Chicago (UIC) – DSCC

- ▶ Health Resources and Services Administration (HRSA) Grant
- ▶ Systems development and quality improvement
- ▶ 3-year grant (April 2017- March 2020)

# HRSA EHDI Grant Goals (April 2017 – March 2018)

Goal 1: To Improve EHDI System Performance through the EHDI Working Group

**Goal 2: Establish 1 Learning Community in High-Need Areas of the State.**

Goal 3: Improve the Quality of EI Services for Infants and Toddlers Who Are Deaf or Hard-of-Hearing.

Goal 4: To Educate Stakeholders Through Statewide Outreach.

Goal 5: Disseminate EHDI activities and achievements.

## **Program Objectives:**

30% increase (from baseline) in # diagnosed before 3 months of age

25% increase (from baseline) in # referred to EI before 6 months of age

20% increase (from baseline) in # enrolled in EI before 6 months of age

# PURPOSE

**To improve operation of the EHDI system by engaging health professionals, increasing parent involvement, and promoting the adoption of medical homes...**

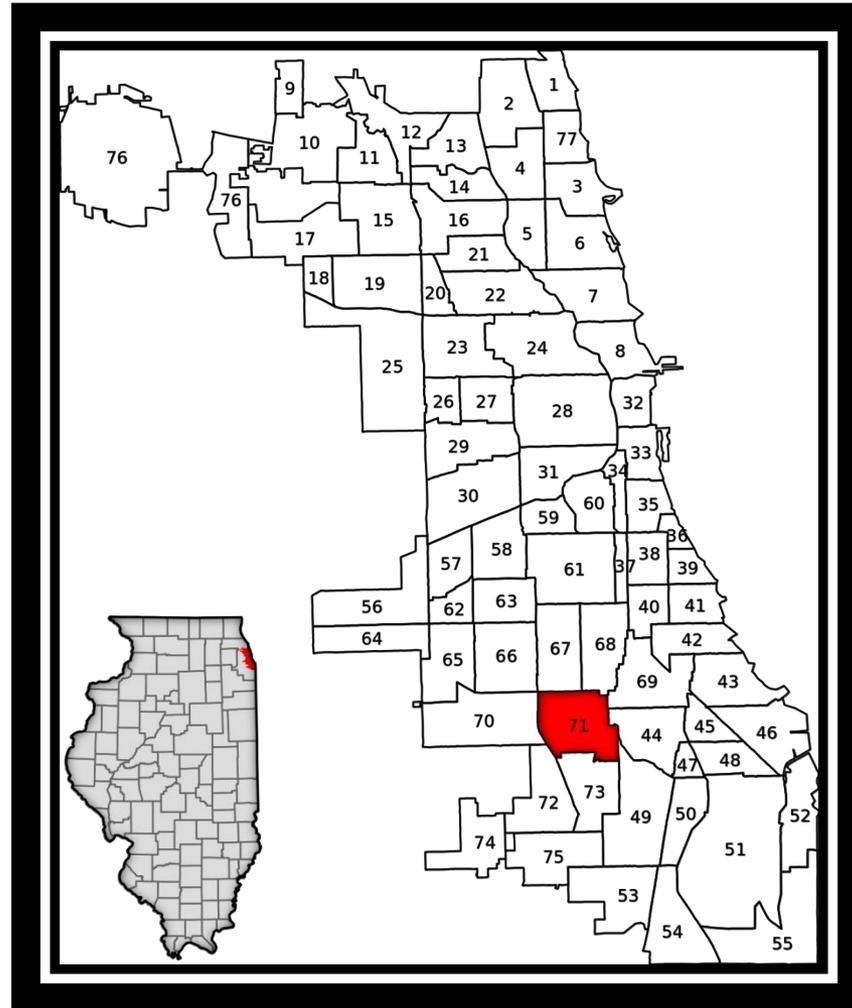
**To assist the EHDI program's in increasing the knowledge and engagement of EHDI stakeholders ...**

**To improve outcomes of children who are Deaf or Hard of Hearing ...**

# Topics Presented to the Learning Community:

1. JCIH 1-3-6 timeline recommendations
2. Risk factors for late-onset hearing loss
3. Peer to peer information sharing among participants
4. Improving care coordination for children who are DHH
5. Partnering with Title V CYSHCN programs on systems integration and family centered care coordination
6. Providing family-centered care that is culturally competent
7. Developing collaborative leadership skills for members of family organizations
8. Engaging family partners and pediatric clinicians
9. Linking newborn hearing screening data to programs such as vital records, immunization, and blood spot screening.

# First Step: Determine Target Areas



# Second Step: Membership

**UIC- Division of Specialized Care for Children (DSCC)**  
**Illinois Department of Public Health (IDPH)**  
**Illinois Department of Human Services (IDHS)- EI**  
**EHDI Chapter Champion**  
**UI Health- Department of Audiology**  
**St. Bernard Hospital**  
**Chicago Department of Public Health**  
**Child and Family Connections (Early Intervention)**  
**Federally Qualified Health Center**  
**Illinois Hands & Voices (Guide By Your Side program)**  
**Chicago Hearing Society**  
**CHOICES for Parents**

# Benefits of Participation

- Training (NBHS, Program Goals, Quality Improvement Model- PDSA)
- Technical Assistance
- Resources and tools provided by state and national experts
- An opportunity to provide input and improve hearing outcomes!

# IL EHDI Learning Community: Structure

## ➔ Format:

- » First half of the meeting: Presentations
- » Second half: Breakout Sessions (PDSA Cycles Discussion)

## ➔ Frequency:

- » Face-to-Face Meetings: Quarterly  
(Follow-up via Teleconferences in between)

## ➔ Location: Chicago, IL

## ➔ Time Commitment: 1 year (at least)

*ASL interpreter available*

# **Plan-Do-Study-Act (PDSA) Cycles**

**(Sept 2017- Feb 2019)**

# PDSA 1

**PLAN:** Hospital will forward the newborn hearing referrals to the local health department (LHD), LHD staff will follow-up with the family to remind them of the scheduled outpatient appointment.

## **ACTIVITIES:**

A form was faxed to LHD with the following info.: (demographics; contact info; DOB; NBS results; appointment info.; PCP's name and contact info.)

LHD provided feedback to the hospital on an as-needed basis. There was no specific set timeframe.

An updated form with the results of a baby who returned for their out-patient screening would be faxed to the LHD from the hospital.

# PDSA 2

**PLAN**: For the babies that referred on their NBS, the hospital screener will ask the mother for a second point of contact (immediately after not passing) and enter that information into HiTRACK.

## **ACTIVITIES/RESULTS**:

Asked every mom for a second point of contact

6/19 shared the second point of contact (either the grandmother's number or the boyfriend's)

For the most part, they shared the same number as the one on the birth certificate

# PDSA 3

**PLAN:** CFC (EI) office will send an update regarding the family's enrollment status at 30 days post referral from IDPH. If the family has not enrolled in EI, a reason for non-enrollment will be given.

**ACTIVITIES:**

Referrals were faxed from IDPH to the appropriate CFC. CFC staff (nurse consultant) searched for each child in EI database (cornerstone).

**RESULTS:**

From Jan 2017 until Feb 2019:

46 children were identified including 2 from the target area

- 23 had IFSPs in place
- 10 were unable to contact or declined EI
- 9 were out of CFC area or moved
- 2 not found in EI data base
- 2 in progress

# PDSA 3

**Of children with IFSP's:**

**-17 consents sent to IDPH**

**-2 consents pending/in progress**

## **CHALLENGES/BARRIERS:**

- o Fax Back Form- Required Field (parent signature)**
- o EI staff turnover and training for process**
- o No back-up personnel to continue this PDSA activity**

# PDSA 4

**PLAN:** For the next few months, the LHD staff will contact LTF families referred to them by IDPH to assist them with scheduling an outpatient appointment at an appropriate audiology clinic. Then the LHD will report the date of the appointment to IDPH. If the family has concerns regarding payment for services, the LHD will connect the family with DSCC to complete the scheduling process.

## **ACTIVITIES:**

Once the referral was received from IDPH, the PH nurse contacted all families via:

- Home Visits/Off Site Visits (Work sites ,Shelters etc.)
- Letters
- Telephones Calls
- Visits to the Healthcare Providers (to get results ,receive referral from the doctors office)
- Visits to the Hospitals (to get results)

# PDSA 4 Continued...

- **Receiving help from DSCC (DSCC helps families with no medical insurance; help to expedite the Medicaid process for approval and pay for the diagnostic hearing test (when needed))**
- **Assist the families with scheduling the outpatient appointments with an audiology provider**
- **The Public Health Nurse reports to IDPH when**
  - 1. contact has been established**
  - 2. retesting has been scheduled**
  - 3. successful home visit**
  - 4. when the nurse receives the results from the retest**
  - 5. unable to reach the families**

# PDSA 4 Challenges/Barriers

- Delayed processing of the families' Medicaid application
- Noncompliant families
- Unable to schedule audiology appointments (health insurance is pending or issues with transportation)
- Families without a PCP
- Inaccurate home addresses
- Some doctors offices refusing to fax referral to Hospitals
- Disconnected phones

# IDPH,EHDI CLOSED CASES (2017/2018)

- ❖ TOTAL CLIENTS =26
- ❖ PASSED HEARING TEST = 6
- ❖ FAILED HEARING TEST = 1
- ❖ Face to Face/Phone  
Non-compliant= 4 + 1MOVED
- ❖ UNABLE TO LOCATE = 12
- ❖ EI REFERRALS / GUIDE BY YOUR  
SIDE= 1



# IDPH EHDI Closed case (2017)

## ❖ Total Clients = 15

- ❖ PASSED HEARING TEST = 5
- ❖ FAILED HEARING TEST = 4
- ❖ FACE TO FACE/PHONE/NON-COMPLIANT = 3
- ❖ UNABLE TO LOCATE= 3
- ❖ EI REFERRALS / GUIDE BY YOUR SIDE= 4



# IDPH EHDI CLOSED CASES (2018)

- ❖ **TOTAL CLIENTS = 10**
- ❖ PASSED HEARING TEST = 3
- ❖ FAILED HEARING TEST= 2
- ❖ FACE TO FACE/PHONE/NON-COMPLIANT= 2
- ❖ UNABLE TO LOCATE= 3
- ❖ EI REFERRALS / GUIDE BY YOUR SIDE=  
1MOTHER REFUSED SEVICES **INFANT**  
**HAS HEARING AID**

# IDPH,EHDI CLOSED CASES (2018)

## TOTAL CLIENTS = 14

- ❖ PASSED HEARING TEST = 4
- ❖ FAILED HEARING TEST = NONE REPORTED
- ❖ FACE TO FACE/PHONE/ NON-COMPLIANT= 5 + (**1 REFUSED TO OPEN DOOR FOR NURSE**)
- ❖ UNABLE TO LOCATE= 3
- ❖ HOSPITAL SENT RESULT TO IDPH= 1



# IDPH,EHDI CLOSED CASES as of February (2019)

## **TOTAL CLIENTS = 19**

- ❖ PASSED HEARING TEST = 1
- ❖ FAILED HEARING TEST=1
- ❖ FACE TO FACE/PHONE/NON-COMPLIANT= 2  
+1VACANT HOUSE+1HOMELESS D/V SHELTER +1  
REFUSED NURSE ENTRY+1 REFUSED NURSE  
ENTRY=6
- ❖ UNABLE TO LOCATE= 9 +2 TWINS NURSE WENT TO  
TWO DIFFERENT ADDRESSES
- ❖ EI REFERRALS / GUIDE BY YOUR SIDE= 1

# IDPH,EHDI OPEN CASE (2018/2019)

## **TOTAL CLIENTS = 14**

- ❖ PASSED HEARING TEST = 1
- ❖ FAILED HEARING TEST = 1
- ❖ PENDING/HOME VISITS/  
DOCTOR'S APPOINTMENT = 12



# ***THANK YOU!!!***

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